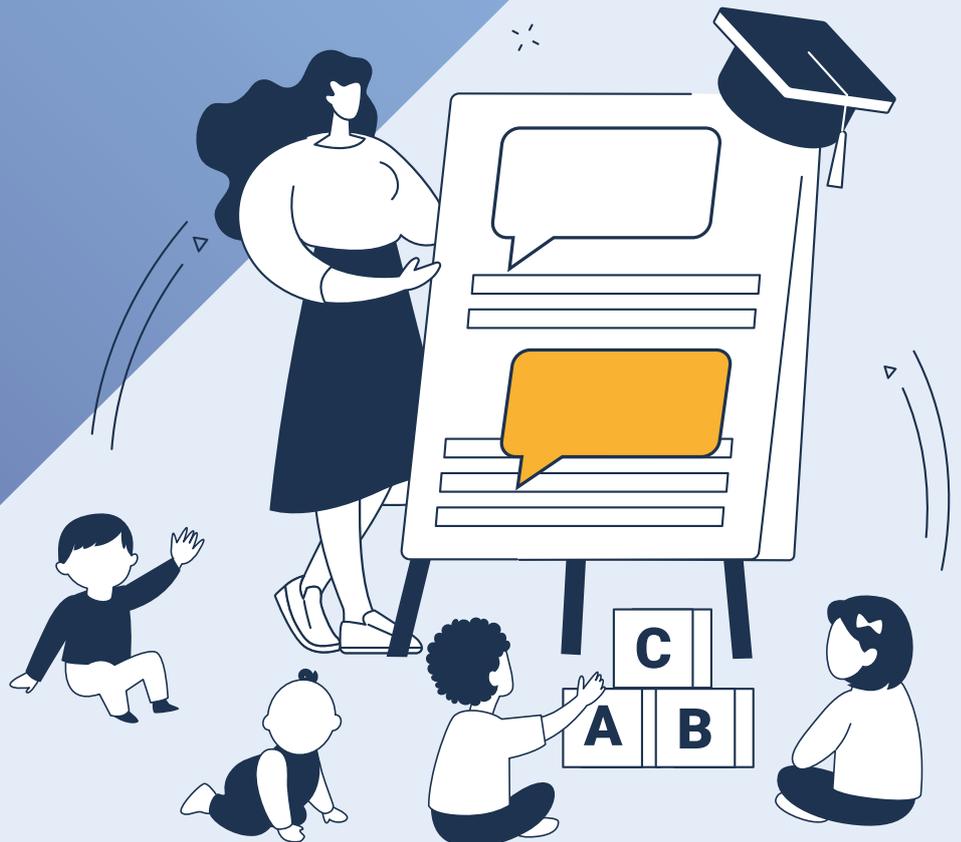




COMPREHENSIVE ASSESSMENT OF THE

CHILDCARE LANDSCAPE IN LEBANON

A MIXED
METHODS
STUDY



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ACKNOWLEDGEMENTS

This Report was prepared by a World Bank – International Finance Cooperation team led by Angela Elzir Assy that included Paola Buitrago Hernandez, Marilia Magalhaes, Lama Abou Char, Rhea Jabbour, Tamara Azar and Yasmine Ossaily. Field work and survey implementation was conducted by Statistics Lebanon and complemented with updated data from nurseries collected by Yara Abou Jaoude and Lara Atallah from the World Bank. The publication benefited from peer review comments from Lourdes Rodriguez Chamussy, Amanda Devercelli, and S Anukriti, and additional contributions from Jonna Maria Lundvall. The team would like to thank Cynthia Yammine for invaluable administrative support in the process, translator Nayla Younes, and editor Burton Bollag. The design of the report was developed by Sarah Alameddine. The work was conducted under the general guidance of the Mashreq Country Director, Jean-Christophe Carret; the Poverty and Equity Global Practice Managers Johannes Hoogeveen and Alan Fuchs; and the Lebanon Country Operations Officer Mouna Couzi.

The team is grateful for the support and feedback received from Ms. Pamela Zgheib, head of the Mother and Child Department at the Ministry of Public Health (MOPH); as well as from the National Commission for Lebanese Women (NCLW): Claudine Aoun, President, and Jad Najem, head of the Committee on Economy, Labor and Sustainable Development. The team is grateful for the active participation and feedback on the assessment and recommendation from attendees in the following roundtables: (i) Government Roundtable: moderated by Ms. Pamela Zgheib (MOPH) and including Ms. Rita Karam (Ministry of Social Affairs), Ms. Denise Dahrouj (Ministry of Labor), Ms. Laure Wehbe (National Social Security Fund) and Ms. Hilda Khoury (Ministry of Education and Higher Education); and (ii) Civil Society Organizations and International Agencies Roundtable: moderated by Ms. Shereen Abbadi (World Bank) and including Ms. Lina Torossian (International Rescue Committee), Ms. Rouba Arja (UNESCWA), Ms. Hana Joujou (Syndicate of Nursery Owners in Lebanon), Ms. Fadia Safi (SESOBEL), and Mr. Fayez Jalloul (Al Mabarrat Association).

The Report was prepared as part of the Mashreq Gender Facility (MGF).¹ This Facility provides technical assistance to Iraq, Jordan and Lebanon to strengthen the enabling environment for women's economic participation and improve women's access to economic opportunities. The MGF is a World Bank - IFC initiative mainly supported by the Umbrella Facility for Gender Equality (UFGE) in partnership with the governments of Canada and Norway. UFGE has received generous contributions from Australia, Canada, Denmark, Finland, Germany, Iceland, Ireland, the Netherlands, Norway, Spain, Sweden, Switzerland, the United Kingdom, the United States, the Bill and Melinda Gates Foundation, and the Wellspring Philanthropic Fund.

¹ <https://www.worldbank.org/en/programs/mashreq-gender-facility>

ABBREVIATIONS

BT	Baccalaureate Technique
CAPI	Computer Assisted Personal Interview
CAS	Central Administration of Statistics
CATI	Computer Assisted Telephone Interview
CCIA-BML	Chamber of Commerce, Industry & Agriculture-Beirut and Mount Lebanon
CCIA-S	Chamber of Commerce, Industry & Agriculture-Sidon and South Lebanon
CERD	Centre for Educational Research and Development
ECCE	Early Childhood Care and Education
ECD	Early Childhood Development
ECE	Early Childhood Education
FGD	Focus Group Discussions
HH	Household
HR	Human Resources
KG	Kindergarten
KII	Key Informant Interview
LBP	Lebanese Pound
LFHLCS	Labor Force and Household Living Conditions Survey
LFP	Labor Force Participation
LFPR	Labor Force Participation Rate
LT	License Technique
FLFP	Female Labor Force Participation
MA	Master of Art
MEHE	Ministry of Education and Higher Education
MENA	Middle East and North Africa
MGF	Mashreq Gender Facility
MOPH	Ministry of Public Health
MOSA	Ministry of Social Affairs
NCLW	National Commission for Lebanese Women
NGO	Non-governmental organization
NSSF	National Social Security Fund
OECD	Organization for Economic Co-operation and Development
PhD	Doctor of Philosophy
PPES	Probability Proportionate to Estimated Size
SDC	Social Development Center
SL	Statistics Lebanon
SPGL	Syndicat des Propriétaires de Garderies au Liban
TS	Technique Supérieure
USD	United State Dollars
WBG	World Bank Group

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EXECUTIVE SUMMARY



The multiple crises in Lebanon have had significant impact on poverty, employment and jobs. The country is going through one of the most severe economic and financial crises globally since the mid-nineteenth century. The compounded effects of the devaluation and instability of the local currency, the surging inflation of fuel and food prices and the challenging health conditions imposed by the COVID 19 pandemic have contributed to pushing an increasing number of households into poverty, unemployment and idleness. The country, however, faced important labor market challenges even before the crises started in 2019: jobless growth, low labor force participation rates (especially among women), high unemployment (in particular among youth), and skills mismatch. Moreover, those employed were mostly working in informal, low-productive jobs. Since the crises started, joblessness (unemployment and inactivity) among the working age population has increased due to lay-offs or people leaving their jobs and closures of a significant number of firms, and informality has increased. The high economic idleness among the Lebanese is a drain on the economy and does not adequately capture or allow for the growth of the country's human capital. Additionally, the Beirut Port explosion in August 2020 adversely affected the daily operations of a large number of businesses in the capital.²

While demographic trends have reduced the size of the working age population and, consequently, the size of the labor force, prioritizing investment toward increasing women's entry into the labor market would be key to extending the demographic dividend. In Lebanon, fertility rates dropped significantly in the 1990s and have been stable since the 2000s at around 2 children per woman. Life expectancy has increased constantly from 75 to 79 in two decades.³ These trends affect the size of the working age population and, consequently, of the labor force and the size of the dependent population to the workforce. The working age population (15-64 years old) was increasing constantly until 2015, and Lebanon could still be going through a demographic transition that would allow it to capitalize on the demographic dividend. This means that a large (and increasing) share of the population

was becoming of working age, and thus, the size of the labor force would have continued to increase. However, between 2015-2021, the working age population decreased by an average compounded annual growth rate of 3.5 percent. Another factor significantly affecting the size of the labor force is the number of people who have emigrated from Lebanon, which is difficult to estimate precisely given the lack of official data available.⁴ Emigration is not a new phenomenon, and Lebanon has a long history of its citizens moving abroad. However, the recent increase in emigration since 2019 is notable for its scale and the speed at which it has occurred, which has led to concerns about brain drain and the long-term economic and social impacts on the country. This has started to exert significant constraints on key sectors, such as care, where emigration has led to reductions in service delivery.

In Lebanon, most women are not engaged in any income-generating activity, being either economically inactive or unemployed. The most recent labor force survey by the Central Administration of Statistics (2022 follow up to the Labor Force Survey)⁵ shows that 78 percent of women in Lebanon are out of the labor force – thus only 22 percent are economically active. For men, it is the other way around, with 66 percent economically active and 34 percent considered inactive. In addition, out of the economically active women, 33 percent are unemployed – compared to 28 percent among men. Furthermore, a very small percentage of women is in the potential labor force.⁶

The economic and financial crisis in Lebanon since 2019, coupled with the Beirut Port explosion and the COVID-19 pandemic, have been a set-back for previous gains in women's economic empowerment. This is evident from the results of two labor force surveys conducted by the Central Administration of Statistics (one conducted pre-crisis in 2018-2019⁷ and a follow up in 2022 as mentioned above), that shows that the overall labor force participation rate (LFPR) has declined by six percentage points, from 49 percent in 2018-2019 to 43 per cent in 2022. The LFPR among men declined from 70 percent in 2018/2019

2 <https://blogs.worldbank.org/arabvoices/what-mega-crisis-have-done-lebanese-firms-and-workers>

3 Population data is based on UN World Population Prospects numbers; fertility rates and life expectancy numbers are based on World Bank Databank.

4 Data from UN DESA estimated the net migration in 2022 to stand at -115,100 and the total number of emigrants at mid-year 2020 to be 856,800 people.

5 <http://www.cas.gov.lb/index.php/latest-news-en/201-labour-force>

6 Potential labor force: unavailable jobseekers (persons without employment who are seeking employment but are not available) and available potential jobseekers (persons without employment who are not seeking employment but are available).

7 <http://www.cas.gov.lb/images/Publications/Labour%20Force%20and%20Household%20Living%20Conditions%20Survey%202018-2019.pdf>

to 66 percent in 2022, while the LFPR among women decreased from 29 percent in 2018/2019 to 22 percent in 2022. This is also evident from a recent World Bank survey among formal firms the shows that net job losses for women were on average 5 percentage points higher than for men. This is in a context where women represent less than a third of the total full-time workforce in surveyed firms.⁸

Unmarried women without children tend to have relatively higher labor force participation rates whereas married women and, even more so, married women with children below schooling age tend to have the lowest rates.⁹ According to the State of Women in Lebanon report¹⁰, female participation rates are at their peak in women in their mid-twenties and thirties, but then steadily decline until their fifties. This negative relationship, well established in the literature, is generally associated with the fact that women disproportionately face time constraints due to family responsibilities. In addition to time spent on domestic chores, women in Lebanon spend an average of more than five hours a day on childcare, while men spend an average of less than two.¹¹ According to the 2021 Arab Barometer country report for Lebanon, the top three most cited barriers among Lebanese citizens to women's participation in the labor force were structural and included: the lack of childcare options (69 percent), followed by low wages (54 percent) and lack of means of transportation (47 percent). The other two barriers were cultural: men given a priority for the jobs, and mixed workplaces being an issue with women working alongside men.¹²

Sixty percent of surveyed mothers of young children in Lebanon identified “childcare responsibilities” as the main reason they do not join the workforce. However, data indicates low enrollment and limited utilization of childcare services, based on the results

of a household survey conducted for this assessment. This might reflect limited availability of childcare services (supply), but also unwillingness of families to use childcare services due to preferences for home care (demand), or a mismatch between demand and supply of childcare services (cost, quality, location, among other things).

Affordable quality childcare options are critically linked to women's economic participation and employment. Although the magnitude of childcare benefits varies between countries, evidence indicates that having more quality childcare services has a positive effect on female labor force participation, employment, and work hours; this is true in both developed and developing countries.¹³ Equally important, expanding the supply of childcare services can also create new employment opportunities for women in that sector.¹⁴

According to the recently published World Bank Mashreq report “Who Cares? Care Work and Women's Labor Market Outcomes in Iraq, Jordan and Lebanon,”¹⁵ improving access to childcare in Lebanon has the potential to increase the labor market engagement of mothers of young children, thus having a sizable impact of FLFP. In Lebanon, FLFP could increase by 2.1 percentage points if more paid childcare services were available, and 6.7 percentage points in case of increased availability of free childcare services. In addition, expanding the coverage of childcare services in Lebanon to serve 25 percent of the current population of children 0-3, and assuming caregiver-to-children ratios of 1:5, would lead to the creation of approximately 9,200 caregiver jobs (this number would go up to 13,400 jobs if considering a share of 35% children 0-3 served). Including all staff needed to run a nursery would lead to higher job creation potential.

8 <https://blogs.worldbank.org/arabvoices/what-mega-crises-have-done-lebanese-firms-and-workers>

9 (i) World Bank Group, (2020). Women's Economic Participation in Iraq, Jordan and Lebanon. State of the Mashreq Women Flagship 1. (ii) World Bank and UN Women. 2021. The Status of Women in Lebanon: Assessing Women's Access to Economic Opportunities, Human Capital Accumulation & Agency. Washington D.C.: World Bank.

10 World Bank Group, (2020). Women's Economic Participation in Iraq, Jordan and Lebanon. State of the Mashreq Women Flagship 1.

11 World Bank and UN Women. 2021. The Status of Women in Lebanon: Assessing Women's Access to Economic Opportunities, Human Capital Accumulation & Agency. Washington D.C.: World Bank

12 <https://www.arabbarometer.org/wp-content/uploads/Public-Opinion-Lebanon-Country-Report-2021-En-1.pdf>

13 For example, in lower and middle-income countries (Halim, Petrova, and Reynolds 2021), as well as in urban Argentina (Berlinski and Galiani 2007), Brazil (Barros et al. 2011; Deutsch 1998), Canada (Lefebvre, Merrigan, and Verstraete 2009), rural Colombia (Attanasio and Vera-Hernandez 2004), the European Union (Del Boca and Locatelli 2006), Japan (Asai, Kambayashi, and Yamaguchi 2015), Romania (Fong and Lokshin 2000), the Russian Federation (Lokshin 2004), and Turkey (World Bank 2015).

14 Devercelli and Beaton-Day, 2020.

15 Redaelli, Silvia; Lnu, Anukriti; Buitrago Hernandez, Sandra Paola; Ismail, Tala. *State of the Mashreq Women Flagship : Who Cares? - Care Work and Women's Labor Market Outcomes in Iraq, Jordan, and Lebanon*. Washington, D.C. : World Bank Group. <http://documents.worldbank.org/curated/en/099000502222338765/P16815701c336d00e095dc093ef29af40a7>

Evidence also demonstrates that investing in quality early childhood care and education (ECCE) has a significant impact on children's cognitive and socioemotional development and on longer-term outcomes. In the short and medium term, the benefits from increased access to ECCE services include improved school readiness, better nutrition outcomes, increased probability of completion of secondary, and reduced involvement in juvenile crime. Long term benefits include better education outcomes and lifelong learning, improved employment prospects and earnings, better health-seeking and behaviors, and less dependency on social assistance systems.¹⁶

This mixed-methods study examines the care arrangements and needs of households with young children in Lebanon and contrast them relative to the provision of childcare services in the country. The study collects new evidence and documents practices, norms, and behaviors around care needs, focusing on the role of women as caregivers and care providers. The analysis focuses on formal, registered services for children in the 0-3 age group and involves primary data collection on both the demand and the supply of childcare.

In light of multiple crises over the past years in Lebanon, the sense of priority for medium to large private sector firms to implement family-friendly and childcare policies competes with an emphasis on survival. The crises have placed a burden on Lebanon's business landscape, causing intense contraction of economic activity coupled with plummeting demand for goods and services, and consequently medium and large firm downsizing and laying-off of a significant number of workers, as mentioned previously (World Bank Group, MENA Region, 2021). For some businesses, the COVID-19 pandemic was an opportunity to reflect internally on the company and improve its strategy, organizational structure and internal policies including ones that support working parents and promote work-life balance.

Support for family-friendly and childcare policies can help the Government of Lebanon's goal of increasing the percent of female labor force participation (FLFP) by 5 percentage points over the next 5 years (Women's Economic Empowerment National Action Plan, 2019). Case studies developed by the International Finance Corporation (IFC) in several developing countries

show that access to affordable and quality childcare services and/or benefits contributes to women's labor force participation which in turn, realizes positive outcomes for children and the retention of talented, skilled, and diverse working parents (IFC, 2017).

Almost all private sector employers in the studied sample said they were familiar with Lebanese labor laws (99 percent) and with the National Social Security laws (96 percent). Additionally, there is near universal corporate compliance with the 10-week paid maternity leave stipulated by the Lebanese labor law, as reported by the surveyed firms. While most surveyed employers do not provide childcare support, the majority of private sector companies reported providing family friendly policies to employees, including maternity and paternity leaves, flexible work arrangements, telecommuting, caring for sick children and work/life programs, a parental leave appraisal system, maternity return to work support programs, and breastfeeding room and lactation breaks.

The following main messages emerge from the assessment of childcare services in Lebanon:

1. *Supply of childcare services in Lebanon is mostly private and geographically concentrated in coastal areas where employment opportunities for women are most available; inland districts have limited availability of services. According to the mapping exercise, most facilities are run by the private sector (81 percent), followed by religious institutions (7 percent), not-for-profit organizations (6 percent) and the public sector (6 percent, mainly by the Ministry of Social Affairs – MOSA).*
2. *There is also a mismatch between supply of center-based providers across cazas and potential demand (population that could potentially demand childcare services) according to the share of population in the 0-3 age group per caza (district). For instance, Akkar caza in the north, which has the third largest share of children 0-3 (9 percent), has 11 providers only. However, the coastal cazas Baadba and El Metn which represent similar shares of population aged 0-3, have a significantly higher number of providers operating in the area (71 and 81 providers, respectively).*

¹⁶ See, among other reviews, (Duncan & Magnuson, 2013) and (Camilli, Vargas, Ryan, & Barnett, 2010) for evidence in the U.S., (Nores & Barnett, 2010) for a review of international evidence outside the U.S. and Canada, (OECD, 2006) and (OECD, 2017) for evidence in OECD countries, more recently, (Devercelli & Beaton-Day, 2020) for evidence in developing countries, and (Cadima, Nata, Barros, & Barata, 2020) for evidence focused on children younger than three.

3. *In addition, the provision of childcare services is geared towards the 1-3 age group and there is a gap in provision for children under one.* Given that paid maternity leave in Lebanon is only 10 weeks, and there's no paid paternity leave, this signals a gap for parents who want and/or need to get back to work after the paid leave is over. Most providers operate on a Monday through Friday basis, and only half of the surveyed providers offer services after 3pm.
4. *The economic crisis in Lebanon has had a severe impact on childcare service providers as well as the affordability and sustainability of such services,* due to both a reduction in household incomes and an increase in the cost of services. According to data gathered in Jan-Feb 2023, 9.5 percent of providers closed their doors due to the compounded effect of the COVID 19 pandemic and the economic crisis. Childcare service providers report that the number of families having trouble paying the fees increased from 2019 to 2021. Moreover, the monthly median price for full day service can be as high as 89 percent of the minimum wage. Additionally, local currency devaluation and the significant increase in fuel prices have hurt providers' profitability, reducing the incentives for new entrants to join the sector. Increased cost of service provision makes it challenging for providers to maintain quality standards in the service.
5. *Although not nationally representative¹⁷ of households with young children, results from a survey of parents of young children (age 0-3) suggest that demand for services is low.* Data gathered from nurseries between January and February 2023 shows that the average capacity utilization number (i.e. children enrolled divided by number of available seats) is 58 percent for the age group 0-5.¹⁸ Only 10 percent of nurseries are operating at full capacity. In most surveyed households, parents are the sole caregivers without additional help. Family members, especially grandmothers, help occasionally in many households but not in a consistent manner. Employed mothers (of young children) are more willing to switch from informal care arrangements to a formal center-based service, as compared to mothers who are unemployed or not in the labor force. In general, over half of surveyed households with young children (57 percent) were not willing to pay for childcare, while about 20 percent are willing to pay. However, in focus group discussions (FGDs), most participants recognized the benefits of high-quality nursery care to children's social, emotional and educational development.
6. *Most women with small children face difficulties joining and remaining in the labor force either because of childcare needs and domestic responsibilities or due to social norms that expect them to be full time mothers.* Employed mothers express that they are expected by society to bear a double burden of a paid job and household work. During the FGDs conducted as part of this study, fear of failure as a mother to care for her children and the well-being of the family, was mentioned by both working and non-working mothers. Employed women also manifest a fear of being criticized by society. There is a strong belief that mothers' care of small children cannot be replaced and as such they should be the main caregivers. Among surveyed mothers, 58 percent agree that looking after the home or family is just as fulfilling as working for pay and 79 percent of surveyed mothers are satisfied with the distribution of the childcare responsibilities in the household.
7. *While the majority of private sector employers offer family-friendly policies, only a limited number provide childcare support, despite its evidence-based positive impact on employee retention, productivity and absenteeism.* Based on a sample of 100 businesses, only 5 percent provide childcare solutions to employees. Their adopted approaches include partnering with near-site private daycares while covering a portion of the fees, providing a direct childcare subsidy to employees, and providing an on-site daycare operated by an NGO in partnership with the public sector. The remaining 95 percent do not provide childcare solutions to employees, and of them, only 15 percent would be willing to consider providing childcare solutions in the future. The reasons behind companies' reluctance to provide childcare solutions to their employees are varied. Half of surveyed employers who do not provide childcare reported that the numbers of employees with children aged 0-5 years at their company are too low to justify a childcare solution, followed by slightly more than a third reporting no intention to assume responsibility, and about a third citing no demand from their employees for childcare solutions. Examples of the types of family friendly policies provided include: maternity and paternity

¹⁷ Refer to section on Methodology for details on the selection of households with young children that were interviewed.

¹⁸ The capacity utilization was calculated with the updated data gathered from the survey conducted between January and February 2023 covering a sample of 228 nurseries selected randomly from the universe n=509.

leaves, flexible work arrangements, telecommuting, caring for sick children and work/life programs, parental leave appraisal system, maternity return to work support programs, and breastfeeding room and lactation break.

8. *There is no comprehensive childcare policy and strategy detailing objectives, implementation plans*

and budget in Lebanon. Laws on childcare are limited to licensing. Moreover, licensing regulations apply exclusively to private (non-state) providers and cover center-based services only, while home-based provision remains unregulated. Statutory minimum quality standards mainly focus on *structural* quality (relatively in line with OECD average standards) and less so on the elements of *process* quality.

BOX 1. KEY DEFINITIONS AROUND CHILDCARE

Childcare can be provided in many different settings and is called different things in different countries. Types of childcare services tend to fall into three categories: home-based care, center-based care, and improvised and unremunerated family arrangements.

Formal care: Refers to care for which recipients or household members pay. It can include institutional (center-based) care, as well as residential (at-home)

Home-based care: Broadly speaking, home-based care falls into two types: (i) care by someone in the child's own home who is sometimes called a nanny or au pair; (ii) childcare provided for a group of children in a caregiver's home.

Center-based care: Centers providing care for young children are generally called daycares, nurseries, or crèches. Preschools and kindergartens can also serve such a childcare function.

Family and other informal care arrangements: These are arrangements that put the burden for care on a friend or family member. This could include taking the child to work or leaving the child with a neighbor, friend, sibling, grandparent, or other relative. This type of care may or may not be remunerated.

Early Childhood Care and Education (ECCE) refers to programs aimed at the holistic development of a child's social, emotional, cognitive and physical needs in order to build a solid and broad foundation for lifelong learning and wellbeing. ECCE comprises *care*, (health, nutrition and child-care in a nurturing environment) and *education* (play, socialization, guidance, and developmental activities), ideally provided in an integrated manner (UNESCO, 2013). While quality care is crucial for all children, as they get older, they also need more formal learning experiences to help them prepare for primary school (Devercelli & Beaton-Day, 2020).

Early Childhood Education (ECE) helps children build strong foundations that will support a lifetime of learning.

Early Childhood Development (ECD) comprises the investments in the physical, cognitive, linguistic, socio-emotional development of young children – from before birth until they transition to primary school.

Source: definition compiled from the following: (i) Devercelli & Beaton-Day, 2020; (ii) Bendini & Devercelli, 2022; (iii) World Bank Early Childhood Development: <https://www.worldbank.org/en/topic/earlychildhooddevelopment>

الملخص التنفيذي

المائة. وثمة عامل آخر يؤثر بشكل كبير على حجم القوى العاملة وهو عدد الأشخاص الذين هاجروا من لبنان، وهو أمر يصعب تقديره بدقة نظراً لعدم توفر البيانات الرسمية³. ليست الهجرة بظاهرة جديدة، وللبنان تاريخ طويل في هجرة مواطنيه إلى خارج البلاد. إلا أنّ الزيادة الأخيرة في معدلات الهجرة منذ العام 2019 ملحوظة بحجمها وسرعة حدوثها، ما أثار مخاوف بشأن هجرة الأدمغة والآثار الاقتصادية والاجتماعية الطويلة الأمد على البلاد. وقد بدأ ذلك يفرض قيوداً كبيرة على قطاعات رئيسية، مثل الرعاية حيث أدت الهجرة إلى تراجع في تقديم الخدمات.

في لبنان، لا يشارك معظم النساء في أي نشاط مدّ للدخل، كونهن إما غير ناشطات اقتصادياً أو عاطلات عن العمل. ويظهر أحدث مسح للقوى العاملة أجرته إدارة الإحصاء المركزي (في عام 2022 متباعدةً لمسح القوى العاملة)⁴ أن 78 في المئة من النساء في لبنان خارج القوى العاملة – وبالتالي فإن 22 في المئة منهن فقط ناشطات اقتصادياً. أما بالنسبة إلى الرجال، فالوضع معاكس، حيث يعتبر 66 في المئة ناشطين اقتصادياً و34 في المئة غير ناشطين. بالإضافة إلى ذلك، 33 في المئة من النساء الناشطات اقتصادياً هنّ عاطلات عن العمل – مقارنةً بـ 28 في المئة من الرجال. كما أنّ نسبة صغيرة جداً من النساء تدرج ضمن القوى العاملة المحتملة⁵.

أدت الأزمة الاقتصادية والمالية في لبنان منذ العام 2019، بالإضافة إلى انفجار مرفأ بيروت وجائحة كوفيد-19، إلى تراجع التقدم المحرز على صعيد التمكين الاقتصادي للمرأة. ويتضح ذلك من نتائج مسحين للقوى العاملة أجرتهما إدارة الإحصاء المركزي (أحدهما تم تنفيذه قبل الأزمة في 2018\2019⁶ وتم استكماله في عام 2022 كما هو مذكور أعلاه)، إذ يظهر أن معدل المشاركة في القوى العاملة بشكل عام قد انخفض بمقدار ست نقاط مئوية، من 49 في المئة في اعوام 2018-2019 إلى 43 في المئة في عام 2022. وانخفض معدل المشاركة في القوى العاملة لدى الرجال من 70 في المئة في اعوام 2018\2019 إلى 66 في المئة في عام 2022، بينما انخفض معدل المشاركة في القوى العاملة لدى النساء من 29 في المئة في اعوام 2018\2019 إلى 22 في المئة في عام 2022. ويتضح ذلك أيضاً في المسح الذي أجراه البنك الدولي مؤخراً والذي شمل شركات في القطاع الرسمي، إذ تبين أنّ صافي فقدان الوظائف لدى النساء أعلى بـ 5 نقاط مئوية مما هو عليه لدى الرجال. ويندرج ذلك في سياق تمثّل فيه النساء أقل من ثلث إجمالي القوى العاملة بدوام كامل في الشركات التي شملها المسح⁷.

تركت الأزمات المتعددة التي يواجهها لبنان أثراً كبيراً على مستوى الفقر والعمالة وفرص العمل. تمر البلاد بإحدى أسوأ الأزمات الاقتصادية والمالية على مستوى العالم منذ منتصف القرن التاسع عشر. وأدت التأثيرات المتفاقمة لانخفاض قيمة العملة المحلية وعدم استقرارها، والإرتفاع المستمر في أسعار الوقود والمواد الغذائية، والظروف الصحية الصعبة التي فرضتها جائحة كوفيد-19، في دفع عدد متزايد من الأسر إلى الفقر والبطالة والخصم الاقتصادي. حتى قبل بدء الأزمة في عام 2019 كانت البلاد تواجه تحديات كبيرة في سوق العمل بما في ذلك نمو غير منشئ للعمالة، وانخفاض معدلات المشاركة في القوى العاملة (خاصة بين النساء)، وارتفاع معدلات البطالة (خاصة بين الشباب)، وعدم التطابق بين المهارات ومتطلبات سوق العمل. علاوة على ذلك، كان العاملون يعملون في الغالب في وظائف منخفضة الأجر (القطاع غير الرسمي) ومنخفضة الإنتاجية. ومنذ بدء الأزمات، ازداد انعدام الوظائف (البطالة والخصم الاقتصادي) بين السكان في سن العمل بسبب التسريح أو ترك الأشخاص لوظائفهم وإغلاق عدد كبير من الشركات، وارتفعت معدلات العمالة في القطاع غير الرسمي. وإن الخصم الاقتصادي المرتفع بين اللبنانيين يستنزف الاقتصاد ولا يستقطب رأس المال البشري في البلاد بشكل كافٍ أو يسمح بنموه. بالإضافة إلى ذلك، فقد أثر انفجار مرفأ بيروت في آب 2020 سلباً على العمليات اليومية لعدد كبير من الشركات في العاصمة¹.

وفي حين أن الاتجاهات الديمغرافية قد أدت إلى انخفاض في عدد السكان في سن العمل، وبالتالي انخفاض في معدلات القوى العاملة، فإن إعطاء الأولوية للاستثمار نحو زيادة مشاركة المرأة في سوق العمل سيكون أساسياً لتوسيع العائد الديمغرافي. في لبنان، انخفضت معدلات الخصوبة بشكل ملحوظ في تسعينيات القرن العشرين وقد كانت مستقرة منذ بداية القرن الواحد والعشرين بمعدل طفلين لكل امرأة. وفي غضون عقدين² ارتفع متوسط العمر المتوقع بشكل مضطرب من 75 إلى 79. تؤثر هذه الاتجاهات على عدد السكان في سن العمل، وبالتالي تؤثر على حجم القوى العاملة وعدد السكان الذين تعيّلهم القوى العاملة. شهد عدد السكان في سن العمل (15-64 عاماً) تزايداً مستمراً حتى عام 2015، وكان ما يزال ممكناً أن يشهد لبنان تحولاً ديمغرافياً يسمح له بالاستفادة من العائد الديمغرافي. هذا يعني أن نسبة كبيرة (ومتزايدة) من السكان كانت ستصبح في سن العمل، وبالتالي، فإن حجم القوى العاملة كان سيستمر في التزايد. و لكن، بين عامي 2015 و2021، انخفض عدد السكان في سن العمل بمتوسط معدل نمو سنوي مرّجّب قدره 3.5 في

1 <https://blogs.worldbank.org/arabvoices/what-mega-crises-have-done-lebanese-firms-and-workers>

2 تستند البيانات السكانية إلى أرقام التوقعات السكانية العالمية للأمم المتحدة؛ تستند معدلات الخصوبة وأرقام متوسط العمر المتوقع إلى قاعدة بيانات البنك الدولي.

3 قدرت بيانات إدارة الشؤون الاقتصادية والاجتماعية التابعة للأمم المتحدة أن صافي الهجرة في العام 2022 سيبلغ - 115,100 وسوف يبلغ العدد الإجمالي للمهاجرين في منتصف عام 2020، 856,800 شخصاً.

4 <http://www.cas.gov.lb/index.php/latest-news-en/201-labour-force>

5 القوى العاملة المحتملة: العاطلين عن العمل الذين يبحثون عن عمل (الأشخاص الذين ليس لديهم عمل والذين يبحثون عن عمل ولكنهم غير متاحين) والأشخاص المتاحين الذين من المحتمل ان يبحثون عن العمل (الأشخاص الذين ليس لديهم عمل والذين لا يبحثون عن عمل ولكنهم متاحون).

6 <http://www.cas.gov.lb/images/Publications/Labour%20Force%20and%20Household%20Living%20Conditions%20Survey%202018-2019.pdf>

7 <https://blogs.worldbank.org/arabvoices/what-mega-crises-have-done-lebanese-firms-and-workers>

وفقاً لتقرير البنك الدولي حول دول المشرق الذي تم نشره مؤخراً بعنوان « من يقدم الرعاية؟ - أعمال الرعاية ونتائج سوق العمل للمرأة في العراق والأردن ولبنان»⁴، إن تحسين فرص الوصول الى خدمات رعاية الأطفال في لبنان يؤدي إلى تحسين فرص مشاركة أمهات صغار الأطفال في سوق العمل، ويؤثر بالتالي بدرجة كبيرة على مشاركة المرأة في القوى العاملة. في لبنان، يمكن أن تزداد مشاركة المرأة في القوى العاملة بنسبة 2.1 نقطة مئوية إذا توفّر المزيد من خدمات رعاية الأطفال المدفوعة، و6.7 نقطة مئوية في حالة زيادة توفّر خدمات رعاية الأطفال المجانية. بالإضافة إلى ذلك، فإنّ توسيع نطاق تغطية خدمات رعاية الأطفال في لبنان لتشمل 25% من الأطفال من عمر صفر الى ثلاث سنوات، مع افتراض أنّ معدّل مقدمي الرعاية لكل طفل هو 1 لكل 5 أطفال، سيخلق هذا التدخل حوالي 9,200 فرصة عمل لمقدمي الرعاية (سيرتفع هذا العدد إلى 13,400 فرصة عمل إذا اعتبرنا أنّ الخدمات ستشمل 35% من الأطفال من عمر صفر إلى 3 سنوات). كما أنّ إشراك جميع الموظفين المختصين في المناصب الإدارية لدور الحضانه يعزز من إمكانية خلق فرص العمل.

وتشير البيانات أيضاً إلى أن الاستثمار الجيد في الرعاية والتعليم في مرحلة الطفولة المبكرة (ECE) له تأثير ملحوظ على النمو المعرفي والاجتماعي والعاطفي للأطفال ويؤثر أيضاً على المحصلات على المدى الطويل. تؤدي زيادة فرص الوصول إلى خدمات الرعاية والتعليم في مرحلة الطفولة المبكرة إلى تحسين الإعداد المدرسي، وتحسين نتائج التغذية، وزيادة احتمال إتمام المرحلة الثانوية، والحد من التورط في جرائم الأحداث على المدى القصير والمتوسط. وعلى المدى الطويل ستؤدي فرص الوصول إلى هذه الخدمات إلى تحسين نتائج التعليم والتعلم مدى الحياة، وفرص العمل وكسب الدخل، وتحسين الصحة والسلوكيات، وأنخفاض الاعتماد على نظم المساعدة الاجتماعية.¹⁵

تقارن هذه الدراسة متعددة الأساليب ترتيبات الرعاية واحتياجات الأسر التي لديها أطفال صغار السن في لبنان بخدمات رعاية الأطفال المتوفرة في البلاد. وتجمع الدراسة بيانات جديدة وتوثق الممارسات والمعايير والسلوكيات المتعلقة باحتياجات الرعاية، مع التركيز على دور النساء كمقدمات رعاية وموفرات رعاية. ويركز التحليل على الخدمات الرسمية المسجلة للأطفال في الفئة العمرية من صفر إلى ثلاث سنوات ويتضمن جمع البيانات الأولية حول كل من الطلب والعرض في مجال رعاية الأطفال.

وبالنظر إلى الأزمات المتعددة التي شهدتها لبنان على مدى السنوات الماضية، أصبحت الشركات المتوسطة والكبيرة في

تسجل النساء غير المتزوجات اللاتي ليس لديهن أطفال معدلات مشاركة أعلى نسبياً في القوى العاملة، بينما تسجل النساء المتزوجات، ولاسيما اللاتي لديهن أطفال دون سن المدرسة، أدنى معدلات المشاركة في القوى العاملة»⁸. ووفقاً لتقرير وضع المرأة في لبنان⁹، فإن معدلات مشاركة الإناث تصل إلى ذروتها لدى النساء في منتصف العشرينيات والثلاثينيات من العمر، ولكن تنخفض هذه النسبة حتى الخمسينيات من العمر. وترتبط هذه العلاقة السلبية، الموثقة في الأدبيات، عموماً بحقيقة أن المرأة تواجه قيوداً زمنية غير متناسبة بسبب المسؤوليات الأسرية. بالإضافة إلى الوقت الذي تقضيه المرأة في الأعمال المنزلية، تقضي المرأة في لبنان ما معدله أكثر من خمس ساعات يومياً في رعاية الأطفال، بينما يقضي الرجال في المتوسط أقل من ساعتين¹⁰. ويشير تقرير الباروميتر العربي لعام 2021 للبنان، إلى أن أبرز ثلاثة عوائق ذكرها المواطنون اللبنانيين التي تحول دون مشاركة المرأة في القوى العاملة هي عوائق بنوية وتشمل: عدم توفر خيارات لرعاية الأطفال (69 في المئة)، تليها الأجور المتدنية (54 في المئة) وعدم توفّر وسائل النقل (47 في المئة). أما العائقان الآخران فهما ثقافيان: إعطاء الرجال الأولوية لدى التوظيف، وكون أماكن العمل المختلطة تسبب مشكلة نظراً لعمل النساء جنباً إلى جنب مع الرجال¹¹.

اعتبر ستون بالمئة من أمهات الأطفال صغار السن اللواتي شملهنّ المسح في لبنان « أنّ مسؤوليات رعاية الاطفال» هي السبب الرئيسي لعدم مشاركتهن في القوى العاملة. ومع ذلك، تشير البيانات إلى تدني مستوى الالتحاق بخدمات رعاية الأطفال ومحدودية استخدامها، استناداً إلى نتائج المسح الأسري الذي أجري لغرض هذا التقييم. وقد يعكس ذلك محدودية توفّر خدمات رعاية الأطفال (العرض)، ولكنه يعكس أيضاً عدم رغبة الأسر في استخدام خدمات رعاية الأطفال بسبب تفضيل الرعاية المنزلية (الطلب)، أو عدم توافق العرض والطلب على خدمات رعاية الأطفال (الكلفة، النوعية، الموقع، من بين أمور أخرى).

للمشاركة الاقتصادية للمرأة وتوظيفها صلة مباشرة بخدمات رعاية الأطفال ذات الجودة العالية وبأسعار معقولة. وعلى الرغم من اختلاف نطاق مزايا رعاية الأطفال بين بلد وآخر، تشير البيانات إلى أن توفّر خدمات رعاية الأطفال ذات الجودة العالية يؤثر بشكل إيجابي على مشاركة المرأة في القوى العاملة، والتوظيف، وساعات العمل؛ في كل من البلدان المتقدمة والنامية على السواء¹². وعلى القدر ذاته من الأهمية، فإن توسيع نطاق توفير خدمات رعاية الأطفال يمكن أن يخلق أيضاً فرص عمل جديدة للمرأة في هذا القطاع¹³.

8 (i) مجموعة البنك الدولي، (2020). المشاركة الاقتصادية للمرأة في العراق والأردن ولبنان. وضع المرأة الرائدة في المشرق 1. (ii) البنك الدولي وهيئة الأمم المتحدة للمرأة. 2021. وضع المرأة في لبنان: تقييم وصول المرأة إلى الفرص الاقتصادية وتراكم رأس المال البشري والنتائج. واشنطن العاصمة: البنك الدولي.

9 مجموعة البنك الدولي، (2020). المشاركة الاقتصادية للمرأة في العراق والأردن ولبنان. وضع المرأة الرائدة في المشرق 1.

10 البنك الدولي وهيئة الأمم المتحدة للمرأة. 2021. وضع المرأة في لبنان: تقييم وصول المرأة إلى الفرص الاقتصادية وتراكم رأس المال البشري والنتائج. واشنطن العاصمة: البنك الدولي

11 <https://www.arabbarometer.org/wp-content/uploads/Public-Opinion-Lebanon-Country-Report-2021-En-1.pdf>

12 على سبيل المثال ، في البلدان ذو الدخل المنخفض والمتوسط (حليم، بتروف، ورينولد 2021) ، وكذلك في المناطق الحضرية في الأرجنتين (برلينسكي وغيلاني 2007)، البرازيل (باروس وآل؛ دوتش 1998)، وكندا (لوفبير، ميرينغ، وفرستريتي 2009)، والمناطق الريفية في كولومبيا (اتناسيو وفيرا هرناندز 2004)، والاتحاد الأوروبي (دل بوكا ولوكاتيللي 2006)، واليابان (أساكي، وكيمفاشي وياماغوتشي 2015)، ورومانيا (فونج و لوكشين 2000)، والاتحاد الروسي (لوكشين 2004)، وتركيا (البنك الدولي 2015) .

13 ديفرشللي و بيتن-دي، 2020.

14 ريديلي، سيلفيا؛ لنو، أنوكريتي؛ بويتراغو هيرنانديز، ساندرابولا؛ إسمايل، تالا. حالة المرأة الرائدة في المشرق: من يقدم الرعاية؟ - أعمال الرعاية و نتائج سوق العمل للمرأة في العراق و الأردن و لبنان. واشنطن العاصمة: مجموعة البنك الدولي. <http://documents.worldbank.org/curated/en/099000502222338765/P16815701c-336d00e095dc093ef29af40a7>

15 انظر، من بين مراجعات أخرى، (دوكان ومايوسون ، 2013) و(كاميللي وبرنيت، ريان، فرغس، 2010) للحصول على أدلة في الولايات المتحدة، (نورز وبرنيت، 2010) لمراجعة الأدلة الدولية خارج الولايات المتحدة وكندا، (منظمة التعاون الاقتصادي والتنمية، 2006) و (منظمة التعاون الاقتصادي والتنمية، 2017) للحصول على أدلة في دول منظمة التعاون الاقتصادي والتنمية، في الأونة الأخيرة، (ديفرشللي وبيتن-دي، 2020) للحصول على أدلة في البلدان النامية، و(كاديفا، ناتا، باروس، وباراتا، 2020) للحصول على أدلة تركز على الأطفال دون سن الثلاث سنوات.

المثال، يوجد في قضاء عكار في الشمال، الذي يضم ثالث أكبر نسبة من الأطفال من صفر إلى ثلاث سنوات (9 في المئة)، 11 مقدم خدمات فقط. ومع ذلك، نجد في قضائي بعبداء والتمن الساحليين اللذين يسجلان نسباً مماثلة من السكان الذين تتراوح أعمارهم بين صفر وثلاث سنوات، عدداً أكبر بكثير من مقدمي الخدمات العاملين في المنطقة (71 و81 مقدم خدمات، على التوالي).

3- وبالإضافة إلى ذلك، فإن توفير خدمات رعاية الأطفال موجه نحو الفئة العمرية من سنة إلى ثلاث سنوات وثمة فجوة في توفير الخدمة للأطفال دون عمر السنة. نظراً لكون إجازة الأمومة مدفوعة الأجر في لبنان هي 10 أسابيع فقط، ولعدم وجود إجازة أبوة مدفوعة الأجر، يشير ذلك إلى وجود ثغرة بالنسبة إلى الأهل الذين يريدون و/أو يحتاجون إلى العودة إلى العمل بعد انتهاء الإجازة مدفوعة الأجر. ويعمل معظم مقدمي الخدمات من الاثنين إلى الجمعة، ويقدم نصف الذين شملهم المسح فقط الخدمات بعد الساعة 3 من بعد الظهر.

4- كان للأزمة الاقتصادية في لبنان تأثير شديد على مقدمي خدمات رعاية الأطفال وكذلك على القدرة على تحمّل تكاليف هذه الخدمات واستدامتها، بسبب انخفاض دخل الأسرة وزيادة تكلفة الخدمات. ووفقاً للبيانات التي تم جمعها في الفترة بين كانون الثاني/يناير وشباط/فبراير 2023، فقد أغلق 9.5 بالمائة من مقدمي الخدمات أبوابهم بسبب التأثير المضاعف لوباء كوفيد-19 والأزمة الاقتصادية. وقد أفاد مقدمو خدمات رعاية الأطفال أن عدد العائلات التي تواجه مشكلة في دفع التكاليف ارتفع بين سنة 2019 وسنة 2021. علاوة على ذلك، يمكن أن يصل متوسط السعر الشهري لخدمة اليوم الكامل إلى 89 في المائة من الحد الأدنى للأجور. كما وأدى انخفاض قيمة العملة المحلية والزيادة الكبيرة في أسعار الوقود إلى الإضرار بربحية مقدمي الخدمات، ما قلّل من حوافز الوافدين الجدد للانضمام إلى القطاع. كما أن زيادة تكلفة تقديم الخدمة تصعب على مقدمي الخدمات الحفاظ على معايير الجودة في الخدمة المقدمة.

5 - تشير نتائج المسح الذي شمل أهالي الأطفال صغار السن (الذين تتراوح أعمارهم بين صفر وثلاث سنوات) إلى أن الطلب على الخدمات منخفض، على الرغم من أنها لا تمثل على المستوى الوطني¹⁶ الأسر التي لديها أطفال صغار السن. وتظهر البيانات التي تم جمعها من دور الحضانة بين كانون الثاني/يناير وشباط/فبراير 2023 أن متوسط الاستخدام مقابل سعة دور الحضانة (أي عدد الأطفال المسجلين مقسوماً على عدد المقاعد المتاحة) هو 58 بالمائة للفئة العمرية بين صفر وخمس سنوات¹⁷. كما أن 10 بالمائة فقط من دور الحضانة تعمل بكامل طاقتها الاستيعابية. في معظم الأسر التي شملها المسح، الوالدان هما مقدموا الرعاية الوحيدان ولا يحصلان على أي مساعدة إضافية. في العديد من الأسر يساعد أفراد الأسرة أحياناً، وخاصة الجدات، ولكن ليس بطريقة منتظمة، وتكون الأمهات العاملات (لأطفال صغار السن) أكثر استعداداً لاستخدام خدمات الرعاية النظامية (الرسمية) في مراكز خدمات الرعاية المعتمدة بدل الرعاية غير النظامية، مقارنة بالأمهات العاملات عن العمل أو غير المشاركات في القوى العاملة. وبشكل عام، ان أكثر من نصف الأسر التي شملها المسح والتي لديها أطفال صغار السن (57 في المئة) لم تكن على استعداد لدفع تكاليف رعاية الأطفال، مقابل حوالي 20 في المئة من الأسر كانت على استعداد للدفع. ومع ذلك، أقر معظم المشاركين في المناقشات الجماعية المركزة بمنافع

القطاع الخاص تعطي الأولوية للصمود في وجه هذه الأزمات على إتباع سياسات ملائمة للأسرة ورعاية الأطفال. كما ذكرنا سابقاً، فقد ألقت الأزمات عبئاً على طبيعة الأعمال التجارية في لبنان، ما تسبب في انكماش شديد في النشاط الاقتصادي إلى جانب انخفاض الطلب على السلع والخدمات، وبالتالي تقليص حجم الشركات المتوسطة والكبيرة وتسريحها لعدد كبير من العمال (مجموعة البنك الدولي، منطقة الشرق الأوسط وشمال أفريقيا، 2021). بالنسبة إلى بعض الشركات، أتاحت جائحة كوفيد-19 فرصة لتحسين استراتيجيتها وهيكلها التنظيمي وسياساتها الداخلية بما فيها تلك التي تدعم أولياء الأمور العاملين وتعزز التوازن بين العمل والحياة الشخصية.

على خلفية جائحة كوفيد-19، إن تعزيز السياسات المراعية للأسرة ورعاية الأطفال يمكن أن يدعم هدف الحكومة اللبنانية المتمثل في زيادة نسبة مشاركة المرأة في القوى العاملة بنسبة 5 نقاط مئوية على مدى السنوات الخمس المقبلة (خطة العمل الوطنية للتمكين الاقتصادي للمرأة، 2019). وتبين دراسات الحالة التي أعدتها مؤسسة التمويل الدولية (IFC) في العديد من البلدان النامية أن الوصول إلى خدمات و/أو مزايا رعاية الأطفال الجيدة وبأسعار مناسبة يساهم في مشاركة المرأة في القوى العاملة، مما يؤدي إلى تحقيق نتائج إيجابية للأطفال بالإضافة إلى الحفاظ على وجود أولياء أمور ذوي مهارات وكفاءات متنوعة في العمل (مؤسسة التمويل الدولية، 2017).

اعتبر جميع أصحاب العمل في القطاع الخاص تقريباً المشمولين في العينة المدروسة انهم على دراية بقوانين العمل اللبنانية (99 في المئة) وبقوانين الضمان الاجتماعي الوطنية (96 في المئة). كما ثمة امتثال شبه عام من قبل الشركات لإجازة الأمومة مدفوعة الأجر لمدة 10 أسابيع المنصوص عليها في قانون العمل اللبناني. في حين أن معظم أصحاب العمل الذين شملهم المسح لا يقدمون دعماً لرعاية الأطفال، فإن غالبية شركات القطاع الخاص ذكرت أنها تتبع سياسات صديقة وملائمة للأسرة، بما في ذلك إجازات الأمومة والأبوة، وترتيبات العمل المرنة، والعمل عن بعد، ورعاية الأطفال المرضى وبرامج العمل/الحياة، ونظام تقييم إجازة الوالدين، وبرامج دعم العودة من إجازة الأمومة إلى العمل، وغرفة الرضاعة الطبيعية واستراحة الرضاعة لجميع الموظفين.

تنبثق الرسائل الرئيسية التالية من تقييم خدمات رعاية الأطفال في لبنان:

1. إن توفير خدمات رعاية الأطفال في لبنان هو في غالبيته من قبل القطاع الخاص ويتركز جغرافياً في المناطق الساحلية التي تكون فيها فرص العمل المتاحة للمرأة أكثر وفرة؛ أما في المناطق البعيدة عن الساحل، فتتوفر الخدمات بشكل محدود. ويبيّن المسح أن معظم المرافق يتم تشغيلها من قبل القطاع الخاص، (81 في المئة)، تليها المؤسسات الدينية (7 في المئة)، والمنظمات غير الربحية (6 في المئة) والقطاع العام (6 في المئة، بشكل رئيسي من قبل وزارة الشؤون الاجتماعية).

2. هناك عدم تطابق بين العرض من مقدمي الخدمات في مراكز الرعاية عبر كافة الأفضية والطلب المحتمل (السكان الذين يحتمل أن يطلبوا خدمات رعاية الأطفال) ووفقاً لنسبة السكان في الفئة العمرية من صفر إلى ثلاث سنوات لكل قضاء (منطقة). على سبيل

16 يرجى الرجوع إلى القسم الخاص بالمنهجية للحصول على تفاصيل حول اختيار الأسر التي لديها أطفال صغار السن والتي تمت مقابلتها.

17 تم حساب استخدام السعة باستخدام البيانات المحدثة التي تم جمعها من المسح الذي تم إجراؤه بين كانون الثاني/يناير وشباط/فبراير 2023 والذي يغطي عينة من 228 حضنة تم اختيارها عشوائياً n = 509.

الرعاية ذات الجودة العالية في دور الحضانة التي تساعد في النمو الاجتماعي والعاطفي والتربوي للأطفال.

6- يواجه معظم النساء اللاتي لديهن أطفال صغار السن صعوبات في الانضمام إلى القوى العاملة ومواصلة العمل إما بسبب احتياجات رعاية الأطفال والمسؤوليات المنزلية أو بسبب الأعراف الاجتماعية التي تتوقع منهن أن يكنَّ أمهات بدوام كامل. وتشير الأبحاث والعمليات التي أجريتها منظمة العمل الدولية أن المجتمع يتوقع منهن أن يتحملن عبئاً مزدوجاً يتمثل في العمل مدفوع الأجر والعمل المنزلي. خلال المناقشات الجماعية المركزة التي أجريت كجزء من هذه الدراسة، ذكرت كل من الأمهات العاملات وغير العاملات على السواء الخوف من الفشل في تأدية دور الأم في رعاية أطفالها وتأمين رفاهية الأسرة. كما أبدت النساء العاملات خوفاً من انتقاد المجتمع. وثمة اعتقاد سائد بأنه لا يمكن الاستعاضة عن رعاية الأمهات للأطفال صغار السن، وأنه ينبغي بالتالي أن تكون الأم هي مقدمة الرعاية الرئيسية. ومن بين الأمهات اللواتي شملهنّ المسح، وافق 58 في المئة على أن الاعتناء بالمنزل أو الأسرة لا يقل شأنًا عن العمل مقابل أجر، بينما أعرب 79 بالمئة من الأمهات اللاتي شملهنّ المسح عن ارتياحهنّ إزاء توزيع مسؤوليات رعاية الأطفال في الأسرة.

7- في حين يقدم غالبية أصحاب العمل في القطاع الخاص سياسات صديقة (ملائمة) للأسرة، إلا أن عدداً محدوداً منهم فقط يقدم دعماً لرعاية الأطفال، وذلك على الرغم من ثبوت تأثيره الإيجابي على الاحتفاظ بالموظفين وإنتاجيتهم وتخفيفهم عن العمل. واستناداً إلى عينة من 100 شركة، تقدم 5 بالمئة منها فقط حلول رعاية الأطفال للموظفين. ويشمل النهج المعتمد الشراكة مع دور الرعاية النهارية الأهلية القريبة من موقع العمل مع

تغطية جزء من الرسوم، وتقديم إعانة مباشرة للموظفين لرعاية الأطفال، وتوفير رعاية نهارية في موقع العمل تديرها منظمة غير حكومية بالشراكة مع القطاع العام. أما نسبة الـ 95 في المئة المتبقية فلا تقدم حلولاً لرعاية أطفال الموظفين، ومن ضمنها، ثمة 15 في المئة فقط على استعداد للنظر في توفير حلول لرعاية الأطفال في المستقبل. وتتنوع الأسباب الكامنة وراء إحجام الشركات عن توفير حلول لرعاية أطفال موظفيها. فقد أفاد نصف أصحاب العمل الذين شملهم المسح والذين لا يقدمون رعاية الأطفال أن عدد الموظفين الذين لديهم أطفال تتراوح أعمارهم بين صفر وخمس سنوات في شركتهم منخفض لدرجة ينتفي معها المبرر لإيجاد حل لرعاية الأطفال، يليهم أكثر من الثلث بقليل أفادوا بعدم وجود نية لتحمل المسؤولية، في حين أشار حوالي الثلث إلى عدم تلقي طلب من موظفيهم لإيجاد حلول لرعاية الأطفال. ومن الأمثلة حول أنواع السياسات الصديقة (الملائمة) للأسرة المقدمة: إجازات الأمومة والأبوة، ترتيبات العمل المرنة، العمل عن بعد، رعاية الأطفال المرضى وبرامج العمل/الحياة، نظام تقييم الأجازة الوالدية، برامج دعم عودة الأم إلى العمل، وغرفة الرضاعة الطبيعية واستراحة الرضاعة.

8- لا توجد في لبنان سياسة واستراتيجية شاملة لرعاية الطفل تفضّل الأهداف وخطط التنفيذ والميزانية. وتقتصر القوانين المتعلقة برعاية الأطفال على الترخيص. علاوة على ذلك، تنطبق قوانين الترخيص حصراً على مقدمي الخدمات من القطاع الخاص (غير الحكومي) وتغطي حصراً الخدمات المقدمة في المراكز، في حين يظل توفير الخدمات المنزلية غير منظم. وتركز معايير الجودة الدنيا القانونية بشكل أساسي على الجودة البنيوية (بما يتماشى نسبياً مع معايير منظمة التعاون الاقتصادي والتنمية) وبدرجة أقل على عناصر جودة العمليات.

الإطار 1: التعريفات الرئيسية المتعلقة برعاية الطفل

يمكن توفير رعاية الأطفال في العديد من الأماكن المختلفة وهي تسمّى بمفردات مختلفة وفقاً لاختلاف البلدان. تتوزع أنواع خدمات رعاية الأطفال ضمن ثلاث فئات: الرعاية المنزلية، والرعاية في المركز، والترتيبات الأسرية المرتجلة وغير مدفوعة الأجر.

الرعاية الرسمية: تشير إلى الرعاية التي يدفع مقابلها المستفيدون أو أفراد الأسرة بدلاً. يمكن أن تشمل الرعاية المؤسسية (في المركز)، وكذلك المنزلية (في المنزل)

الرعاية المنزلية: بشكل عام، تنقسم الرعاية المنزلية إلى نوعين: (i) الرعاية من قبل شخص في منزل الطفل نفسه يسمى أحياناً مربية أو عاملة لدى الأسرة؛ (ii) رعاية الأطفال المقدمة لمجموعة من الأطفال في منزل مقدم الرعاية.

الرعاية في المركز: عموماً تسمى المراكز التي تقدم الرعاية للأطفال الصغار دور الرعاية النهارية أو دور الحضانة أو الحضانات. ويمكن أن تقدّم المدارس التمهيديّة وروضه الأطفال أيضاً خدمة رعاية الأطفال هذه.

ترتيبات الرعاية الأسرية وغيرها من الترتيبات غير الرسمية: وهي الترتيبات التي تلقى بعقب الرعاية على صديق أو أحد أفراد الأسرة. يمكن أن يشمل ذلك اصطحاب الطفل إلى العمل أو تركه مع جار أو صديق أو شقيق أو الجد والجدّة أو قريب آخر. قد يكون هذا النوع من الرعاية لقاءً بدلياً أو لا.

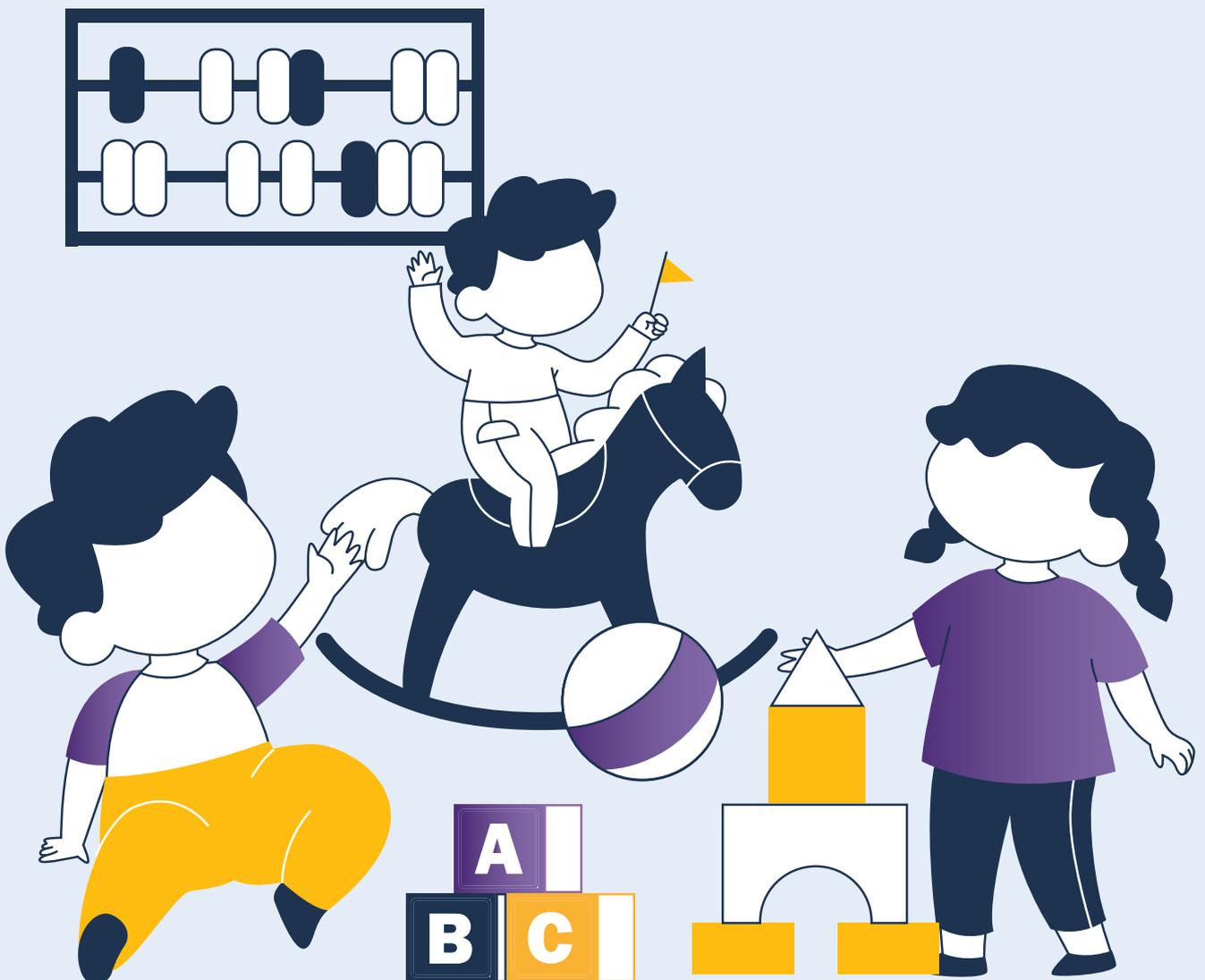
الرعاية والتعليم في مرحلة الطفولة المبكرة (ECE): تشير إلى البرامج التي تهدف إلى التنمية الشاملة لاحتياجات الطفل الاجتماعية والعاطفية والمعرفية والجسدية من أجل بناء أساس متين وواسع للتعليم مدى الحياة وللرفاهية. وتشمل الرعاية والتعليم في مرحلة الطفولة المبكرة (الرعاية الصحية والتغذية ورعاية الطفل في بيئة سليمة) و**التعليم** (اللعبة والتنشئة الاجتماعية والتوجيه والأنشطة التنموية)، ويتم توفيرها بشكل مثالي بطريقة متكاملة (اليونسكو، 2013). في حين أن الرعاية الجيدة مهمة بالنسبة إلى جميع الأطفال، إلا أنهم يحتاجون أيضاً مع تقدمهم في السن إلى المزيد من تجارب التعلّم النظامي لمساعدتهم على الإعداد للمدرسة الابتدائية (دفيشلي وبيتين - دبي، 2020).

التعليم في مرحلة الطفولة المبكرة (ECE) يساعد الأطفال على بناء أسس قوية تدعم التعلّم مدى الحياة.

تنمية الطفولة المبكرة (ECD) تشمل الاستثمارات في النمو البدني والمعرفي واللغوي والاجتماعي - العاطفي للأطفال صغار السن - منذ قبل الولادة وحتى انتقالهم إلى المدرسة الابتدائية.

المصدر: تم جمع التعاريف من: (i) ديفرشيللي وبيتون-دبي، 2020؛ (ii) بينديني وديفرشيللي، 2022؛ (iii) تنمية الطفولة المبكرة - الصادرة عن البنك الدولي: <https://www.worldbank.org/en/topic/earlychildhooddevelopment>

1. INTRODUCTION



Lebanon faces a significant gender gap in labor force participation, and the gap is even higher among married individuals and those with younger children. As previously mentioned, only 22 percent of women are in the labor force, compared to 66 of men.¹⁹ In addition, despite a relatively high educational attainment with 64 percent of women having completed at least secondary studies, the country has not seen improvements in the rate of female labor force participation over the past 10 years. Furthermore, as discussed in the first State of the Mashreq Women report (World Bank, 2020), in Lebanon, similarly to the other Mashreq countries²⁰ studied in the report (Jordan and Iraq), unmarried women without children tend to have relatively higher labor force participation rates whereas married women and, even more so, married women with children below schooling age²¹ tend to have the lowest rates. This negative relationship, well established in the literature, is generally associated with the fact that women face disproportionate time constraints due to family responsibilities.

Several factors come together to constrain female labor force participation,²² and women's care and employment choices are embedded within a complex set of economic and socio-cultural factors. Young and more educated women in Lebanon are more likely to participate in the labor market. Female participation rates are at their peak in their mid-twenties and thirties, but then steadily decline until their fifties, where their share is reduced by half.²³ This could be linked to marriage and childbearing ages. Social norms deeply influence gender roles and women's agency. Lebanon, similar to other Middle East and North African (MENA) countries, is characterized by a strong patriarchal gender paradigm²⁴ that emphasizes women's role within the household, men's role as providers, and stigmatizes working mothers.

A growing body of evidence highlights the critical role that care policies play in addressing the gender gap in unpaid care work and in improving labor market outcomes for women. Although the magnitude and design of care benefits varies among countries, evidence indicates that access to affordable nonparental childcare options has a positive effect on female labor force participation, employment, and work hours; this is true in both developed and developing countries.²⁵ Equally important, expanding the supply of care services can also create new employment opportunities for women in the care sector.²⁶

At the same time, studies also demonstrate that investing in early childhood development has a significant impact on children's cognitive and socioemotional development as well as on longer-term outcomes, providing that quality of service is high.²⁷ These benefits are particularly strong for children in vulnerable households, as they mitigate opportunity gaps at birth and promote intergenerational socio-economic mobility. In the short and medium term, benefits include improved school readiness, better nutrition outcomes, increased probability of completion of secondary, and reduced involvement in juvenile crime. In the long term, benefits include better education outcomes and lifelong learning, improved employment prospects and earnings, better health-seeking and behaviors, and less dependency on social assistance systems.

More broadly, evidence is conclusive that quality childcare services have an important impact on human capital accumulation, female labor force participation, family welfare, child development, business productivity, and the overall economy (Figure 1).

19 <http://www.cas.gov.lb/index.php/latest-news-en/201-labour-force>

20 Sometimes spelled Mashreq or Mashrek, for purposes of this report refers to Iraq, Jordan, and Lebanon only.

21 The age of entry into the formal education system in Lebanon is 3 years, whereas in Iraq and Jordan it is 4 years.

22 In addition to social norms, this includes limited work opportunities, legal barriers, labor market discrimination, sexual harassment, mobility constraints, and lack of safe public transport.

23 World Bank; UN Women. 2021. *The Status of Women in Lebanon: Assessing Women's Access to Economic Opportunities, Human Capital Accumulation and Agency*. World Bank, Washington, DC. © World Bank. <https://openknowledge.worldbank.org/handle/10986/36512>

24 See for example World Bank (2004). Much of the literature refers to this paradigm as the "patriarchal gender contract."

25 For example, in lower and middle-income countries (Halim, Petrova, and Reynolds 2021) in urban Argentina (Berlinski and Galiani 2007), Brazil (Barros et al. 2011; Deutsch 1998), Canada (Lefebvre, Merrigan, and Verstraete 2009), rural Colombia (Attanasio and Vera-Hernandez 2004), the European Union (Del Boca and Locatelli 2006), Japan (Asai, Kambayashi, and Yamaguchi 2015), Romania (Fong and Lokshin 2000), the Russian Federation (Lokshin 2004), and Turkey (World Bank 2015).

26 See analysis in Devercelli and Beaton-Day, 2020.

27 See among other reviews (Duncan & Magnuson, 2013) and (Camilli, Vargas, Ryan, & Barnett, 2010) for evidence in the U.S., (Nores & Barnett, 2010) for a review of international evidence outside the U.S. and Canada, (OECD, 2006) and (OECD, 2017) for evidence in OECD countries, more recently, (Devercelli & Beaton-Day, 2020) for evidence in developing countries, and (Cadima, Nata, Barros, & Barata, 2020) for evidence focused on children younger than three.

FIGURE 1. OVERVIEW OF THE BENEFITS THAT ACCRUE FROM ACCESS TO CHILDCARE.



Source: Devercelli and Beaton-Day (2020), pp. 12.

According to the second State of Mashreq report,²⁸ improving access to childcare has the potential to increase the labor market engagement of mothers of young children, thus having a sizable impact of FLFP. In Lebanon, 81 percent of mothers with children below age six who express a willingness to use formal childcare (but are currently non-users) report that they would be willing to start working, open a business or work longer hours if they had access to free childcare.²⁹

However, this rate falls to 53 percent if childcare services are not free, highlighting price sensitivity in the demand for childcare.³⁰ Taking at face value self-reported willingness to work conditional on childcare availability by mothers of children aged zero to five, it is possible to estimate the change in overall female labor force participation associated with a hypothetical expansion of formal childcare services in line with untapped childcare services demand. As shown in

28 Redaelli, Silvia; Lnu, Anukriti; Buitrago Hernandez, Sandra Paola; Ismail, Tala. *State of the Mashreq Women Flagship : Who Cares? - Care Work and Women's Labor Market Outcomes in Iraq, Jordan, and Lebanon*. Washington, D.C. : World Bank Group. <http://documents.worldbank.org/curated/en/099000050222338765/P16815701c336d00e095dc093ef29af40a7>

29 Irrespective of current employment status, women who report willingness to change their labor market engagement should access to childcare services be available would be particularly keen on opening a business at home.

30 This is expected since the higher cost of childcare lowers the net income from paid market work, making it less attractive.

TABLE 1. CHANGE IN FLFP RATE SHOULD UNTAPPED DEMAND OF CHILDCARE SERVICES BE SATISFIED.

	Jordan	Iraq	Lebanon
Baseline FLFP rate*	15.1%	13.0%	26.3%
New FLFP rate if paid daycare available **	17.6%	13.5%	28.4%
	+2.5 pp	+0.5 pp	+2.1 pp
New FLFP rate if free daycare available **	22.4%	14.7%	33.0%
	+7.3 pp	+1.7 pp	+6.7 pp

Notes: * FLFP rate extracted from first State of the Mashreq Women report based on secondary data sources (i) Jordan Labor Market Panel Survey 2016, (ii) Iraq Household Socio-Economic Survey 2012-13; (iii) Lebanon Household Budget Survey 2011-2012. ** Estimates based on secondary data sources (i) the 2017-2018 Household Expenditure and Income Survey (HEIS) for Jordan; (ii) the 2017 Survey of Well-Being via Instant, Frequent Tracking (SWIFT) for Iraq, and (iii) the 2018-2019 Labor Force and Household Living Conditions Survey (LFHLCs) for Lebanon.

Source: Redaelli, S., et al., 2023

Table 1, implied change in labor force participation could be sizeable in Lebanon, with a 2.5 percentage point increase in case of increased availability of paid childcare services, and 6.7 percentage point increase in case of greater availability of free childcare services. In Lebanon, increasing the current occupancy in childcare service centers from 4.8 percent to 25 percent of children aged between 0-3, and assuming a constant caregiver to child ratio, would alone lead to the creation of almost 10,000 caregiver jobs.

Expansion of childcare services could contribute to addressing joblessness among women, by increasing FLFP and decreasing unemployment. An expansion of the childcare industry may impact women’s participation in the labor force in two ways. First, as previously discussed, evidence demonstrates that access to childcare services may ease the unpaid care burden experienced by mothers and increase time available for paid market work. Second, the increased availability of jobs in the childcare industry may attract women willing to work in this sector into the labor force. As stated in the second State of the Mashreq report,³¹ close to 50 percent of inactive mothers in Lebanon would be willing to work in the childcare industry. In addition, and as discussed in the first State of the Mashreq Women report (World Bank, 2020), women who are willing to participate in

the labor market face a high risk of unemployment. Results from this analysis show that – at least for unemployed mothers – additional opportunities in the childcare sector would be of particular interest. Employment opportunities in childcare could be also appealing for women in Lebanon and possibly contribute to improving their satisfaction on the job.³² To test whether working in the childcare sector could be of interest, all mothers participating in the survey – irrespective of their employment status or utilization/willingness to use childcare services – were asked if were interested in starting a daycare business and/or working for pay (full time or part time) in a daycare center. In Lebanon, 56 percent mothers would be willing to work in the care industry.³³

Employer-supported childcare can lead to lower absenteeism, higher workers retention, and higher productivity. Understanding childcare as an investment in the workforce instead of an added cost can increase employers’ motivation to offer childcare solutions. While the benefits of employer-supported childcare have been widely established (IFC 2019), case studies about employer-supported childcare around the world show that there is no “one-size fits all” solution and the success of initiatives depends on specificities of each company, group of employees, and local context, including childcare subsidy regulations.

31 Redaelli, Silvia; Lnu, Anukriti; Buitrago Hernandez, Sandra Paola; Ismail, Tala. *State of the Mashreq Women Flagship : Who Cares? - Care Work and Women's Labor Market Outcomes in Iraq, Jordan, and Lebanon*. Washington, D.C. : World Bank Group. <http://documents.worldbank.org/curated/en/09900050222338765/P16815701c336d00e095dc093ef29af40a7>

32 In Iraq, as discussed in Chapter 2, the childcare industry is virtually non-existent (both public and private). As most employed women in Iraq work in the public sector (mostly in health and education), the limited interest to work in childcare expressed by employed mothers could be related, at least partly, to an underlying assumption that childcare jobs would be in the private sector.

33 Data did not reveal any preference of self-employment over salaried employment in childcare. However, part time salaried employment is more widely preferred compared to full time salaried employment.

In Pakistan, National Foods Limited established an on-site daycare facility to cater to the needs of working parents and other family-friendly policies. According to the company, business benefits related to childcare, such as greater gender diversity and higher maternity return rate and employee satisfaction, help offset the costs of running the facility (IFC 2021). A UNICEF-funded study in the Rwanda tea sector showed that on-site childcare significantly improved workers' productivity as well as workers' loyalty and retention (Salmaso et al. 2021). The footwear manufacturing company Feng Tay in Vietnam established an on-site kindergarten as an established part of their recruitment and retention strategy (IFC 2020).

By implementing an employee feedback system, businesses can tailor solutions to employees' needs and preferences and avoid investing in ineffective solutions. Based on employee satisfaction surveys, Amin Kawar and Sons (AKS), a Jordanian shipping and international transportation company, strengthened its flexible and remote working policy and offered childcare solutions. As a result, staff turnover was minimized which, in turn, brought substantial savings related to recruitment and training of new staff (WBG 2021). In the US, after conducting an employee survey to gauge the range of employee needs, Home Depot's leadership team offered four options to their employees: on-site childcare, eligible associates backup care, care marketplace (discounts for qualified care) and a pre-tax benefit account – (called a Flexible Spending Account - FSA, U.S. Chamber of Commerce Foundation 2018).

Understanding constraints to both demand and supply of care services is crucial to designing effective care policy interventions, particularly given Lebanon's current economic situation. For instance, in their research paper,³⁴ S Anukriti et al state that the regulation of the availability and affordability of childcare has a similar impact on female labor force participation, whereas the effect of quality regulation is smaller. As discussed in the second State of the

Mashreq Women report (Redaelli, S., et al., 2023), data for Mashreq countries indicates low enrollment and limited utilization of childcare services. This might reflect limited availability of childcare services (supply), family preference for home care, accessibility and location of the childcare service (supply), or a mismatch between demand and supply of childcare services (cost, quality, among other things).

Constraints to supply and demand for formal childcare services are particularly acute in Lebanon. Since 2019, Lebanon has been assailed by compounded crises—specifically, an economic and financial crisis, followed by COVID-19 and, lastly, the explosion at the Port of Beirut on August 4, 2020. The economic crisis has had a severe impact on the affordability and sustainability of childcare services, due to both an increase in the cost of supply as well as due to a reduction in households' purchasing power.

To better understand the context of childcare provision and the distribution of formal and informal care in services in Lebanon, a comprehensive supply and demand study was carried out. The assessment consisted of a mixed methods study comprised of six components touching on the regulatory and institutional framework of the childcare sector, as well as the different aspects of the supply and demand for services, including employer-provided childcare. The study covered services specialized in the care and education of children between 0 and 3 years old. The findings from this assessment support the need for a multi-sectorial and holistic policy approach.

The report is structured as follows. Chapter 2 introduces the methodology and data sources. Chapter 3 maps out the policy and legal framework for childcare services in Lebanon. Chapter 4 describes the supply of childcare services by center-based facilities and discusses existing childcare alternatives offered by employers in Lebanon. Chapter 5 discusses the demand for childcare. Chapter 6 presents conclusions and policy options.

34 Anukriti, S., Dinarte-Diaz, L., Elefante, M., Montoya-Aguirre, M. and Sakhonchik, A. (2023). *Filling the Gaps: Childcare Laws for Women's Economic Empowerment*. [online] Available at: <https://documents1.worldbank.org/curated/en/099018006212310610/pdf/IDU0c29425380315704ea90bf020573349106bf8.pdf>.

2. METHODOLOGY: MIXED METHODS STUDY

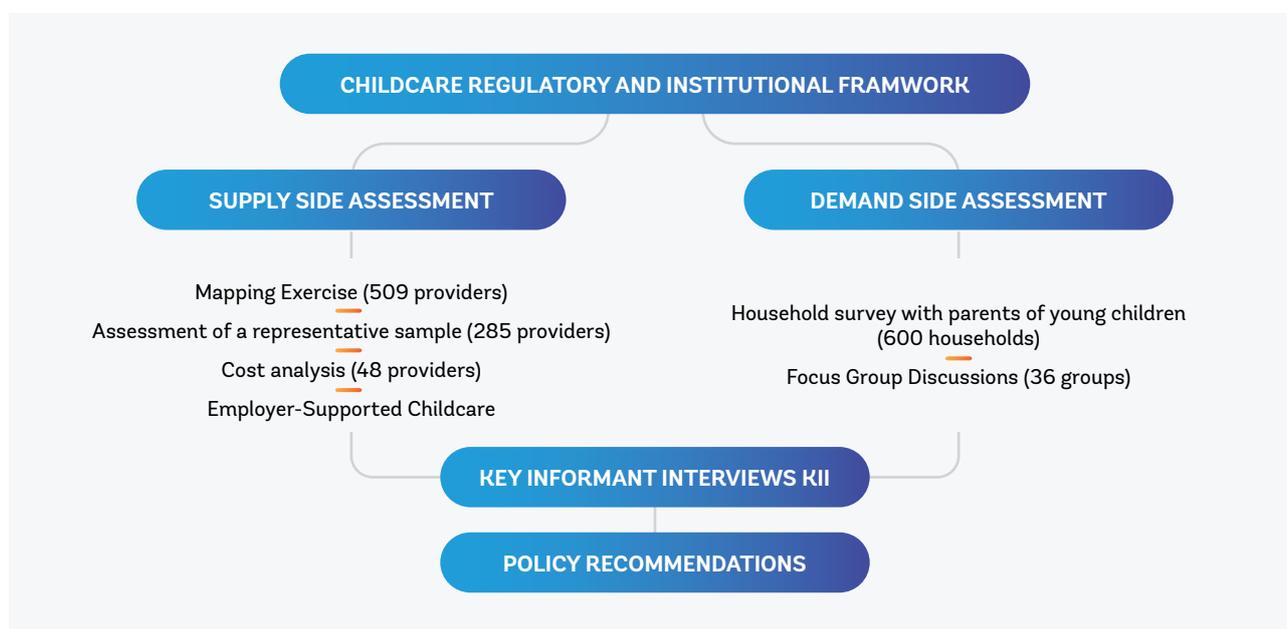


The study collected and assessed information on the supply and demand for childcare services for children aged 0-3 in Lebanon, with the objective of identifying key constraints and opportunities to expand quality and affordable access. The study focuses on services specialized in the care and education of children between 0 and 3 years old, which are not mandatory in Lebanon. Although not covered in the field work, kindergarten and preschool education in Lebanon target children in the 3 to 5 age group and are not compulsory either as compulsory school starts at the age of 5.

In this report, childcare refers to care provided to children under the age of 3. Childcare can be formal or informal. Formal care is defined as care that is paid for (or subsidized) and is generally regulated by some type of contractual arrangement between the service provider and the household. The supply-side assessment focuses on formal services which can be public, private, community-based or a mix (and excludes live-in centers, such as orphanages or temporary protection centers). Informal care in this study refers to unpaid and generally unregulated care, usually provided by household members.

The mixed-methods study consisted of six main activities focused on supply or demand of childcare services (see Figure 2 and Table 2): (i) a review of Lebanon’s regulatory and institutional framework around childcare; (ii) a mapping exercise of the current supply of services, (iii) deeper supply-side assessment of a representative sample of existing formal childcare services, including a detailed cost analysis of a subsample of providers (48 providers); (iv) a demand-side assessment, targeted to parents³⁵ of young children, and focus group discussions (FDGs) with parents to understand households’ childcare needs and coping mechanisms to cover those needs; (v) seven key informant interviews (KII) were conducted with officers from relevant units at the Ministry of Social Affairs (MOSA), Ministry of Education and Higher Education (MEHE), Ministry of Public Health (MOPH) and syndicates of nursery owners;³⁶ and, (vi) an assessment of childcare solutions offered by employers. An analysis of the main gaps in terms of service provision was developed, building on the combined findings from the supply and demand assessments and includes policy recommendations for an inclusive expansion of quality and affordable childcare services.³⁷

FIGURE 2. MIXED METHODS ANALYSIS OF CHILDCARE SERVICES IN LEBANON



35 The sample of surveyed households for this study is not representative of households with young children in Lebanon. Households interviewed for this study were drawn from a sample of households in general in Lebanon. Cost considerations prevented a new sampling frame of households with young children exclusively (from which a dedicated sample could be drawn).

36 Discussion guides for these KIIs were prepared jointly with the WBG. Participants included: Head of Public Education Department at the MEHE, head of the NGO Department and Head of Social Development Centers at the MOSA, Syndicate of Nursery Owners (SPGL), Syndicate of Specialized Nursery Owners, and Director and owner of a nursery in Mount Lebanon.

37 Findings from the Gap Analysis component will be discussed further in the final section of this report on Conclusions and Policy Options.

TABLE 2. SUMMARY OF THE ASSESSMENTS CONDUCTED

Assessment	Instruments	Unit of Analysis	Scope	Focus
Regulatory and Institutional Framework Review	Desk Review of Secondary Sources	Childcare and Pre-School Sector		National
Mapping Exercise	Desk Review and Census-like brief CATI 10 – 15 mins (Quantitative)	Formal Childcare Centers (private, public and semi-private)	509 – census-like, the universe	National
Supply-Side Assessment	In Depth CAPI 70-90 mins (Quantitative)	Formal Childcare Centers (private, public and semi-private)	285 nurseries randomly drawn from the universe of the mapping exercise	Across cazas with higher / lower levels of FLFP
Demand-Side Assessment	CAPI Households Survey (Quantitative)	Households with young children under 6	600 Households - (486 women and 114 men)	All Lebanese Governorates
	Focus Group Discussions	Mothers and fathers with children between 0 and 5 years old	36 Focus Group Discussions with parents with different labor market status, rural/urban	
Key Informant Interviews	Structured Interviews	MOSA, MOPH, MEHE Syndicates of Nursery Owners, Owner of a private nursery	7 Key Informant Interviews	All Lebanese Governorates
Employers' Side Assessment	CATI (Quantitative)	Private Sector	100 Companies	Across Lebanon
	Key Informant Interviews (KIs)		8 KIs with representatives from companies	

BOX 2. COMPLEX FIELD WORK LEADING TO DATA LIMITATION

Most of the fieldwork occurred during complex times in the country and data collection was impacted by the challenging conditions at the moment. Fieldwork started in November 2020 and was completed in September 2021. It had to be paused (specifically, surveys, focus group discussions and key-informant interviews) a few times during this period due to the ongoing economic crisis (the fuel crisis affected the transportation and ability of surveyors to conduct field work) and political instability, the COVID-19 pandemic and related closures of childcare centers, and the explosion at the Port of Beirut on August 4, 2020.³⁸ The consulting firm adjusted fieldwork to these conditions by, for example, conducting FGDs remotely, setting appointments with nurseries, and adopting safety & distancing measures. Furthermore, while the study was originally designed prior to the COVID-19 pandemic, it was updated to include new survey questions (for both supply and demand), considering the unique challenges that the COVID-19 pandemic posed for families, children, governments, and the childcare industry. Conducting the fieldwork in the context of the COVID-19 pandemic affected some of the indicators collected (e.g. enrollment rate, capacity limitation, additional concerns from parents related to health measures, costs to nurseries for additional health equipment, etc.).

A brief description of each component's methodology is presented as follows (see Annex 1 for additional details):

- 1. Review of Lebanon's regulatory and institutional framework on childcare.** It covers the institutional structure of the childcare and preschool sector, relevant laws, policies, and regulations related to the provision of childcare services, governmental/licensing standards for providers, formal enrollment procedures, inspection, supervision, etc. The regulatory review was conducted in preparation for the data collection. It was carried out through a desk review of relevant secondary sources.³⁹
- 2. Mapping of formal childcare services (i.e. center-based care), supply-side assessment with costing exercise.** The first activity under this component was a *mapping of existing childcare services in Lebanon*.⁴⁰ Data collection consisted of a census-like

38 In addition, the fuel crisis happening from June to October 2021 impacted transportation as well as availability of electricity and internet.

39 The review was at times limited by the lack of recent references; some information needed to be validated through field work.

40 ArcGIS analysis by type (private, public, semi-private: NGO, religious), by location, by FLPR, by estimated number of children.

brief (10–15-minute duration) computer assisted telephone interview (CATI) with 509 center-based providers (excluding those permanently closed, see Figure A1.1 in Annex 1). The CATI survey allowed the gathering of geographic coordinates for the mapping exercise and to contrast supply vis-a-vis potential demand (estimated number of children in the 0–3 age group per *caza*, and other indicators), and well as basic characteristics such as type of provider, operating status (closed/open) and expectations regarding re-opening, operating times/days and ages served.

The second activity was a *supply-side assessment* which is based on a comprehensive survey applied to a sample of 285 childcare providers (Table 3) randomly drawn from the universe gathered through the mapping activity.⁴¹ It consisted of a computer assisted personal interview (CAPI) with an approximate duration of 70–90 minutes.⁴² The sample was constructed to represent the current distribution of providers (informed by the mapping activity) by type i.e., public, private, semi-private, and across *cazas*, and to be able to observe childcare supply in *cazas* with higher/lower levels of female labor force participation.

Due to COVID-19 containment measures, public providers of childcare were requested to close until September 2021. This resulted in incomplete data on enrollment from public providers. Private providers were required to close in early 2021 (due to a statewide lockdown) and allowed to reopen in March/2021 at only 25 percent capacity⁴³ with the government gradually lifting restrictions (complete lifting of restrictions started June 1, 2021). In this regard, because of the data collection time frame, it is likely that reported enrollment from some private providers reflects the 50–70 percent capacity regulations applying at the time.⁴⁴ Results on enrollment and capacity, from both the CATI and CAPI activities, should be interpreted in light of these limitations.

The supply-side questionnaire (available in Annex 6) addresses the situation of providers in terms of operation, ages served and enrollment, accessibility, human resources, service fees and cost of service provision, daily activities and overall program, safety and health procedures and other structural quality characteristics. This assessment also included a *cost analysis of service provision*, aimed at investigating the investment and operating costs of childcare providers and identifying the main entry barriers into the childcare sector. Furthermore, it included a ‘break even’ analysis of required enrollment for providers to be financially sustainable. The financial analysis covered 48 providers of which 43 are private and therefore the results in this report are presented only for private providers.⁴⁵ The analysis is based on the information from the cost module of the CAPI survey.

TABLE 3. CHILDCARE PROVIDERS INTERVIEWED IN LEBANON (DETAILED CAPI SURVEY)

Type	N	%
Private	228	80%
Public	33	12%
Semi-private*	24	8%
Total	285	100%

Note: * 13 religious institutions and 11 non-profit associations or organizations.

An additional phone survey (available in Annex 6) was conducted between January and mid-February 2023 with the 285 nurseries who initially participated in the supply-side assessment. This exercise was a follow up to the April 2021 - June 2021 survey and aimed to gather the latest and updated information on the monthly fees, the monthly operational cost, the capacity and actual enrollment rates of children. The response rate obtained was 80 percent, i.e., 228 nurseries answered the survey. Out of the 57 remaining

41 The CATI for the supply mapping took place between December 2020 to April 2021 which coincided with the peak pandemic-related lockdowns across the country. The comprehensive CAPI survey took place between late April to June 2021. A prior pilot survey was conducted with 5 providers during April 2021 located in Akkar, Beqaa, Beirut, Mount Lebanon, and Nabatieh.

42 Enumerators and field supervisors scheduled interview dates and times with each childcare provider through a phone call prior to the in-person visit and collected oral and signed consent forms from each.

43 To service childcare needs of essential health care workers.

44 CAPI data collection was paused between the 3rd week of May and the 2nd week of June. By the time data collection was resumed, in mid-June/2021, about 40% of the CAPI was conducted, which implies that reported enrollment rates from some providers might still reflect the capacity restrictions.

45 Of the 285 providers interviewed under the in-person CAPI survey, only 74 (56 private) provided complete information to the cost module. Of these, 11 providers (all public) had zero enrollment due to mandated closures due to COVID-19 and were therefore excluded from the cost analysis. The analysis also excluded providers with quality indexes under the 40% threshold. Overall, the selected 48 providers for the cost analysis represent enrollment of 1,290 children.

nurseries, 15 refused to answer, 3 could not be reached after more than 3 attempts, 27 confirmed they were closed and 12 could not be reached because of wrong contact details.

3. Assessment of the demand for and use of childcare. Data collection consisted of a detailed survey to households with presence of children younger than 6 years old. Eligible respondents were the parents of younger children, although efforts were geared towards prioritizing female respondents (mothers) over male respondents. The purpose of the survey was to investigate the dynamics of childcare demand and supply at the household level, with women and their labor force engagement at the center.⁴⁶ Individual (in-person) CAPI interviews were conducted with 600 parents of young children living in the household (486 women and 114 men). Surveyed households were located across all Lebanese governorates, namely Beirut, Mount Lebanon, South, Nabatiyeh, North, Akaar, Bekaa and Baalbek-Hermel (see distribution of respondents in Annex 2). The questionnaire (available in Annex 6) examines socio-demographic characteristics, employment characteristics, division of care and household responsibilities, demand for and attitudes/preferences around childcare (including willingness to pay for services), and impact of COVID-19 on childcare.

Surveyed households for this study (households with presence of children younger than 6 years old) were drawn from a larger sample of households (with no special conditions on household composition) which is representative of households in general in Lebanon (Table 4). While the sample of general households is nationally representative, the sub-sample of surveyed households is not nationally representative of households with young children in Lebanon. Results presented on the demand side need to be interpreted with caution, taking into consideration representativeness limitations. Time

and cost considerations prevented a new sampling frame of households with young children exclusively (from which a dedicated sample could be drawn). (See details on sampling methodology in Annex 2).⁴⁷

TABLE 4. DESCRIPTIVE STATISTICS OF SURVEYED MOTHERS AND HOUSEHOLDS

Mothers between 22-45 years old	92%
Mothers living with spouse / partner	Over 90%
Mothers having completed tertiary education	38%
Mothers having completed secondary education	25%
Nuclear households	96%
Extended households	4%
Average number of children 0-5 per household	1.16

Note: The minimum age of surveyed mothers was 19 years old, and maximum age was 56 years old

In addition, a total of 36 *Focus Group Discussions* (FGDs) were conducted virtually (over Zoom) with mothers and fathers of children in the 0-5 age group.⁴⁸ Participants were mothers and fathers with different engagement in the labor market, drawn from the same sub-sample and areas covered in the household survey.⁴⁹ (See details on sample/eligibility of participants and structure of FGDs in Annex 3) These discussions investigated how childcare works in participants' households, how care responsibilities influence their time and other work, how gender norms factor into decision-making, and what childcare services they use or what they think/expect of these services. To maintain correspondence with the quantitative survey, participants were largely drawn from same areas as the household survey.⁵⁰ The participant profile consisted of working and non-working men and women, living in urban affluent, urban poor or rural areas.

46 The household survey took place between July 14 to August 12 2021, and the FGDs were conducted during May/June 2021.

47 Sampling of households in general (no conditions regarding household composition) was done in two stages: (i) selecting 60 clusters (with 100 to 150 households in general in each); (ii) selecting households using systematic sampling, 10 households from each cluster. Once a household with younger children was found, an interview was conducted with one parent per household (prioritizing female respondents).

48 In compliance with pandemic-related distancing measures. In addition to health considerations, fuel, electricity shortages and traveling disruptions precluded conducting in-person sessions.

49 Certain area perimeters in the North had to be expanded to account for problems of connectivity and access.

50 With a few adjustments due to the inclusion of groups from the capital Beirut, and the expansion of certain area perimeters in the North to account for connectivity and access problems.

TABLE 5. CHARACTERISTICS OF SELECTED FIRMS FOR EMPLOYER ASSESSMENT

Size category	Number of employees	Number of Companies in Sample	Percentage of total sample size	National percentages of company sizes*
Small	10 to 50	50	50%	34%
Medium	51 to 100	17	17%	4-6 %
Large	101 to 1701	33	33%	5-7 %

*Ministry of Economy and Trade & UNDP, 2014. The remaining 53-55% are micro sized companies.

4. Assessment of employer-provided childcare solutions.⁵¹ This assessment identifies childcare solutions and family-friendly policies offered by private sector companies in Lebanon, as well as the barriers and opportunities for employers to offer childcare services to their employees.⁵² Qualitative and quantitative survey techniques were employed to assess the status of childcare support provided by the surveyed businesses. Data collection methods included a telephone survey questionnaire and Key Informant Interviews (KIIs) with private sector representatives. A sample of 100 private businesses across Lebanon completed the survey, between May and June 2021 using a CATI software (Computer Assisted Telephone Interview). The sample of firms was drawn from companies operating across 10 different sectors (Table 5). While the survey helped in understanding the status of the employer-supported childcare in Lebanon, the sample size of the surveyed companies is small to draw conclusions for Lebanon. The sample size, therefore, limits the ability to make generalizations related to employers' childcare policies, although it does not prevent the identification of trends and the ability to make predictions in this area. The questionnaire consisted of a rapid survey lasting 15 minutes on average. It explored the status of childcare and family-friendly benefits and the current understanding of the business case for offering these types of benefits to employees. It also captured the employers' expectations regarding childcare options for employees in the future and what they might consider offering (see questionnaire in Annex 6). This component also included eight key informant interviews.⁵³ Data

collection was conducted during the COVID-19 lockdowns when face-to-face interviews were not possible. As a result, firms that did not respond to the phone survey were dropped and replaced by newly assigned ones. Small companies represented half of respondents, followed by large (33 percent) and medium-sized companies (17 percent). The profile of surveyed businesses is in the Annex 7.

Data was disaggregated by caza, economic sector, employees' gender, and number of worksites the firm has, using the statistical software SPSS (Statistical Package for Social Sciences). Analyses of variance to test differences among means (i.e., one-way ANOVA tests) were conducted on the number of female employees and the number of total employees, to explore whether there was any significant difference in these variables between companies possibly willing, those not willing, and those with childcare support in place. Additionally, a Pearson chi-square test was conducted to assess whether there is any relation among the following factors: location, economic sector, size, and each of the family-friendly policies, and the employers' status on childcare provision. To explore in greater depth private sector willingness to participate in the provision of family-friendly work policies and employer-supported childcare, eight interviews were conducted with HR managers of private sector companies, managers of CCIA (Beirut and Mount-Lebanon and Sidon and the South), head of nursery syndicates and policy makers of relevant departments.

Given the fluctuating parallel exchange rate (compared to the official fixed exchange rate of LBP \$1,507.5

51 A standalone report will be published with more information on the results of this survey: IFC and World Bank. "Tackling Childcare in Lebanon: Creating Family-Friendly Workplaces." 2022. Washington D.C.: World Bank Group

52 The survey for this component was originally conceived as an online survey filled out by a company's representative. Low response rate to this e-survey led to the decision to conduct the employer survey following a CATI procedure.

53 Participants included: human resource managers of two large private sector firms in the manufacturing and health services sector; managers of the CCIA-BML and CCIA Sidon and the South (CCIA-S); heads of the Syndicate of Nursery Owners and the Syndicate of Specialized Nurseries in Lebanon and of a large nursery in Mount Lebanon; heads of departments relevant to ECCE at the Ministry of Education (MEHE), Ministry of Social Affairs (MOSA), and Ministry of Public Health (MOPH).

to US\$1), the following average rates were applied, depending on the period of fieldwork, to provide the equivalent US\$ amount: (i) for the mapping exercise conducted between December 2020 – April 2021, the average rate of LBP10,115 was applied; (ii) for the supply-side survey conducted between April 2021–June 2021, the rate of LBP12,346 was applied; (iii) for the demand side survey conducted between July 2021

– August 2021 the rate of LBP19,527 was applied; and (iv) for the phone survey conducted between January 2023 – mid-February 2023, the rate of LBP 49,747 was applied for the data collected in January and the rate of LBP 66,162 for the data collected in February.⁵⁴ Information referring to monetary units are presented in both LBP and equivalent US\$ currencies, using these rates.

BOX 3. COMPARISON OF METHODOLOGY WITH THE REGIONAL MASHREQ CARE REPORT

A World Bank report entitled “*Who Cares? Care Work and Women’s Labor Market Outcomes in Iraq, Jordan and Lebanon*” was recently published. This country assessment for Lebanon as well as this regional report are complementary and build on one another. Some findings from the regional report are included in this country assessment, while some findings from the Lebanon assessment are included in the regional report. The only caveat is that the analysis in the regional report covers the age range 0-5, while this Lebanon country assessment covers the age range 0-3.

The methodology of the regional report is as follows. The analysis of time-use and demand for childcare services builds on primary data collected from a sample of 2,168 women and 1,101 men in Jordan, Iraq, and Lebanon between March and June 2021. Moreover, to assess pandemic effects, the survey included retrospective questions on time use and labor market engagement. Survey data was collected from women with (i) potential need for childcare services, and (ii) who were within the age to be in the labor force. The survey was conducted with a sample of mothers or mothers-to-be aged 20-55 years. In Lebanon, 88 percent already have children.⁵⁵ The findings of this report do not apply to women in the 20-55 age group who were neither mothers nor mothers-to-be at the time of the survey or were not citizens. Similar caveats apply to the sample of men. Due to COVID-19-related disruptions, and aided by high phone penetration rates, the surveys were conducted by telephone. Individuals were randomly selected to participate in the survey using a random digit-dialing methodology. This approach was based on nationally representative databases of active telephone numbers in all three countries. However, in Beirut (Lebanon) random-digit dialing has been less successful and therefore, the database was supplemented with phone numbers generated using a random number generator and associated with the relevant area codes.

54 These rates are based <https://lirate.org/> daily parallel market exchange rates, and World Bank staff calculations of monthly averages.

55 Central Administration for Statistics in Lebanon, & International Labour Organization. (2019). (rep.). *Labour Force and Household Living Conditions Survey (LFHLCS) 2018–2019 Lebanon*. International Labour Organization. https://www.ilo.org/wcmsp5/groups/public/-arabstates/---ro-beirut/documents/publication/wcms_732567.pdf

3. POLICY AND LEGAL FRAMEWORK AROUND CHILDCARE

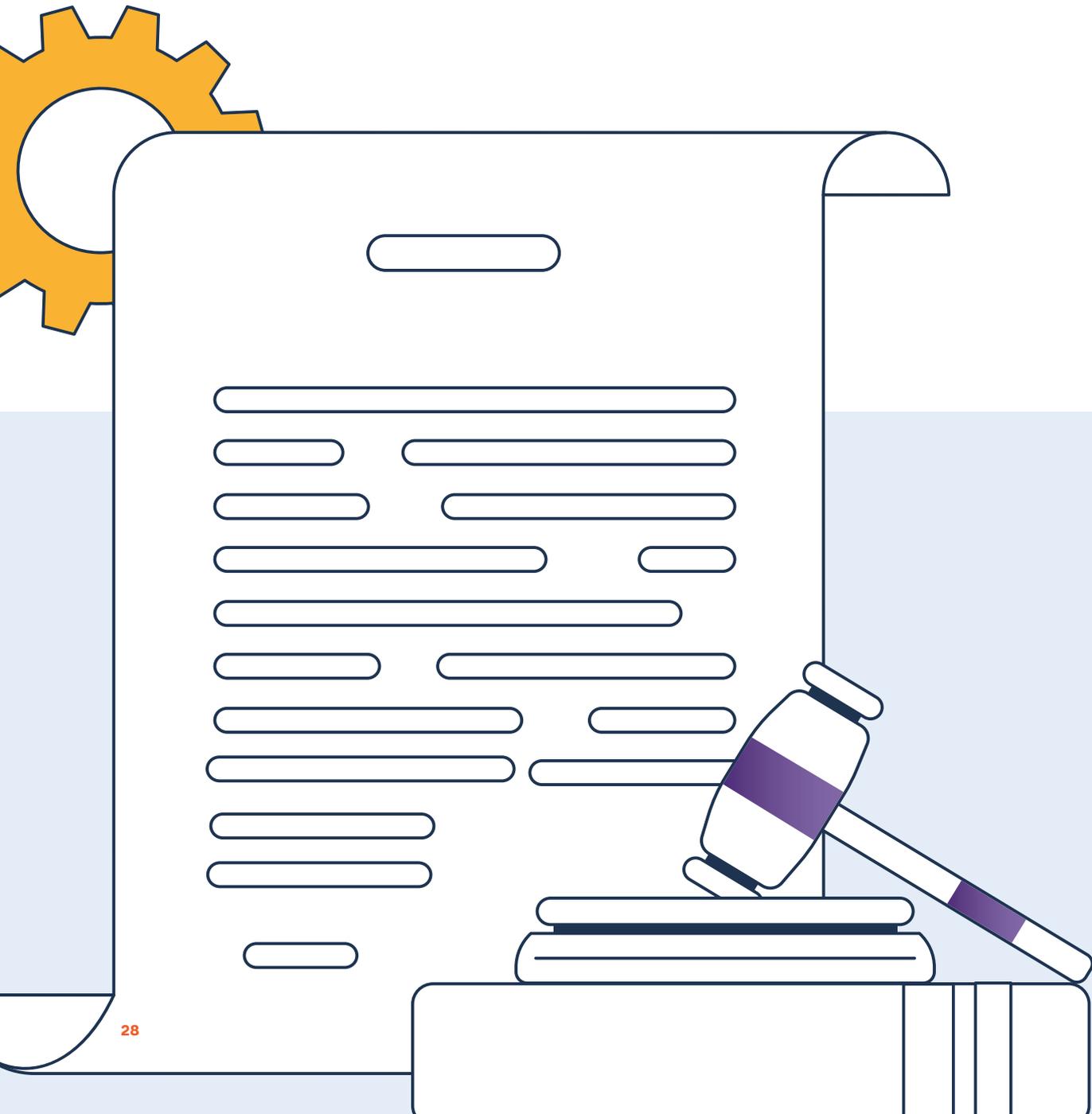
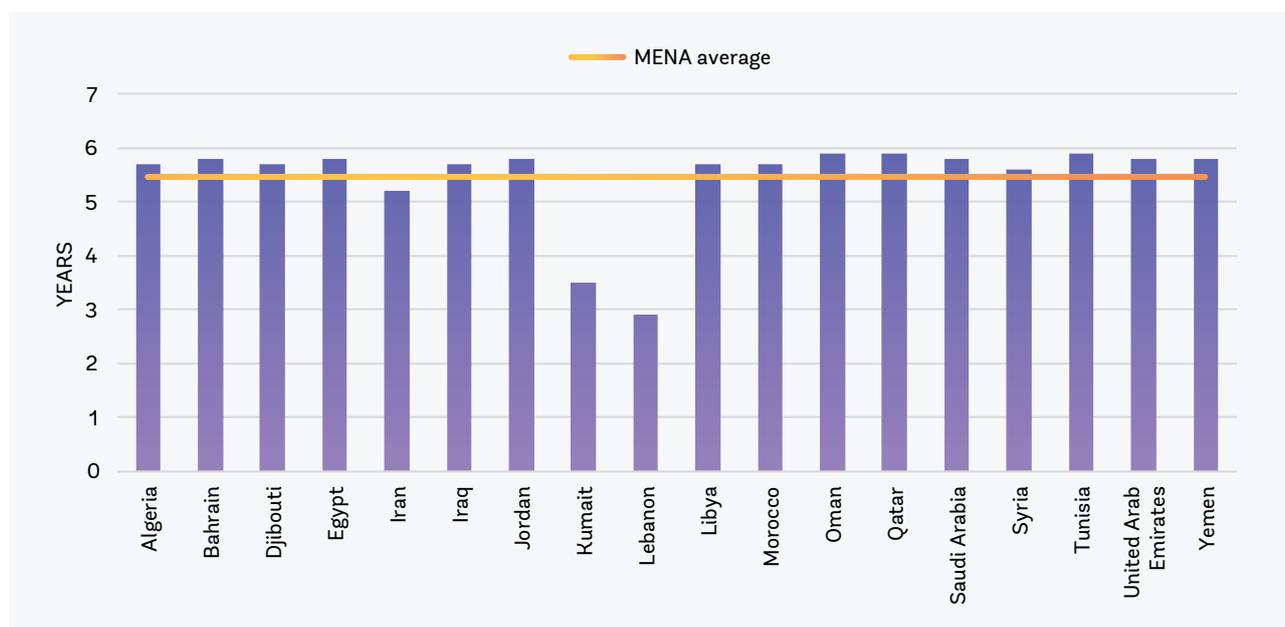


FIGURE 3. CHILDCARE POLICY GAP IN MASHREQ COUNTRIES AND MENA



Source : (Redaelli, S., et al., 2023).

In Lebanon, there is no statutory provision of early childhood educational and care services for children below age 3. Early childhood care and education (ECCE) services are divided between care services for younger children (usually below the age of 3) overseen by the Ministry of Social Affairs (MOSA) and the Ministry of Public Health (MOPH), and education programs for preschool-age children which are the responsibility of the Ministry of Education and Higher Education (MEHE). However, none of these services is mandatory in the country. (See a brief review of broader family-friendly policies in Lebanon, in Annex 4). This fragmented framework combined with a limited offering of childcare services and limited parental leave options, results, as mentioned in the second State of the Mashreq Women report (Redaelli, S., et al., 2023), in a sizeable difference (in years) between the starting age of universal and free ECCE or primary education, and the childcare related paid leave reserved to households, referred to as the “childcare policy gap” in Figure 3.

Lebanese regulation defines childcare/nurseries as a service targeted to children aged between 40 days and 3 years old; laws on childcare are limited to licensing, and they apply to private providers only. The main legal provision on childcare services is Decree No. 4876/2010 which sets the conditions for

the licensing of private, NGOs, religious groups, and companies’ nurseries. The Decree defines childcare and nurseries as “comprehensive care services that receive children from 40 days to 3 years of age (beginning of the 4th year) to address their needs and requirements, through taking care of them and developing their personalities on the physical, psychological and social levels and providing them with a healthy and safe environment, and adequate educational upbringing (...).”⁵⁶ Other provisions stipulate enrollment age in public and private childcare services. For instance, nurseries are not allowed to establish kindergartens which target children 3 and older as kindergartens fall under the mandate of the MEHE, while nurseries for children 3 and younger, fall under the mandate of the MOPH.⁵⁷

The MOPH is the main authority responsible for regulating and monitoring childcare services for children younger than three years old. Private nurseries are registered with the Department of Mother and Child Health at the MOPH, and they constitute most of the childcare supply in the country (see Chapter 4. Supply-side Assessment of Center-based Childcare). The Department, however, does not have a dedicated unit/division for nurseries exclusively. Public nurseries on the other hand, are operated and overseen by the MOSA and are mainly found within

⁵⁶ English translation from the Arabic text of Decree No. 4876 of 2010.

⁵⁷ Memorandum No 153, dated 22/10/2020.

MOSA's Social Development Centers (SDCs).⁵⁸ MOSA-operated nurseries do not require a license to operate. MOSA can also undertake contractual agreements with NGOs for the delivery of public-funded childcare. In these cases—i.e., nurseries that are operated by NGOs—they are licensed by the MOPH (like the private sector).

Regulation of childcare services in the country covers center-based providers only and it focuses mainly on structural quality; home-based provision remains unregulated. Statutory minimum quality standards mainly focus on *structural* quality, the presence or absence of resources that facilitate the interactions of an environment of care (more or less in line with OECD average standards) and less so on the elements of *process* quality, the standards of childcare routines and child-caregiver interactions, as well as interactions among children and their peers, and parents with caregivers (Table 6). With regards to structural quality, regulation in Lebanon includes provisions on staff-to-child ratios, and there is a heavy emphasis on physical infrastructure (e.g., space per child, which is about one meter less than the OECD average, and layout of facilities and rooms). When it comes to process quality, there is no national ECCE curriculum framework, and regulation leaves it up to the childcare center to develop an appropriate program or curriculum. There are no specifics in terms of family involvement or interactions with peers and/or teachers. The only process-related aspect with defined requirements is staff qualifications. The same licensing institution oversees compliance and monitoring. Licensing regulations do not specify the periodicity of inspection visits (see more on quality in Chapter 4. Supply-side Assessment of Center-based Childcare).

The Lebanese labor law requires the allowance of 10 weeks for paid maternity leave, which is shorter than the recommended 14 weeks in the ILO Maternity Protection Convention. A draft law was submitted by 7 members of Parliament in 2021, proposing to increase maternity leave to 15 weeks. As for paternity leave, there are three draft laws that have been submitted to Parliament and are

still pending ratification. One proposes three days, another proposes one day and the most recent one proposes 10 consecutive or non-consecutive days. Currently, the labor law does not grant any paternity leave. All employers are legally required in Lebanon to register their employees with the National Social Security Fund (NSSF). The social security contribution consists of a flat rate of 3 percent of the basic salary paid by the employee to cover sickness and maternity (medical) and a 22.5 percent contribution by the employer. The employer share is divided into 8 percent for sickness and maternity (medical), 6 percent for family allowances and 8.5 percent for end-of-service allowance (on whole salary). The NSSF covers the medical related expenses of maternity but does not reimburse employers for maternity, paternity, or sick leaves (Lewis, 2020).

Pre-primary education (preschool) is not compulsory⁵⁹ in Lebanon, although it is the only country in the Mashreq region that provides access to public pre-primary (preschool) education for children starting at age three and up to five years old. The MEHE is responsible for the establishment and supervision of kindergartens (KG) in public schools, where KG classes are available alongside primary education. MEHE is also responsible for licensing KGs in private schools. In Lebanon, at KG1 level, 57.4 percent of children are enrolled in private school and 42.6 percent are enrolled in public school. At KG2 level, 65 percent of children are enrolled in private schools and 35 percent in public schools.⁶⁰ MEHE however, does not include a dedicated service or department for pre-school education. Pre-school curriculum is developed by the Centre for Educational Research and Development (CERD), an institution linked to MEHE which is also responsible for pre-service and in-service training of teachers. Qualifications for KG teachers are not legally specified and there is currently no assessment of pre-school teachers' qualifications and profile. Prior to 2014, the MOPH was responsible for the care of children in the 0-3 age group, while the MEHE was responsible for education of children aged 4 and older. In 2014, Decree No 11930 re-defined admission age at public KGs to be three instead of four years.

58 Marakez Al Khadamat Al Inmayah. SDCs have been a universal feature of local-level service delivery in Lebanon since the late 1960s. There are approximately 280 SDCs in the country, including both primary and secondary centers. The secondary centers tend to be located in more rural areas and may be satellites of the primary centres. These centers constitute the most important local-level executive arm of MOSA.

59 Children can enroll in primary education without having attended preschool levels (Decree No. 8970/2020).

60 The sample of households accessing any sort of childcare support on a consistent basis was very small and, therefore, it is not possible to specify use by type of provider. However, the sample shows that almost all children go to either public or private formal institutions and very few uses informal arrangements or nannies. Source: *CERD Statistics 2020/2021*

TABLE 6. LICENSING REQUIREMENTS FOR PRIVATE NURSERIES IN LEBANON COMPARED TO OECD AVERAGE STANDARDS

	Lebanon	OECD
Staff: child ratios	1 licensed nurse or certified assistant: 10 children aged 40 days to 1 year 1 nursery teacher + 1 nursery assistant: 20 children > 1 yrs. Old	Childcare: 1 staff member: max. 7 children KG/preschool: 1 staff member: max. 18 children Family or domestic care services regulated with stricter ratios; among countries with available data, max. 5 children per staff
Teacher/caregiver qualifications	The childcare worker should have a degree in pre-primary education or any field of education. Nurse should be licensed by the Ministry of Public Health; or an assistant with minimum of 5 years' experience certified by the Nurseries Syndicate.	Childcare workers: in most countries, must have a vocational-level diploma, generally at a <i>children's nurse</i> level (upper secondary, vocational level); many countries also have <i>specialist staff</i> trained to secondary-level graduation, plus a one to two-year tertiary-level vocational diploma. Pre-primary teachers: generally trained at the same level and in the same training institutions as primary school teachers.
Other Staff qualifications	Nursery team should include: Director with university degree (nursery education, sociology, psychology, health sciences, management, and economics) A minimum of 1 cleaning staff A licensed doctor (to practice medicine in Lebanon) specialized in pediatrics, family medicine or general medicine, to effectuate bi-annual visits and as needed. The deputy director should be a registered nurse or educator.	
Space per child	1m ² per walking child 2 m ² for infants who cannot walk in the bedroom A bedroom for infants under 1 yr. old, and classrooms for educational purposes divided by age and language.	In general, indoor space requirements are largest for family day care, followed by childcare centers and KG/preschool. OECD average for regulated indoor space per child: 2.9m ² per child for KG/preschool, 3.6m ² for care centers.
Infrastructure	Bathrooms: must have small toilet seats, with one seat for every 10 children age 1.5 and above. Separate bathroom for staff and administration. Other rooms: nurseries should have the following rooms: Management and reception room Recreation rooms or halls Dining room Dedicated running area for children. An infirmary where sick children can stay and wait for their parents to pick them up Kitchen Large play area that meets all necessary safety precautions Ceiling: height must be 2.75 mts	
Safety	Facility must not be below ground level or in warehouses. Insurance: The nursery must be insured, and a copy of the insurance policy must always be present on site.	
Learning program	Nursery must develop a curriculum that ensures the physical, intellectual, psychological, and social development of children that will facilitate their transition to school life. No national curriculum/learning program.	Most countries have a national ECEC curriculum framework (specific requirements as to what is expected of ECEC staff, as well as values and principles)
Health/Nutrition	Some protocols for infectious diseases detected in nursery, or sick children. Medical supervision: a licensed doctor who specializes in family medicine, pediatrics, or general medicine to examine the children twice a year as necessary.	
Quality assurance: monitoring, inspection	Ministry of Public Health (MOPH). Annual report to be prepared by nursery along with other documentation. No details are provided in terms of procedures and frequency of inspection visits.	Monitoring practices for compliance with regulations are mostly implemented through external inspections by national authorities or an independent inspection agency

Source: Authors' elaboration based on Decree No. 4876 of 2010 for Lebanon. For the OECD averages: (OECD,2017)

4. MAPPING AND SUPPLY-SIDE ASSESSMENT



4.1. CENTER-BASED CHILDCARE SERVICES

4.1.1. MAPPING OF SERVICES: DISTRIBUTION AND CAPACITY

Supply of childcare services in Lebanon is mostly private and geographically concentrated in coastal areas where employment opportunities for women are most available; inland districts have limited availability of services. The mapping exercise (CATI) identified 536 providers of childcare services in Lebanon, all center-based.⁶¹ Most of the facilities are run by the private sector (81 percent), followed by religious institutions (6.9 percent), not-for-profit organizations (6 percent, associations mostly) and the smallest share run by the public sector (5.6 percent, mainly by MOSA). In terms of location, the mapping shows that services are highly concentrated in the coastal areas of the country; Beirut and the Metn cazas together concentrate 25 percent of providers (Map 1). At the same time, inland districts/cazas farther away from the coast and rural areas have limited availability of services. Areas such as Bcharre, Hermel, and Jezzine are complete childcare deserts (i.e., absence of childcare providers), whereas Hasbaya, Marjaayoun, Minieh-Danieh, Akkar, Sour, Baalbek, and West Bekaa among others, are partial deserts.⁶²

The distribution of center-based providers across cazas vis-à-vis the share of population in the 0-3 age group per caza, indicates a mismatch between supply and potential demand (i.e. population that could demand childcare services) in some cazas.⁶³ There are various cazas where the supply of services is not aligned to the potential demand. For instance, Akkar caza in the north, is the caza with the third largest share of children 0-3 (9 percent of total population aged 0-3) has 11 providers only. However, the coastal cazas Baabda and El Metn, which represent similar shares of young children in the population (13 and 11 percent, respectively), have a significantly higher number of providers operating in the area (71 and 81 providers, respectively). The mismatch applies to public supply as well. Only two cazas -Nabatieh and

Bint Jbeil- concentrate most of public providers with a share of 23 and 20 percent of providers, respectively; however, together, these cazas represent only 6 percent of the estimated population in the 0-3 age group. Keserwan and Tripoli come second with 9 percent of public providers in each caza (see Table A5.1 in Annex 5 for detailed numbers).

The geographical distribution of childcare services centers in Lebanon suggests that workplace location could be an important factor determining location of centers, followed by household (and ultimately, children's) residence. Results above show that services are highly concentrated in the coastal areas of the country. At the same time, these areas - Beirut together with the Mount Lebanon governorate - have the highest rates of labor force participation (male and female) and are business hubs in the country. In fact, Beirut and Mount Lebanon are known to be major economic, social and cultural hubs, so it is not surprising that their female labor force participation rates are higher than the country average (at 24 and 26 percent, respectively). FLFP is considerably lower in northern and southern governorates, with rates as low as 12 percent in Akkar, 22 percent in Nabatieh, and 20 percent in Bekaa (Figure 4). Participation rates among men seem relatively equal across governorates. On the contrary, areas with less commercial and employment activity but with similar shares of population of children have less supply of childcare services available. The fact that residence is less aligned with location of centers applies to both private and public supply.

At the time of the mapping, there were on average 14 childcare places available in center-based services for every 100 children aged 0-3 nationwide. The estimated number of children in the age group 0-3 in Lebanon is 214,270 (year 2021), and the total current capacity among the 509 mapped providers to accommodate this age group is 29,105 children.⁶⁴ This means that there are an estimated 185,165 children in this age group that are not serviced by center-based

61 The mapping exercise identified 536 center-based childcare providers from which 27 are permanently closed. The CATI was conducted with the remaining 509 as described in the methodology section

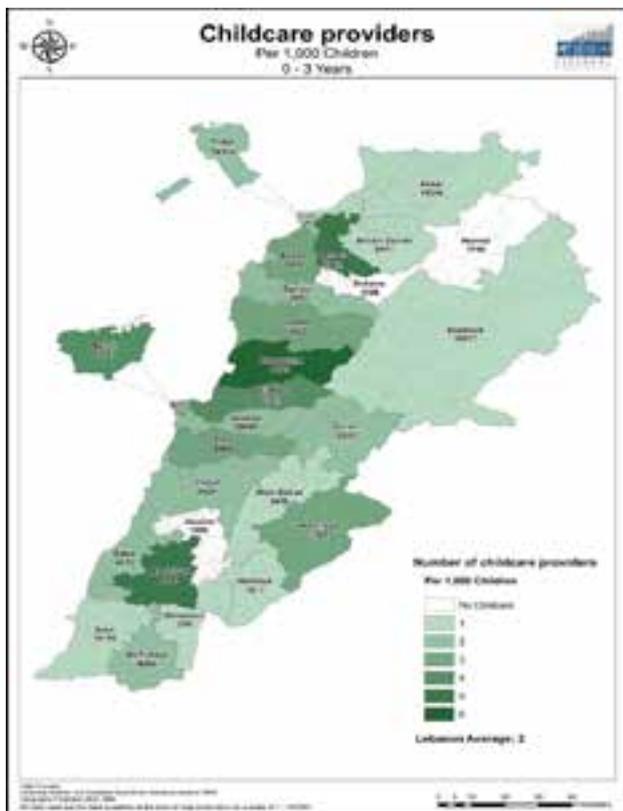
62 A childcare desert in this report refers to a caza without any childcare providers and 0 spaces/seats per 100 children. A partial childcare desert in this report refers to a caza with 6 or less spaces/seats per 100 children.

63 Estimates of population in the 0-3 age group for 2021 are based on the population figures reported by the 2018 Central Administration of Statistics. The methodology is described in the technical note in Annex 7.

64 The question of capacity is the following: Maximum capacity of the center to accommodate this age group.

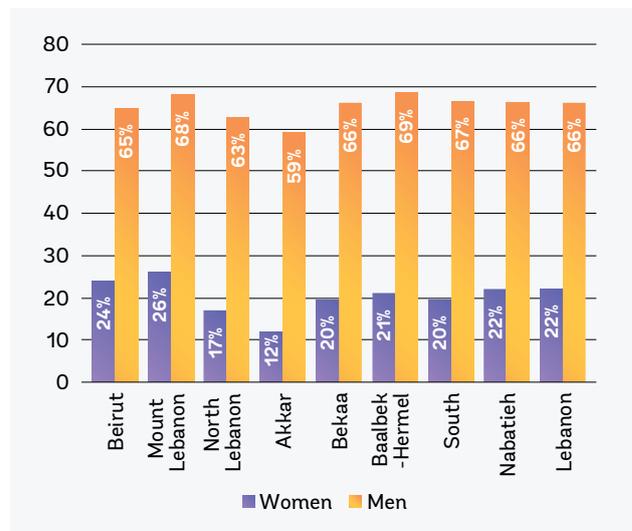
childcare services. Considering the average provider capacity in each *caza* and the projected population in the 0-3 age group per *caza*, Map 2 shows the estimated number of nurseries that would be needed to serve all children aged 0-3 in each *caza*.⁶⁵ The map confirms mismatches between population of children and location of center-based services. Akkar has the highest need for providers to meet potential demand (590 providers are needed), whereas in El Metn which represents a similar share of children population as Akkar, 290 providers are needed. It is important to note that this mapping exercise might underestimate available capacity to serve young children as there are centers that, due to their more 'informal' or unregistered operation, were not captured in the mapping activity.

MAP 1. TOTAL NUMBER OF CHILDCARE PROVIDERS PER 1,000 CHILDREN, PER CAZA



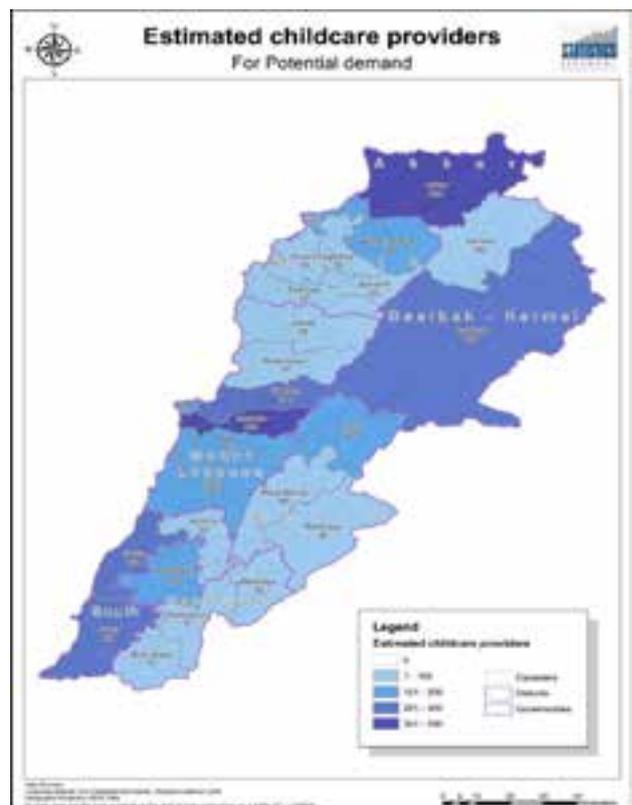
Note: Numbers shown next to each *caza*'s name refer to the projected 2021 population of children 0-3.

FIGURE 4. LABOR FORCE PARTICIPATION RATE BY GOVERNORATE AND SEX (%), 2022



Note: The figure was adapted using data from the CAS - Lebanon follow-up Labor Force Survey, 2022

MAP 2. ESTIMATED NUMBER OF CHILDCARE PROVIDERS NEEDED TO COVER POTENTIAL DEMAND OF CHILDREN 0-3



Note: Numbers shown within each *caza* refer to estimated number of childcare providers needed to cover potential demand.

⁶⁵ The estimated number of nurseries needed to cover *all* children in the 0-3 age group, per *caza*, corresponds to the following formula: Estimated number of children 0-3, per *caza* / Average provider capacity, per *caza*. The number of nurseries needed to cover *potential demand* is the difference between nurseries for all children 0-3 and number of existing nurseries.

TABLE 7. INTERVIEWED CENTER-BASED PROVIDERS, BY TYPE

Type of Provider	CAPI survey (2021)	% Of total (2021)	Follow-up survey (Jan-Feb 2023)*	% Of Total (Jan-Feb 2023)
Private	228	80%	192	84%
Public	33	11.6%	21	9%
Semi-private	24	8.4%	15	7%
Total	285	100%	228	100%

Note: Of the 33 public providers, 21 MOSA-operated centers were closed due to government mandate related to COVID-19.

4.1.2. OPERATING STATUS DURING COVID-19 AND THE ECONOMIC CRISIS

About a quarter of mapped providers were closed at the time of the CATI survey in 2021, citing as the reasons both COVID-19 containment measures and the ongoing economic and financial crisis in the country, which hurt both profitability and demand for services. At the time of the data collection for the mapping activity (between December 2020 and April 2021), a share of 24 percent of mapped facilities (129 of 536) reported they were closed, either permanently or temporarily (or not yet defined). Answers from providers show that both the COVID-19 pandemic and the ongoing economic and financial crisis in the country mostly explain these closures. About 83 percent of closed facilities indicated the reason to be COVID-19 containment measures (imposed by the MOPH), and 46.5 percent attributed the decision to close to decreased enrollment due to the economic crisis and/or associated profitability/feasibility issues as well as reduced purchasing power of households. Of the closed centers, 8.5 percent indicated having closed after the explosion in Beirut which took place on August 4, 2020.⁶⁶ Furthermore, when asked about plans for re-opening (among the temporarily closed), 40 percent indicated not knowing yet and half of providers would consider reopening sometime in the next 6 months. The ongoing crises and impact on nurseries, coupled with uncertainty about the COVID-19 pandemic, all played an important role in the decisions of nurseries to re-open.

4.1.3. CHARACTERISTICS OF OPERATION OF CENTER-BASED PROVIDERS

A detailed in-person interview (CAPI) was conducted with 285 center-based childcare providers across Lebanon to better understand the landscape of service provision. In line with the mapping, most sampled providers were private. The assessment covered a sample of 285 providers of which 80 percent were private, 11.6 percent were public, and 8.4 percent were semi-private (Table 7). Semi-private providers are supported by private funds and by religious, non-religious, local, and/or international donors. In some cases, semi-private providers also receive partial support from public resources (MOSA mainly). Sampled providers are located across 20 cazas (of a total 26 cazas in the country). Center respondents were asked to categorize what they perceived the level of income to be in the neighborhood/surrounding area where the center is located, according to three categories: low, medium and high. According to surveyed providers, 72 percent of centers operated in (perceived) medium-income neighborhoods and 24 percent were located in low-income areas.

When the COVID-19 pandemic hit the country, the Lebanese government-imposed lockdowns from January to March 2021 which were lifted gradually afterwards. Data collection for the supply assessment (CAPI) survey took place between April and late June 2021. In this regard, reported figures on current capacity and enrollment might reflect COVID-related restrictions, among others.⁶⁷ In fact, at the time of the detailed survey, only 4.5 percent of the sample

66 The question on reasons for operating status allowed multiple answers; the shares do not add up to a 100.

67 By June 1st 2021, about 40% of the interviews were already conducted.

FIGURE 5. CAPACITY UTILIZATION (ENROLLMENT/FULL CAPACITY)

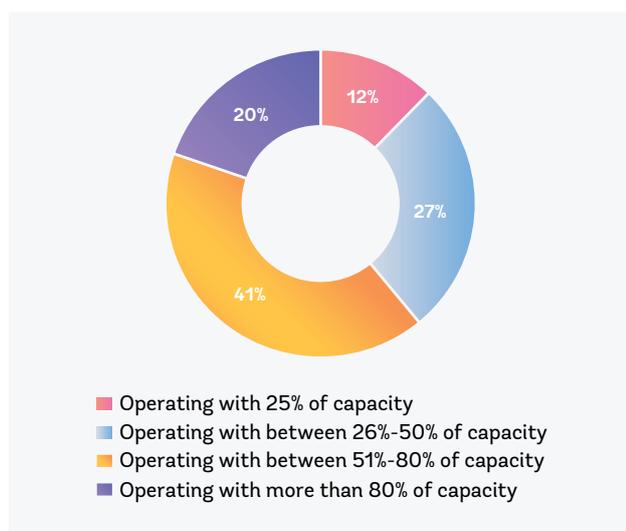
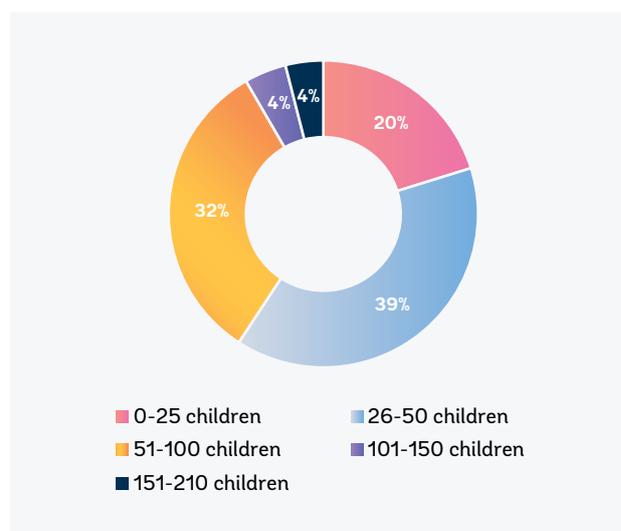


FIGURE 6. TOTAL CAPACITY OF NURSERIES BY NUMBER OF CHILDREN



(equivalent to 12 providers) reported a capacity utilization rate⁶⁸ of 100 percent. In addition, the government requested public providers to remain closed until September 2021, the reason why there is limited information available for 21 MOSA centers (of a total 33 public providers).

According to the follow up survey (Jan-Feb 2023), 9.5 percent (n=27) of the providers closed their doors due to the compounded effect of the COVID 19 pandemic and the economic crisis. The updated data shows that the average capacity utilization is of 58 percent for the age group 0-5⁶⁹ (Figure 5 and Figure 6). Around 10 percent of nurseries were operating at full capacity (22 nurseries), while 20 percent (45 nurseries) were above 80 percent capacity. At the time, almost 60 percent of nurseries could accommodate up to 50 additional children, with the remaining having the capacity to enroll over 50 additional children, and a few with a capacity of over 200 more children.

Ages served

Center-based services receive children in the 0-4 age group, but there is a higher emphasis on the 1-3 age group and a gap in provision among children under 1. This might reflect parental preferences regarding when they are comfortable to have their child start daycare outside of the home. However, it also signals a gap relative to mothers who might need this support during the early months after birth, particularly because paid maternity leave in Lebanon is only 10 weeks and there is no paternity leave in Lebanon yet. After age three, supply of childcare decreases and this coincides with the age when children can enroll in preschool or kindergarten, under the mandate of MEHE (Figure 7). Furthermore, services for the 0-1 age cohort are predominantly private and slightly supplemented by the semi-private sector. Of the public-owned or public-operated providers on which we have complete information, only four (non-profit) centers service this age group. Vacancy rates⁷⁰ for this group are the highest (45 percent) among all serviced age categories.⁷¹ Providers servicing this age group are concentrated in the coastal cazas of Baabda, El Metn and Beirut; together these cazas concentrate 45 percent of services available for the youngest children.

68 Refers to current enrollment as a percentage of total capacity.

69 The capacity utilization was calculated with the updated data gathered from the survey conducted between January and February 2023 covering a sample of 228 nurseries selected randomly from the universe n=509.

70 Vacancy rate refers to vacant seats as a share of the total capacity.

71 About 18 percent of the sample indicate that they receive children as young as 40 days old.

FIGURE 7. PERCENT OF CHILDCARE FACILITIES SERVING VARIOUS AGE GROUPS

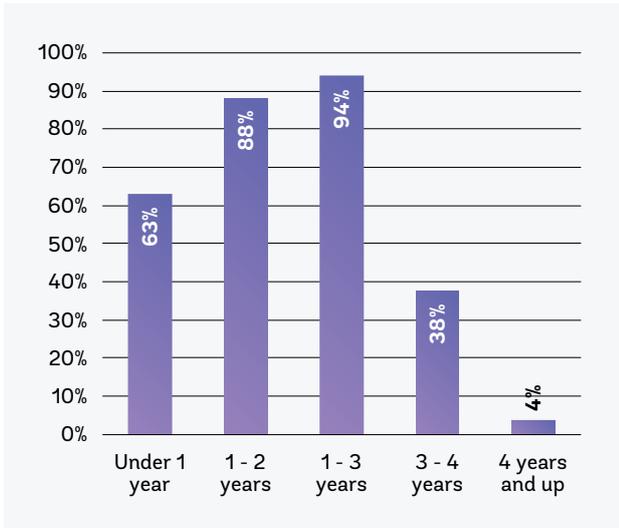
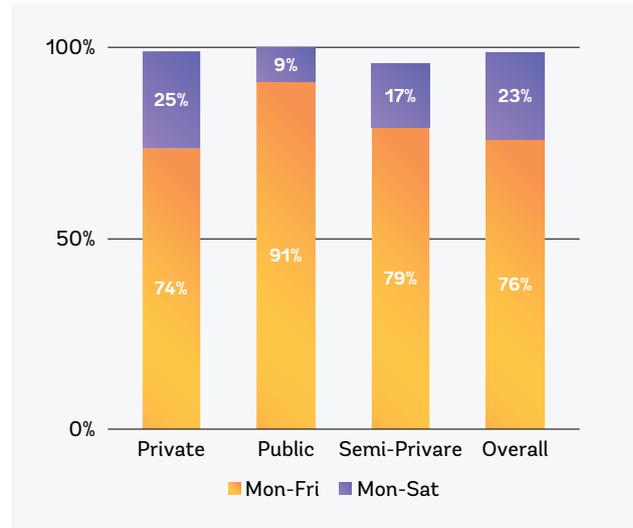


FIGURE 8. DAYS OF OPERATION, BY TYPE



Notes: Shares do not add to a 100% as providers can serve more than one age group. Excludes 21 MOSA centers that were closed at the time of the survey.

Hours and days of operation

Most providers offer full day shifts and morning half-day shifts and operate on a Monday through Friday basis. However, only half of the sample offers service after 3pm, not in line with the working hours in the private sector.⁷² Three quarters of childcare providers (76 percent) operate Monday through Friday and less common is a Monday through Saturday schedule (23 percent, including three MOSA centers). (Figure 8). In addition, 1 percent of the sample close on Friday, a religious observance day within the Muslim community. The most cited opening hours are 8:00am and 3 percent open earlier than that. In terms of closing, half of providers (53 percent) operate until the time range between 3:00 and 5:00pm, and only 5 percent (all private) stay open until 6:00pm or 6:30pm. While most providers (78 percent) offer full-day shifts, morning shifts are also common with over half of the sample (56 percent) offering that choice; however, only 2 percent (private only) reported they offer afternoon shifts.⁷³ Lastly, 10 percent of providers close operation during summer months, particularly

during August. These results show that opening hours of center-based providers, while convenient for parents employed in the public sector, do not fulfill the needs for working parents in the private sector (or working parents in general) who need childcare services for longer hours in the afternoon. The follow up survey conducted in January – February 2023, shows similar results in terms of operating days and hours.

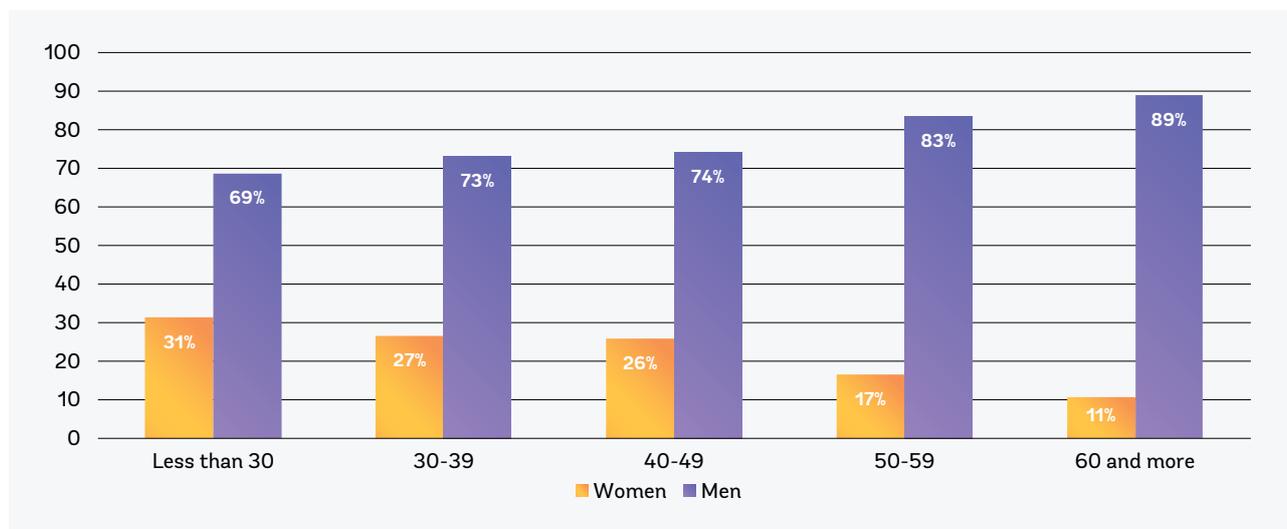
“I changed my career direction completely. I reduced my number of hours to cater to my children’s needs”
(FGD, working woman, rural poor, Beirut and Mount Lebanon).

Among working women, more than half work 40 hours or more during a regular week. For employed men, this percentage goes up to 80 percent, with 35 percent working more than 60 hours a week (Figure 9). Qualitative analysis of the focus group discussions (FGDs) shows that both female and male employment are impacted by childbirth, though mostly in opposite

72 As a reference, in the private sector, the most common working schedules are Monday through Friday from 8:00 am to 5:00pm or from 9:00am to 6:00pm. In the public sector, the working schedule (which was amended in 2017) is Monday-Thursday from 8:00am to 3:30pm and Friday from 8:00am to 3:00pm (Saturday is a non-working day). Referring to the labor law, Working Hours and Holidays section (Articles 31 to 43), the maximum number of working hours per week is 48 and the employee gets to have 1 hour break after 6 consecutive working hours for men and 5 consecutive working hours for women. ILO, (2010) Lebanese Code of Labor. [online] Available at: <https://www.ilo.org/dyn/travail/docs/710/Labour%20Code%20of%202023%20September%201946%20as%20amended.Publication%202010.pdf>

73 The morning shifts start before 9 am and finish by 3 pm. Afternoon shifts start after 12 pm and finish by 5 pm. All-day shifts start before 9 am and finish after 3pm.

FIGURE 9. DISTRIBUTION OF EMPLOYED (AGED 15 YEARS AND ABOVE) ACCORDING TO NUMBER OF HOURS USUALLY WORKED %, LEBANON, 2022



Note: The figure was adapted using data from the CAS - Lebanon follow-up Labor Force Survey, 2022

directions. Most working female participants reported that there were changes in their education and work strategies after they became mothers. Adaptation measures included changing from full-time to part-time work, choosing work with a more flexible schedule or settling for suitable work for lower wages. Fathers reported either not being impacted or having/wanting to work harder to support a larger family.

“The responsibilities/school fees/books have taken a toll. Before I used to work 5 hours but now, I work 12 hours per day”

(FGD, man, rural poor, Beirut and Mount Lebanon).

Enrollment procedures

At the time of the survey, 59 percent of the sample indicated that they were currently accepting new children at the facility which implies these providers were not operating at capacity. Overall, there are no minimum requirements in terms of minimum days/hours. The high share of providers not taking new enrollments (41 percent) can be partly explained by the pandemic-related context, at the time of data collection. Some providers might have been operating

at reduced capacity, and in the case of public providers, MOSA-operated ones were mandated to close operation. Some other centers indicated their registration process happens at the beginning of each year. The majority of providers do not have any specific requirements in terms of minimum days/hours of attendance to admit children. Only 13 percent of the sample⁷⁴ had a waitlist, most of them located in Beirut followed by El Metn, Baabda and Baalbek. The first two cazas are business hubs and are also densely populated, and the latter has low availability of childcare services.

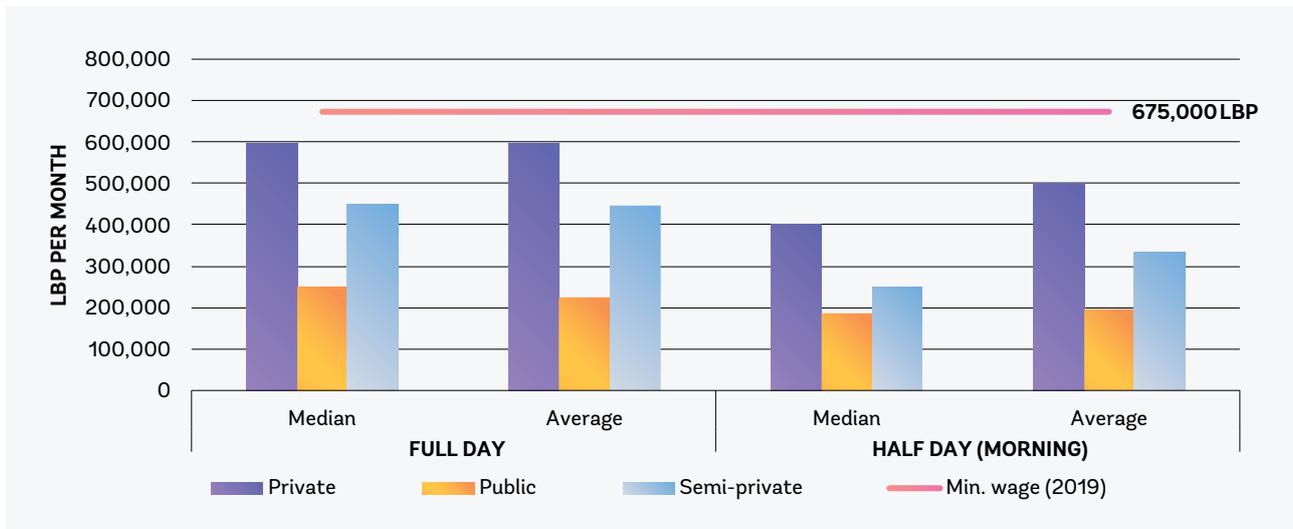
Accessibility

As reported by most providers (95 percent), private car is the most common means of transportation families use to get to the facility, and a minority reported families walked or used a school bus provided by the provider. This is not surprising since most households in Lebanon have a car.⁷⁵ Half of the providers estimate an average 15 to 30 minutes commute for families to get to the center; about a fifth of providers estimate that families need more than 30 minutes to get to the center. In addition, 24 percent of providers service children who commute from farther than the neighborhood (Caza) of the nursery, and some receive children from other cazas.

⁷⁴ Equivalent to 37 providers; 3 public, 4 semi-private and the rest private.

⁷⁵ In Lebanon, the International Road Federation (World Road Statistics) indicates 1,915,580 vehicles in 2018. Considering a population of 6,859,408 in 2018 (*World Bank DataBank*) and an average household size of 3.4 (CAS – spreadsheet attached), the number of vehicles per household can be estimated at around 0.95 vehicle per household.

FIGURE 10. AVERAGE AND MEDIAN MONTHLY FEE OF CENTER-BASED CHILDCARE, BY SHIFT AND TYPE OF PROVIDER, AS OF APRIL 30 – JUNE 28, 2021



4.1.4. AFFORDABILITY

Affordability of childcare services is an issue in Lebanon. The monthly median fee for full day center-based service can be as high as 89 percent of the minimum wage, and private providers charge twice the fee of public ones. Most providers in the sample (95 percent) charge for their services on a monthly basis. Data shows that the price for center-based childcare varies significantly by type of provider (Figure 10). For instance, in 2021, the fee for full-day services (refers to fee charged at the time of the survey) is the highest for private sector providers (median fee of LBP599,072 equivalent to US\$49 at the average parallel exchange rate at the time of the survey of LBP12,346 for US\$1), which – as previously discussed – represents the bulk of existing service supply, and the lowest for services provided by the government (median fee of LBP250,000, equivalent to US\$20).⁷⁶ In 2021, the average fee at the national level was LBP562,242 (equivalent to US\$46), which represents 80 percent of the minimum wage fixed at LBP675,000 (year 2019).

The economic crisis has had a severe impact on the affordability of childcare services, due to both an increase in the cost of providing the supply (and likely increase in price to users) as well as due to a reduction in households’ purchasing power. As reported by providers, the number of families experiencing

difficulty paying childcare fees increased from 2019 to 2021. In fact, the share of providers who indicate having at least 40 percent of families experiencing trouble with payments nearly doubled during this period (21 percent in 2019 to 41.5 percent in 2021). In addition, partly due to the pandemic but partly due to the economic and financial crisis affecting the monthly fees as well as the purchasing power of households, enrollment of new children in childcare services dropped significantly going from 9 children enrolled of every 10 applicants before 2019 to 6 out of 10 children in 2021. In the follow-up survey (Jan-Feb 2023), the share of providers indicating that at least 40 percent of families were experiencing difficulties to pay for services fell back to 32 percent. The disaggregation by provider type shows that this average is about the same for private and public providers (32 percent and 27 percent, respectively). However, half of the semi-private providers reported more than 40 percent of families struggling (7 out of 14 providers).

With the high volatility of the Lebanese currency, the follow-up survey conducted with nurseries in January and February of 2023 found an increase in nurseries setting their monthly fees to be paid in US\$, in cash, due to deterioration of the exchange rate. About 80 percent of the private nurseries charge in US\$ or a combination of both US\$ and Lebanese pounds. The average monthly fee charged by the surveyed nurseries

⁷⁶ Among private providers that charge on a monthly basis (n=165), most of them (88) charge monthly fees between LBP300,000 and LBP650,000; 27 providers charge less than LBP300,000; and there are 50 providers that charge prices higher than LBP650,000 (in fact, 11 of them charge more than LBP1,000,000 a month).

TABLE 8. MONTHLY FEE BY TYPE OF PROVIDER DURING THE FOLLOW-UP SURVEY – US\$ PAID IN CASH (JAN-FEB 2023)

Provider	n	Average	Median	Maximum	Minimum
Private	192	94	70	650	10
Semi-private	15	20	20	65	0 (donations)
Public	21	2	2	15	0
Total	228	81			

went up to US\$81 (Table 8) from US\$49, to be paid in cash, observed during the pandemic (exchange rates in January and February of 2023 of LBP 49,747 and LBP 66,162 respectively). The updated average monthly fee of US\$81 was as high as 94 percent of the average monthly income in Lebanon in 2022 (US\$86)⁷⁷(see Figure 11). Furthermore, an entry deposit fee was charged by 60 percent of the nurseries, mostly private ones, at an average price of US\$55, paid in cash. The semi-private and public nurseries have not adjusted their fees yet and are charging monthly on average the negligible amounts of US\$20 and US\$2 respectively.

FIGURE 11. AVERAGE AND MEDIAN MONTHLY FEE OF CENTER-BASED CHILDCARE, BY TYPE OF PROVIDER (JAN-FEB 2023)

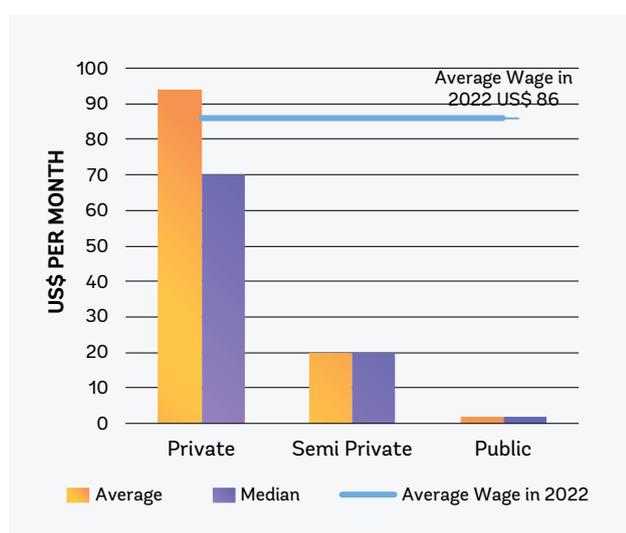


TABLE 9. SERVICE PRICE REDUCTION

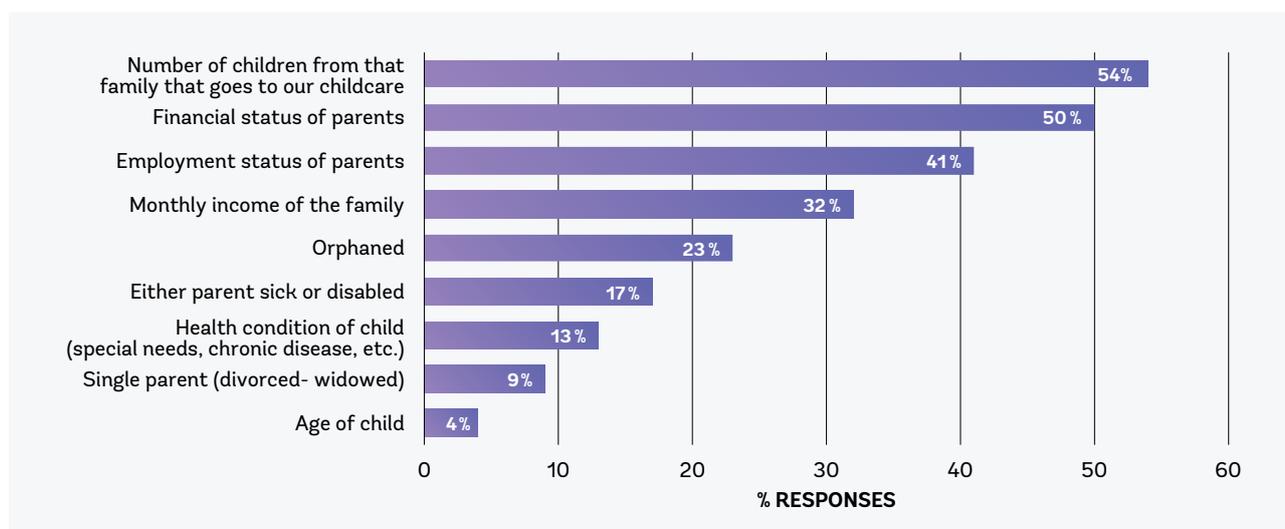
Service price reduction	Number of cases	Percent by case (%)
Yes	173	61%
No	111	39%
Total	285	100%

Providers estimate that at least 10 percent of enrolled children come from low-income households and are commonly offered flexible payment options and/or price reductions. The majority of providers (70 percent) estimate that at least 10 percent of enrolled children come from low-income families. One out of five nurseries (20 percent) estimate that at least half of enrolled children come from low-income families. In this context, about 70 percent of providers offer some payment flexibility for families with financial difficulties, often by extending the payment deadline or offering discounts, and some offer the option to pay by installments. Lastly, 61 percent (Table 9) indicate having price reductions under certain criteria such as the number of siblings attending the same center and the financial/employment status of parents, among others (Figure 12).

Due to surging inflation in Lebanon, the cost of food has increased significantly and keeps rising frequently. More than a third of care providers request parents to send children’s meals from home. At the time of the survey, 60 percent of providers indicated that they provide food at the center at no extra cost, while 3 percent charge an additional fee for food (Table 10). At the same time, a third of centers do not provide food and parents are required to send meals from home. Of the minority that charges for food, the reported extra cost ranges between LBP30,000 and LBP550,000 per month (equivalent to US\$2 and US\$45, respectively at

⁷⁷ Source: Central Administration of Statistics and ILO, (2022). *Labour Survey Lebanon 2022*. The exchange rate used is 26,713 Lpb for US\$1. It represents the yearly average exchange rate in 2022 computed by the World Bank staff.

FIGURE 12. CRITERIA FOR PRICE REDUCTIONS, % RESPONSES



Note: The number of providers offering price reductions is n=173, which represents 61 percent of the sample. Multiple choice allowed.

TABLE 10. ARRANGEMENTS FOR FOOD AT CHILDCARE FACILITIES

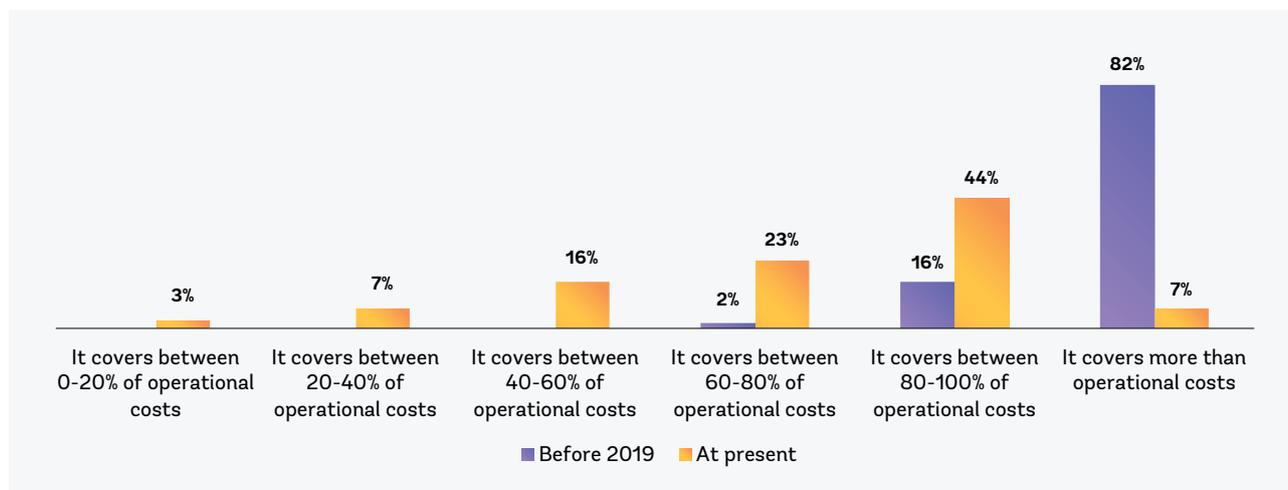
		Number of Providers	Percentage	Follow-up survey	
				Number of Providers	Percentage
Yes	Childcare provider, included in fee	170	60%	118	52%
	Childcare provider, at extra cost	9	3%	13	6%
No	Parents provide	101	35%	97	42%
	Parents provide, due to the pandemic	3	1%		
	Short shifts, no food required	2	1%		
Total		285	100%	228	100%

the average parallel exchange rate at the time of the survey). In-depth interviews with nursery syndicates suggest that, due to surging inflation and uncertainty about the cost of food, many providers have had to exclude serving food from the price and ask parents to take charge (or charge an extra cost).⁷⁸ With regards to other services, practically all providers in the sample include in the price the cost of materials for crafts, sports, toys, additional educational activities, and medical check-ups.

The follow-up survey in Jan-Feb 2023 found that on average 52 percent of the nurseries included the food costs in the monthly fees, with great differences among the type of providers. 56 percent of private nurseries serving food already included it in the price against 23 percent and 40 percent of public and semi-private ones, respectively. The majority of children in public and semi-private nurseries bring their food from home (76 percent and 60 percent, respectively). None of the public and semi-private providers offered food at an extra cost. For the 13 private nurseries that offered food at an extra cost, the average price was US\$28 to be paid in cash (median US\$30).

⁷⁸ The cost of food has increased about 8 fold in the past couple of years with the devaluation of the Lebanese currency and associated hyperinflation (Hussein, 2021).

FIGURE 13. SHARE OF OPERATIONAL COSTS COVERED BY STUDENT FEES, PRIVATE NURSERIES (JAN-FEB 2023), IN %



4.1.5. COST OF SUPPLYING CHILDCARE SERVICES, SOURCES OF FUNDING, AND FEASIBILITY

Cost of supply

Besides the impact on affordability, the economic crisis in Lebanon has increased the cost of childcare supply and has also hurt providers’ profitability and feasibility. The crisis has led to an increased cost of supplying center-based childcare services to the point that childcare fees no longer cover operating costs. Less childcare providers were profitable in 2021 compared to 2019, and the share of the operational costs covered by childcare fees has also decreased compared to 2019. While 22 percent of surveyed providers indicate that they operated at a profit before September 2019 (an already low share), no provider reported making profits in 2021 (at the time of the detailed CAPI survey conducted between April 30 - June 28, 2021). In fact, most providers (74 percent) were covering a maximum 40 percent of their operating costs with their personal budget or alternative funding sources other than fees.

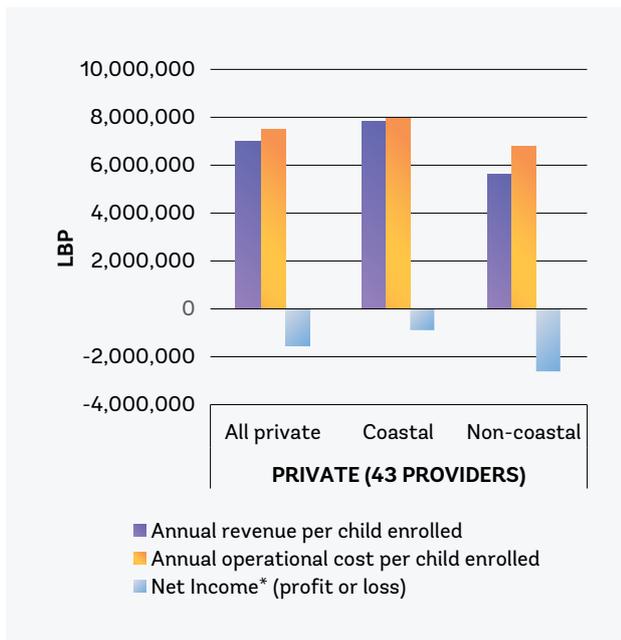
The supply assessment included a detailed costing analysis performed over a sub-sample of 43 private providers; the analysis confirms the difficulties that providers face to survive in the sector. The purpose of the costing exercise was to better understand the setting up and operating cost structure of providers

and identify entry barriers in the childcare sector. Given the breakdown of the sample in terms of private and public providers, the analysis focuses on private providers exclusively. According to this analysis, the ‘average’ private provider in this sub-sample in Lebanon operates at loss (Figure 13), with losses being even higher in non-coastal areas (where supply is scarce). These findings imply that the economic crises put the profitability of the childcare sector at risk and reduces the incentives for new entrants to join the sector. In addition, the increased cost of service provision makes it challenging for providers to maintain quality standards in the service. The follow-up survey in January and February 2023 collected data on the profitability of private providers before 2019 and at present. Before 2019, 98 percent of private nurseries reported that students’ fees covered at least 80 percent of operational costs. For 2023, only half of private providers reported the same (Figure 13).

Teacher and caregiver salaries as well as rent are the two biggest expenses in the operating costs for private providers, and furniture stands out as the biggest investment cost (to set up a center). The items that weigh the most in the operating cost structure are teachers’ and caregivers’ salaries (32 percent of operating costs and 47 percent if considering salaries of all the staff), rent (19 percent), and food/snacks offered to children (10 percent).⁷⁹ In addition, Lebanese regulation requires nurseries to be insured (liability insurance, in case of injuries on premises) which represents an important 5 percent of the cost (insurance

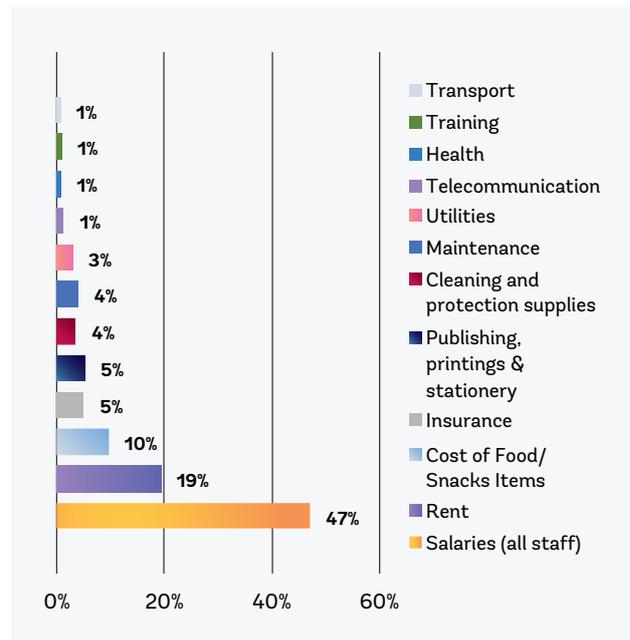
⁷⁹ With regard to rent: apart from the rent that is actually paid every month by the care providers, for service providers that own the buildings they reside in, the rent that would have been paid if the building was rented out is also included.

FIGURE 14. AVERAGE INCOME STATEMENT FOR PRIVATE PROVIDERS IN LEBANON (LBP PER YEAR AND PER CHILD ENROLLED), 2021



Notes: * Net income considers the additional effect of depreciation. Numbers are normalized by enrollment reported at the time of the survey.

FIGURE 15. OPERATING EXPENDITURES AS A SHARE OF TOTAL OPERATING COST FOR PRIVATE PROVIDERS (%), 2021



companies request payments in “fresh dollars”, Figure 14 and Figure 15). The purchase of supplies related to COVID-19 protection has also impacted cost. Overall, surveyed providers indicate that surging inflation has increased the cost of replacing equipment, maintenance, updating and/or renovating, furnishing materials, toys, and food. While utilities represent a smaller share of total operating costs (3 percent), it is important to note that electricity, gas, and generator costs currently represent a considerable burden for businesses in Lebanon as fuel prices are no longer subsidized and prices in the local currency have increased. Data collection, including the cost component, took place between April - June 2021. It is likely that, if information were collected after August 2021, utilities would represent a larger share of costs, as the fuel price was no longer subsidized by the government and fuel prices had increased dramatically by then.

The follow-up survey in Jan-Feb 2023 also included a costing analysis of the operating expenses of providers; salaries remained the biggest expense in terms of operating costs (Figure 16). For private and semi-private nurseries, teachers and caregivers salaries alone were the largest expenses (31 percent and 51 percent, respectively). Electricity/generator costs came in second for semi-private nurseries (14 percent) and

third for private ones (12 percent). In order to reduce their energy costs, 15 nurseries stated they had invested in solar panel systems. For public nurseries, if both utilities and salaries are disaggregated, electricity comes in first (20 percent), followed by the cost of food and snacks (13 percent) and teachers and caregivers salaries (12 percent).

FIGURE 16. PERCENTAGE IN TOTAL EXPENSES, ALL NURSERIES (JAN-FEB 2023)

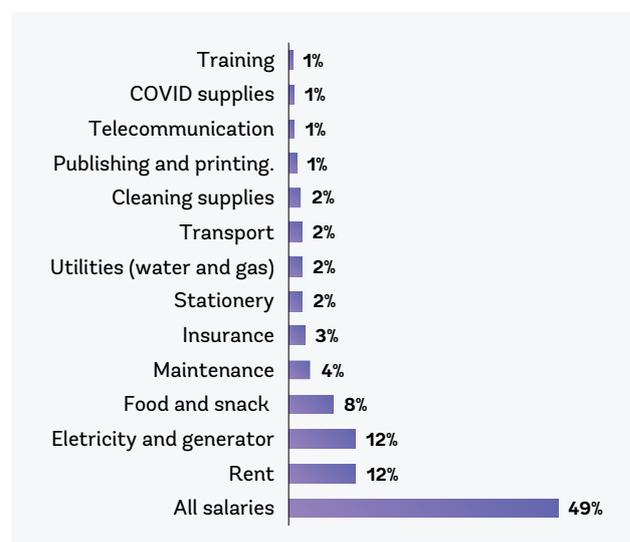
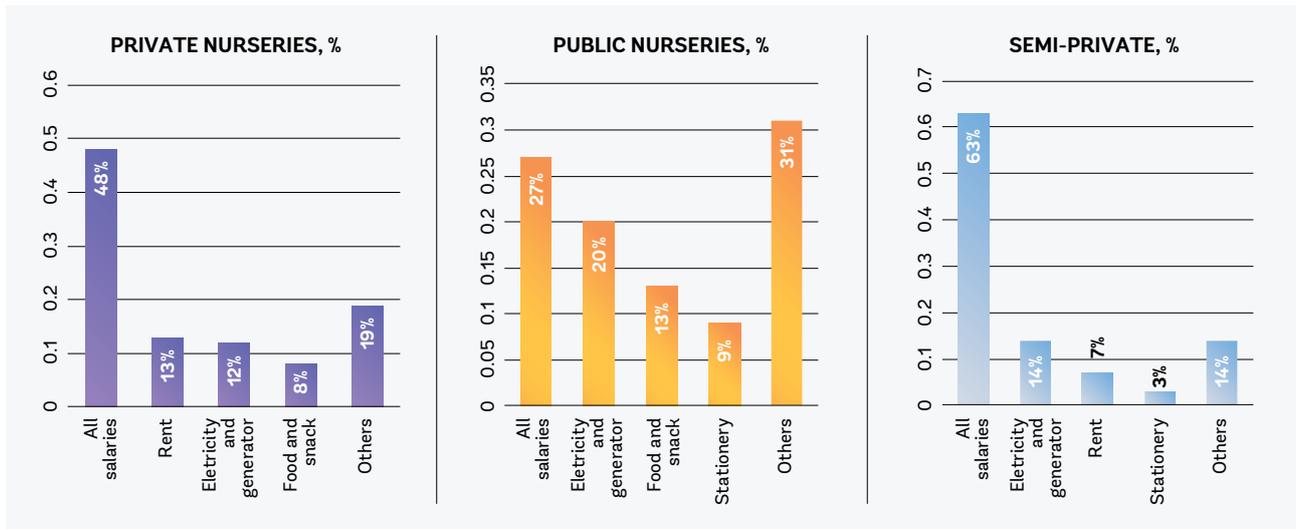


FIGURE 17. NURSERIES OPERATIONAL EXPENDITURES BY TYPE OF PROVIDER AND COST



The burden of rent for center-based services is particularly important considering that 52 percent of the full sample of providers surveyed pay rent on the location where they operate. Providers who indicate being ‘tenants’ comprise 142 private, 6 public and 1 semi-private. Only 7 percent of the full sample operate in a State-owned property (mostly public providers and a minority of semi-private) and a third own the building (surprisingly, only four are public and the rest are private and semi-private). At the same time, results indicate that the cost of rent is highly variable: as high as 20 percent of operating costs in densely populated areas of Beirut, Jbeil, Tripoli and El-Metn and, and as low as 4 percent in El-Minieh-Dannieh, Aley and Akkar. In-depth interviews with providers and syndicates suggest that owning the building/space makes it more feasible for providers to continue operation during the crises without having to translate their costs into higher fees.

Average investment costs amount to LBP146,400,000 per provider (equivalent to US\$97,114, using the official exchange rate of LBP1,507.5). The investments costs reported by the surveyed childcare centers referred to the pre-crisis period. Furniture, vehicles, and renovation are the three most significant expenses of investment cost (51 percent, 22 percent and 17 percent of investment cost, respectively).⁸⁰ Providers were also asked to estimate how much they would have to pay if they were to

build and set up a childcare facility like the one they have today; the average amount per private provider is LBP157,400,000 (equivalent to US\$104,411 at the official rate).⁸¹

Funding mechanisms and feasibility

Private providers - the driving force of the childcare sector - depend on private sources to finance their investment and operation, and this adds to the difficulty to join and survive in the childcare sector. For the existing providers in the survey data, 86 percent reported that set-up costs were covered through private means. These are private and semi-private providers; only 12 percent of all providers (2 semi-private and all 33 public) received some form of public funding. Most private providers (70 percent) used their own resources to start the business and in the case of public ones, funding came mainly from MOSA. In addition to user fees, 86 percent of providers (all private or semi-private) reported operational costs also being partly covered through private means, frequently owners’ savings. The public providers on the other hand are financed mainly through public sources.⁸² A model of public financing of private provision therefore does not yet exist in the sector.

In a context of increased cost of supply and reduced profitability, establishment of new private and semi-

80 Investment costs do not include the purchasing price of the building (which is reported under imputed rent in operational costs).

81 The estimated average cost for setting up a daycare at the time of the survey (April 30 – June 28, 2021) was calculated based on the pre-crisis exchange rate of US\$1=1507.5 LBP

82 Semi-private providers receive some operational support from the MOSA, but their main source is from associations or churches.

private initiatives and survival of existing ones will be challenging unless supported through public funding. Nursery owners and nursery representatives who participated in in-depth interviews, voiced their concerns that the current context might lead to private providers serving middle- and low-income areas, to close or that the prospects of an ongoing crisis will compromise the quality of service. The syndicate representatives voiced funding alternatives such as tax exemptions (e.g., municipal, and corporate taxes). Other suggestions included removal of VAT on childcare-related equipment and materials and compensation for insurance fees (which are usually charged at above the official exchange rate). In the case of nurseries affected by the Beirut explosion, participants voiced the need for government grants to finance the repairs.

“Exemptions from all kind of taxes (NSSF, municipality, water, rental values, etc.) are so important if we want to keep this sector going and to encourage development. For example, schools have exemptions on property and income taxes and electricity bills. Being taxed is a huge disadvantage for nurseries. Other policies include incentives such as VAT exemptions”

(Representative of Syndicate of Nurseries’ Owners in Lebanon).

4.1.6. QUALITY-RELATED ASPECTS

When it comes to quality of ECCE, the consensus is that the program must be comprehensive, and that it depends on several different elements, usually categorized as either structural or process elements. *Structural* quality refers to presence or absence of resources that facilitate the interactions of an environment of care; there resources relate to

center infrastructure, health and safety protocols/ programs, group size, staff/child ratios, and caregivers’ credentials. *Process* refers to quality of childcare routines and children-caregiver interactions, as well as interactions between children and their peers, and parents with caregivers. Process variables are particularly important for children under the age of three, because these children are forming attachments to significant adults (outside their immediate family system).⁸³ Structural and process quality are likely to be synergistic and with dynamic complementarities over time.⁸⁴ Measuring the quality of childcare for infants and toddlers is a complex process: assessing structural elements requires observation of the facility mostly combined with reporting from the center representative; process quality, on the contrary, requires expert observation, judgment, and interpretation, which in turn requires more time and is often costly. (Devercelli & Beaton-Day, 2020; López, Dormal & Weber, 2019; López, Araujo & Tomé, 2016).⁸⁵

Licensing

Practically all surveyed providers are licensed to operate, and only three providers reported that they were in the process of receiving the license at the time of the survey.⁸⁶ In the case of private and semi-private providers, the majority received the license from the MOPH⁸⁷, and only five that allow children older than four years old are licensed by the MEHE. The MOSA is responsible for licensing providers that belong to their Social Development Centers (i.e., MOSA-operated centers) as well as the MOSA-contractors (i.e., non-profits, NGOs, religious institutions. See operating standards in Chapter 3 - Policy and Legal Framework)

Providers’ perceptions suggest regulation and standards are clear, but when it comes to implementation, a quarter of providers find it difficult to comply with infrastructure-related requirements. Perceptions by service providers in Lebanon on current standards and legislation around childcare

83 Empirical evidence has found that structural variables are significantly correlated with childcare quality, but alone, structural elements do not guarantee high quality care. At the same time, evidence suggests that the frequency, type, and nature of the interactions between children and caregivers, is what most influences the development of children.

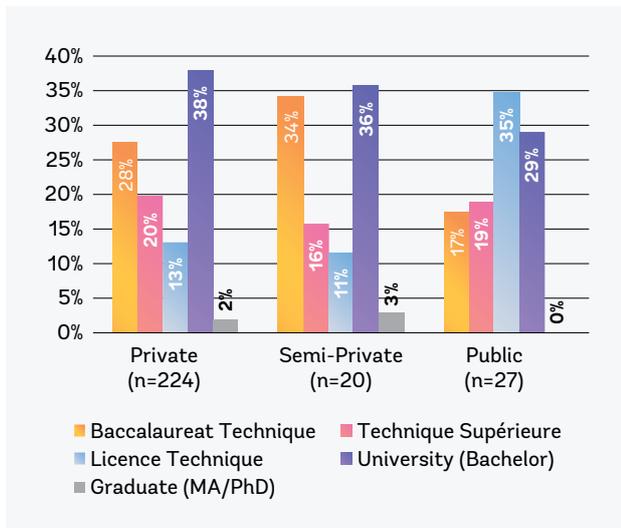
84 For example, having access to a variety of engaging learning materials can provide more opportunities for caregivers to interact meaningfully with children.

85 The questionnaire for the supply assessment included a set of questions, coupled with an observation checklist of the facilities, meant to provide a rather general assessment of (mostly) the structural quality aspect of center-based provision. Due to the complexity in measuring process quality, doing so is outside the scope of this study.

86 The 285 childcare service centers were licensed by the following entities: (i) 223 private and 16 semi-private are licensed by MOPH; (ii) 33 public and 7 semi-private are licensed by MOSA; and (iii) 2 private and 1 semi-private are licensed by MEHE. 3 private providers are in the process of receiving their license.

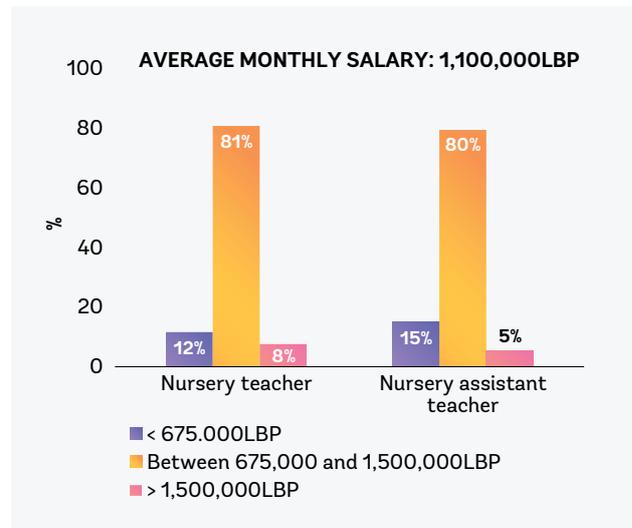
87 Through the Mother, Child and School Health Unit.

FIGURE 18. EDUCATION OF NURSERY TEACHERS/ CAREGIVERS BY TYPE OF PROVIDER



Note: 84 percent of teaching staff has at least Baccalaureate Technique. n=283 providers reported complete information for 1,283 nursery teachers/caregivers (of a total 1,336 teaching staff reported).

FIGURE 19. PRIMARY CAREGIVER AVERAGE MONTHLY SALARY AS OF APRIL 30 – JUNE 28 2021



Note: n=216 providers provided information on staff salaries. During the time of collection \$1=12,346LBP

provision show that most providers (above 90 percent) totally agree or agree that licensing regulations are accessible and clear, and the majority also agree that operating standards are clear. However, 68 percent think that the licensing process is time consuming, and 18 percent find it difficult to comply with licensing standards related to infrastructure, mostly because of the cost of space and/or lack of space to meet all requirements.⁸⁸

Teaching staff: credentials, salaries, and hiring practices

Over 80 percent of reported nursery teachers and assistants have at least a Baccalaureate Technique diploma (equivalent to technical secondary education) and close to half of teaching staff have a degree in early childhood education or early childhood management specifically. The supply survey included a module on staff composition and characteristics. Providers in the sample reported a total of 1,336 nursery teachers and/or caregivers (including licensed nurses) working at the centers. Of these, 66 percent

are nursery teachers and the remaining share nursery assistants.⁸⁹ Lebanese regulation requires centers to have a licensed nurse or assistant nurse for every 10 children younger than 1. While data shows general compliance with the 1:10 staff-to-children ratio, when it comes to presence of nurses, 152 facilities serving children 0-1 (of a total 166 serving this age) report having at least one nurse at the premises.

In addition, over 80 percent of staff have at least a Baccalaureate Technique diploma (equivalent to technical secondary education) and close to half have a degree on pre-primary education, specifically. For teaching staff for whom complete information was provided (1,283), 84 percent has at least Baccalaureate Technique (BT; most of staff with a degree below BT are nursery assistants). Furthermore, 48 percent of caregivers have a degree specifically related to early childhood care and education and/or management of childcare services (the rest, in other fields of education), and the share is higher among public providers than private ones (70 vs. 58 percent, respectively). Among private providers, the highest share of caregivers (38 percent) has a bachelor's degree, whereas at public

88 Lebanese regulation requires center-based providers to have at least one classroom per age category, a playground equalling the size of the classrooms that hold children that are older than 1 year old, a kitchen, a dining room, an administrative room, an infirmary room, and 2 bathrooms. See licensing requirements in Regulatory Review section.

89 The staff to child ration requirement in Lebanon is as follows: 1 licensed nurse or assistant with at least 5 years of experience per 10 children aged 40 days to 1 year; 1 nursery teacher + 1 nursery assistant per 20 children older than 1 yr. old. As for credentials, childcare workers should have a degree in pre-primary education or any field of education. Under the age of one year, the caregiver should be a licensed nurse and not a teacher. This survey did not differentiate between nurse and teacher for this question.

providers it is License Technique (i.e. post-secondary technical education, 35 percent; See Figure 18).

The average monthly salary of nursery teachers and nursery assistants is LBP1,100,000 (equivalent to US\$89 at parallel exchange rate), and close to 70 percent of caregiving staff work under a temporary contract or no contract at all. Around 80 percent of both teachers and assistant teachers receive a salary in the range of LBP675,000 and LBP1,500,000, equivalent to US\$55 and US\$121, respectively at the parallel exchange rate (Figure 19). However, providers operating in high-income neighborhoods reported salaries of LBP1,800,000 (US\$146) or higher.⁹⁰ As a reference, the minimum wage in Lebanon is LBP675,000 which was equivalent to US\$448 at the official or pre-crisis exchange rate of US\$1=LBP 1507.5). This shows that the salaries of teachers and assistants were not adjusted to the inflationary situation the country is going through. With regards to the type of contract for caregiving staff, 42.3 percent have temporary contracts, only 28 percent have permanent contracts and 27.1 percent have no contract.

Checklist of structural quality elements

To complement the above findings, supply-side data was used to construct a basic checklist of mostly structural quality elements based on ECCE expert's general consensus of critical aspects⁹¹ and their ratings of service providers in terms of presence of these elements. Service providers in the sample were rated according to five sub-components of quality (or compliance with a specific item in cases where there is a specific mandate under Lebanese regulation) in terms of structural elements mostly, and a few elements (as it was beyond the scope of this study) of process quality. The sub-components of the checklist were selected as (i) Infrastructure; (ii) curriculum,

materials, and learning; (iii) human resources; (iv) opportunities for parental involvement; (v) safety and sanitary practices.⁹² All variables in the checklist were rated between 0 and 1, and in cases where a variable is explicitly regulated by the government, the value of 1 indicates compliance. The sub-indices and the overall scores were standardized to a scale between 0-100, where a higher score indicates more availability of quality elements. (See more details on methodology in Annex 8).

In Lebanon, private providers, which dominate the supply, score on average 50 points (of 100 points) on a checklist of structural quality elements. This suggests that the existing supply lacks some of the regulated and/or desirable structural elements of a quality environment for young children. Private providers have the highest scores in aspects related to infrastructure, opportunities for parental involvement and safety and sanitary practices (Figure 20). Since most of the sample is of private providers, results in the quality checklist are mainly driven by private supply results. In addition, there is missing data on some of the variables for the 21 MOSA public providers that were temporarily closed due to the COVID-19 lockdown at the time of the fieldwork. (Detailed scores per variable for private providers are presented in Annex 8)

Results also suggest that there is a sizable gap in terms of availability of structural quality elements between private coastal and non-coastal operators, with coastal ones skewed towards higher scores in the structural quality checklist. (Figure 21) Among private providers, coastal providers scored on average higher than non-coastal providers overall and in every sub-index.⁹³ As explained earlier in the report, most of the center-based supply is concentrated on the coast where there is a greater residential density and where both industry and employers tend to also be

90 These figures are as reported by providers who provided complete information to the survey module on salaries.

91 See for example (López, Araujo & Tomé, 2016). Although a consensus exists among experts in early childhood education and development regarding the importance of these areas, there is no single, universal way to describe how these elements—which together constitute quality—should be combined or evaluated and what weight should be assigned to each.

92 The checklist of structural quality elements is loosely based on the ECERS-R and ITERS-R family of instruments but adjusted to focus specifically on care (rather than education). These family of instruments collect detailed information on center infrastructure, health and nutrition protocols, safety factors, the availability and accessibility of learning materials, the types of activities carried out during the day, etc. Their evaluation consists of observations and scoring. (López, Araujo & Tomé, 2016). The checklist of structural quality elements included a total of 69 questions (from the survey questionnaire), including various characteristics of the center as reported by the provider representative (which may be subject to self-reporting bias), and an observation checklist of the facility by the enumerator. Principal components analysis was used to construct an 'index' of quality in these sub-component groups, and also to create an overall score.

93 Coastal: Batroun, Beirut, Chouf, El Metn, Jbeil, Keserwan, Koura, Sidon, Sour, and Tripoli.

Non-coastal: Akkar (mostly non-coastal), Aley (mostly non-coastal), Baabda (mostly non-coastal), Baalbek, Bint Jbeil, Minieh-Danieh (mostly non-coastal), Nabatiyeh, Rachaya, Zahle, and Zgharta

FIGURE 20. AVERAGE SCORE ON CHECKLIST OF STRUCTURAL QUALITY ELEMENTS, PRIVATE PROVIDERS (N=171)

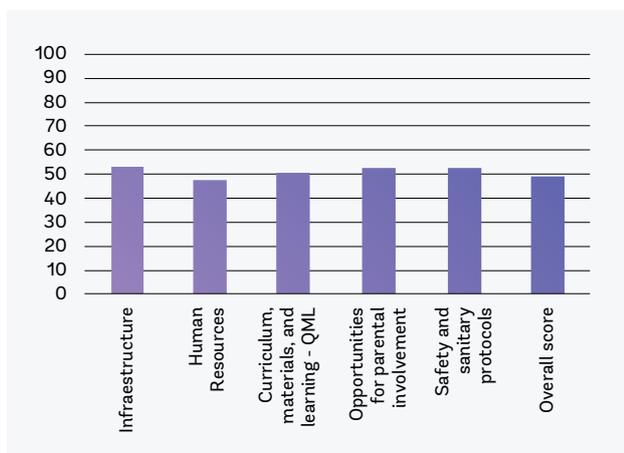
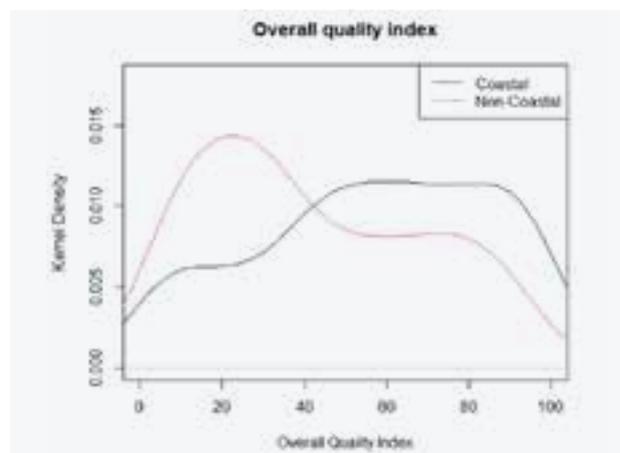


FIGURE 21. DISTRIBUTION OF CHECKLIST SCORE AMONG PRIVATE PROVIDERS, BY LOCATION



concentrated. This might encourage competitiveness among childcare providers.

Analysis of supply of childcare services in Lebanon further reveals that, among private providers, cost of childcare services is positively correlated with

quality, which, given the limited margins of profitability of childcare centers, implies an important operating cost/quality trade off. In addition, the number of years in operation is positively correlated with higher score in the quality checklist.

4.2. EMPLOYER-SUPPORTED CHILDCARE SOLUTIONS

Private sector firms in Lebanon are not mandated by law to provide their employees with childcare services and family friendly policies. Yet, many firms see the business value in it and perceive positive impacts on labor productivity, worker retention and lower rates of absenteeism. The different type of childcare support and family friendly policies provided by private sector companies are listed in Table 11 below. To better understand employer-provided childcare in Lebanon, a rapid survey was conducted with 100 firms. A sample of firms was drawn from a list provided by the Chamber of Commerce, Industry and Agriculture of Beirut and Mount-Lebanon (CCIA-BML) across 10 different sectors. Furthermore, eight key Informant Interviews were conducted to explore in greater depth factors that influence the provision of childcare services by companies in Lebanon. The 100 interviewed businesses are distributed across Mount Lebanon (72 percent), Beirut (24 percent), Nabatiyeh-

South (2 percent), Beqaa (1 percent), and North (1 percent). Wholesale and retail trade represented 38 percent and 36 percent, respectively, of the total sample. The remaining businesses are divided across several economic sectors. The aggregate number of female employees in the companies of the entire sample was 6,081, of which most were in Beirut (42 percent) and El Metn (28 percent).

Surveyed companies employ more than twice as many men (68 percent) as women (32 percent).⁹⁴ Among working parents with young children aged 0-5 years, 29 percent were female, and 71 percent were male. The share of women in the workforce in this sample is slightly higher than the national average in Lebanon (25 percent, World Bank – Enterprise Surveys 2019). Furthermore, according to the survey, over 80 percent of both female and male employees worked in large-size firms. Females with children aged 0-5

⁹⁴ At the national level, according to the most recent national labor survey, the rate of female labor force participation is 22% in 2022. Central Administration for Statistics in Lebanon & International Labor Organization, 2022.

TABLE 11. CHILDCARE SUPPORT AND FAMILY-FRIENDLY POLICIES TYPICALLY PROVIDED BY COMPANIES

Employer-supported childcare:	Family-friendly policies:
On-site daycare center operated by the employer or a third party	Flexible working arrangements
Near/off-site daycare center in partnership with an established private or public provider	Breastfeeding and lactation rooms and support
Community-based arrangement near employees' homes	Transportation
Shared daycare provision with other employers	Maternity and Paternity Leave
Childcare vouchers, subsidies, stipends, discounts, reserved seats, subscriptions to online care platforms	Additional care services (back-up care, after-school or summer programs, or eldercare)
	Others

Source: IFC and World Bank. "Tackling Childcare in Lebanon: Creating Family-Friendly Workplaces". Washington D.C.: World Bank Group

worked mostly in large firms (62 percent), followed by medium firms (24 percent) and small ones (14 percent). Medium companies (51-100 employees) operating from multiple worksites employed the largest share of female employees (48 percent). These firms also had the lowest share of employees with children aged 0-5 years (3 percent). Among medium sized firms, those with a single worksite had the highest share of mothers with young children (17 percent). Furthermore, in this studied sample, the retail and manufacturing sectors were found to be the main employers of women, employing respectively 33 percent and 29 percent of the total number of female employees of sampled companies, followed by the service sectors of human health and social works (5 percent).

4.2.1. EMPLOYERS WITH CHILDCARE SUPPORT AND FAMILY-FRIENDLY POLICIES IN PLACE

Childcare Support

Only five percent of surveyed employers currently have childcare solutions in place, which is available to both female and male employees. This corresponds to five companies (3 large and 2 small enterprises) of the total sample of 100 employers encompassing a total of 1,384 employees. The companies are located in El Metn, Mount Lebanon. Two of the companies

(wholesale and retail trader, and manufacturer) partnered up with a near-site private daycare and cover a portion of the fees. Another two (wholesale and retail trader, and manufacturer) provide a childcare allowance or subsidy that employees use at a daycare of their choice. The remaining one (human health and social work activities) offers an onsite daycare center operated by an NGO in partnership with the public sector. These practices may attract more female workers as the employers implementing them have the highest share of female employees in the sample. Out of the five employers with childcare support in place, those with multiple sites (n=3) employ 53.5 percent of the female employees (Table A7.7 in Annex 7). Two employers pay between 50 percent and 100 percent of the daycare center fees, one employer pays 100 percent of the daycare center usage fees, one pays less than 50 percent, and one employer's contribution differs from one employee to the next with a sliding scale between LBP150,000 to LBP200,000 (US\$105 – US\$140).⁹⁵

Family Friendly Policies

In addition to childcare support, the majority of employers reported providing family friendly policies, ranging from maternity and paternity leave, flexible work arrangements, telecommuting, leave to care for sick children and work/life programs, parental leave appraisal system, maternity return to work support programs, and breastfeeding room and lactation break.

95 As of March 2022, public nursery fees were equivalent to 250,000-300,000 LBP (US\$175-210) per month.

FIGURE 22. FREQUENCY OF PAID AND UNPAID MATERNITY LEAVE DURATIONS

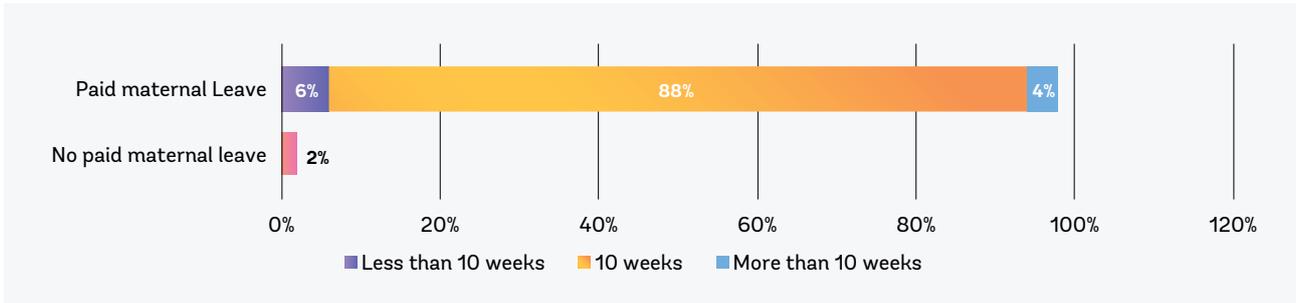


FIGURE 23. FREQUENCY OF PAID AND UNPAID PATERNITY LEAVE DURATIONS

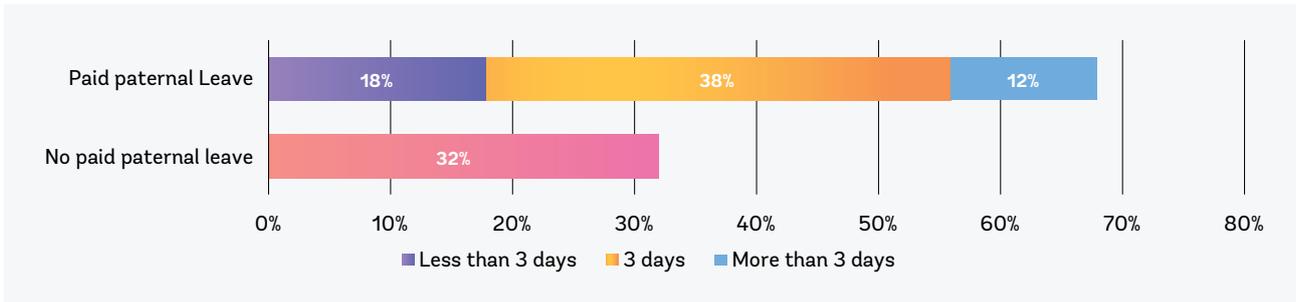
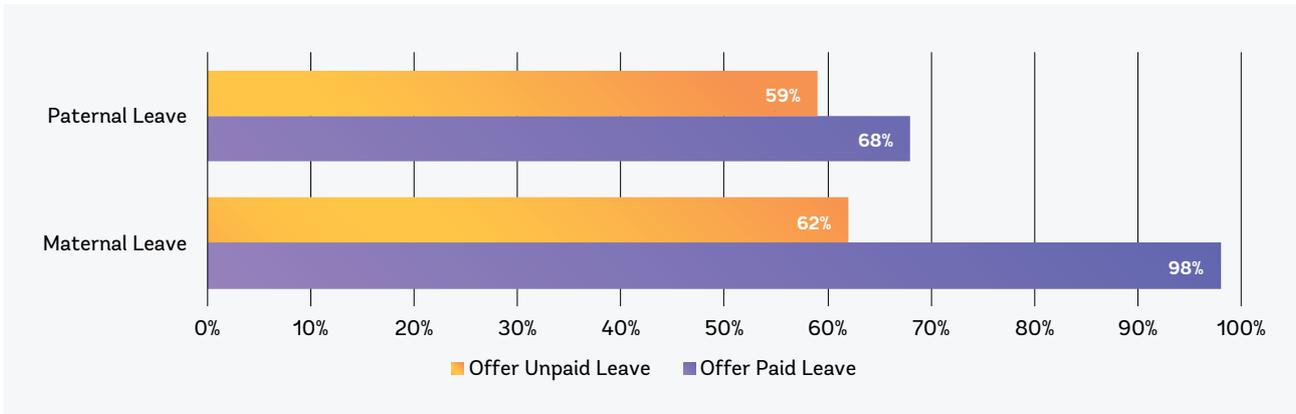


FIGURE 24. COMPARISON OF PAID AND UNPAID MATERNITY AND PATERNITY LEAVE OFFERED BY SAMPLED COMPANIES (N=100)



According to survey results, there is near universal corporate compliance with the paid maternity leave regulations, but the extended paternity leave is more discretionary pending ratification of the amended law. According to survey results, up to 98 percent of employers offer paid maternity leave. The remaining 2 percent do not provide any paid maternity leave (Figure 22). In comparison, 68 percent offer paid paternity leave, while 32 percent do not (Figure 23). Surveyed companies offer unpaid maternity and unpaid paternity leave at similar rates: 62 percent of employers offer additional unpaid maternity leave, while 59 percent report offering unpaid paternity

leave (Figure 24). The average unpaid maternity leave, however, is about 4 weeks, and the average unpaid paternity leave is about 9 days.

Key informant interviews confirmed that the large corporate enterprises often have flexible leave policies in place that enable working women to take additional unpaid or annual leaves to supplement the maternity allowance. A more flexible corporate leave policy promotes female employee retention in the workplace. Based on qualitative assessment with companies, fathers seem visibly pleased when informed that the enterprise complies with the full

3-day paid paternal leave stipulated by the draft bill of January 2018. On the other hand, according to HR managers interviewed, limited paid leave entitlements, when compared to global standards,⁹⁶ in combination with a long, 48-hours (6-day) work week stipulated by law in the private sector, are forcing women with young children to resort to unpaid leave or to seek reduced work hours. The reported reliance on unpaid leave demonstrates that new mothers are struggling to get back to work. The competing demands of work and family care are a barrier to female employment and can push them to seek more flexible or hourly work options, or employment in the informal sector or can even detach them from the workplace permanently.

The figure below shows the main family-friendly policies, programs, and resources currently offered by companies in the sample. The majority of surveyed employers reported providing transportation for their employees as mandated by the Lebanese labor law, most likely in the form of a transportation allowance. Out of 8 options presented that benefit working parents, three were among the top five family-friendly policies offered by employers: a performance appraisal system for employee returning from parental leave (85 percent), work life balance programs⁹⁷ (59 percent), and dedicated time off to care for sick children (46 percent).

- **Parental Leave Appraisal System:** 85 percent of companies offer an appraisal system that considers an employee's parental leave. Only 12 percent of employers, half of which are in the wholesale and retail trade sector, do not offer and will not consider offering this policy in the next year.
- **Flexible Work, telecommuting, caring for sick children and work/life programs:** While the majority of businesses do not offer nor plan to offer telecommuting policies⁹⁸ (58 percent), 37 percent offer their employees a work-from-home arrangement on regular days. A much higher share of companies (80 percent) offers flexible work start and stop times. Businesses in the sample are almost evenly split in offering (46 percent) and not offering (54 percent) dedicated paid time off to care for sick children. Three companies do not offer this policy but plan to do so in the next 12 months.

- **A few companies instituted family-friendly policies, programs or resources in response to the COVID-19 pandemic.** Telecommuting is the most offered policy by companies in response to COVID-19, owing to the restrictive and protective measures imposed by the government. The CCIA senior manager interviewed for this study explained that while remote working has assisted many women in combining caregiving duties with work, many female employees still preferred coming back to the office post lockdowns. Work-life balance programs have also been one of the programs introduced in response to the COVID-19 pandemic. These programs include training and support groups and are offered by 59 percent of surveyed companies, of which 18 percent confirmed they introduced it in response to COVID-19.

- **Maternity return to work support programs:** 27 percent of companies offer maternity return to work support programs. More than half fall under the manufacturing, wholesale and retail trade, and professional, scientific and technical sectors, and are located in El Metn and Beirut. Assuming the maternity return to work program benefits all female employees regardless of their status (full-time, part-time, or hourly), 27 percent of total female employees employed by businesses in this sample have access to returnship programs.

- **Breastfeeding Room and Lactation Break:** 21 percent of the sampled organizations said they provide a breastfeeding room including enterprises in manufacturing (10), wholesale retail trade (8), health and social work (2), and professional, technical and scientific (1). The remaining 79 percent neither offer nor plan to offer a lactating room service in the next year.

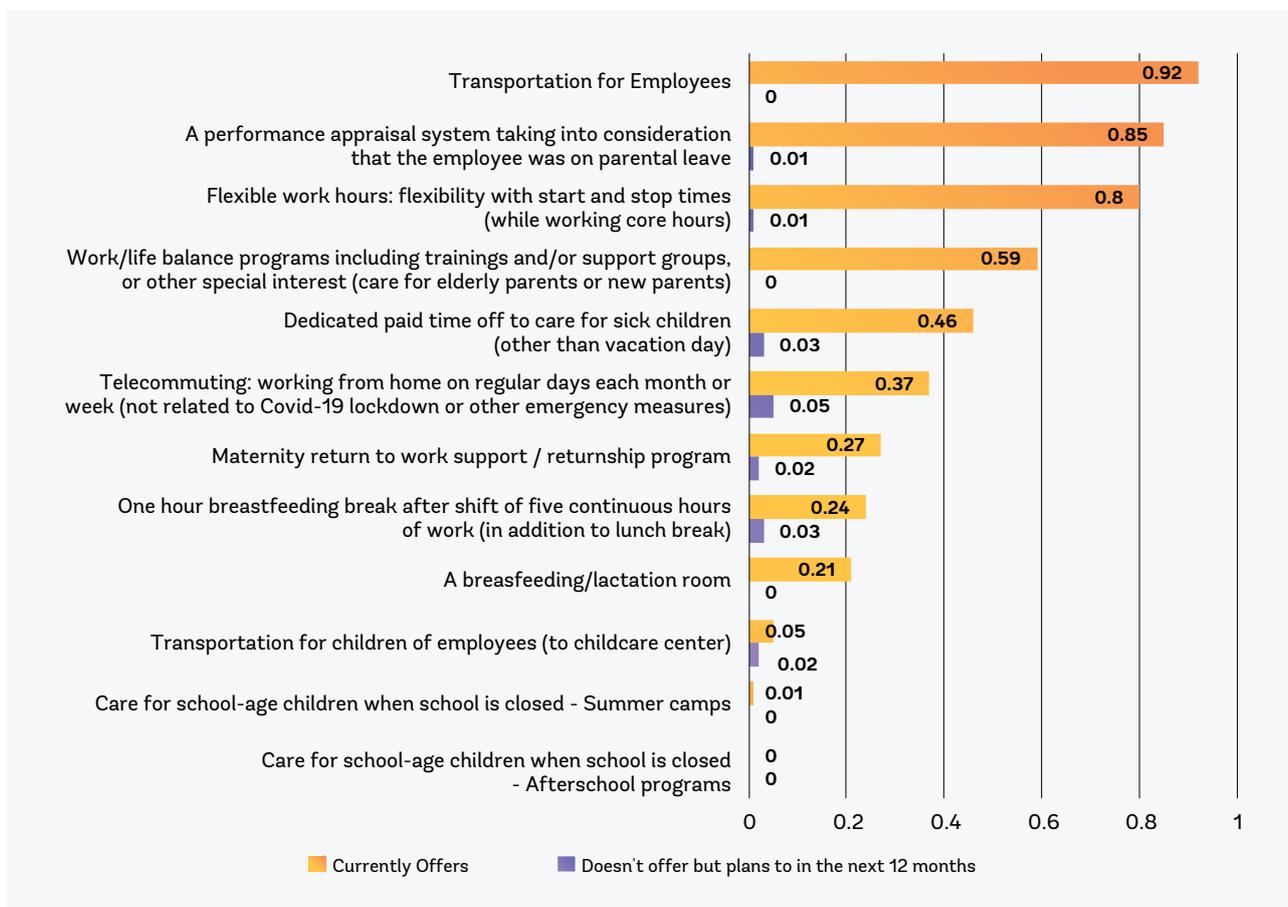
- Lebanon is not one of the countries that ratified an international labor law (maternity convention number 183, article 10) that provides lactating mothers with a one-hour break after five consecutive hours of work. 71 percent of companies do not offer or plan to offer a lactation break to their female employees, while 24 percent currently offer this service. The highest number of female employees benefitting from this service in surveyed businesses are in the health and social work activities sector (28 percent).

96 According to the International Labour Organization, in 2021, the duration of maternity leave was at least 14 weeks in 120 countries while in 52 countries it was at least 18 weeks (185 surveyed countries). In 64 countries the duration of maternity leave was still below 14 weeks. Furthermore, 115 countries offered a right to paternity leave (Addati et al. 2022).

97 Work-life balance programs include training and support groups, especially post-COVID.

98 Working from home on regular days each month or week (not related to Covid-19 lockdown or other emergency measures).

FIGURE 25. DISTRIBUTION OF SAMPLED EMPLOYERS ACCORDING TO FAMILY-FRIENDLY POLICIES THAT THEY CURRENTLY OFFER AND PLAN TO OFFER IN THE NEXT YEAR



- **Transportation for children of employees:** Three companies (3 percent) currently cover transportation fees for children of employees to the childcare center, all located in the Mount Lebanon Governorate. These include one in the health and social work sector in El Metn and two companies in the wholesale and retail trade in El Metn and in Chouf. The overwhelming majority (95 percent) neither offer nor plan to offer their employees' children transportation to the childcare center and only two companies plan on offering it within the next 12 months.
- **Afterschool programs and summer camps:** None of the surveyed employers offer nor plan to offer afterschool programs for children of employees when schools are closed, with the exception of one wholesale and retail trade business in Baabda (with 25 employees, of which 7 are female) which currently offers summer camp programs.
- **Most employers surveyed report being familiar with Lebanese labor laws (99 percent) and with the National Social Security laws (96 percent).** A large

share of employers (89 percent) state they inform their employees about their maternity leave and childcare support benefits regardless of legislation mandating it.

Reported Impact of Employer-Supported Childcare and Family Friendly Policies

Four of the five employers offering childcare solutions in this sample (80 percent) stated that employee retention was their primary motivation for providing childcare support, followed by employee productivity (60 percent), enhancing company reputation (20 percent), and employee comfort (20 percent), as shown in Figure 26. According to a few HR experts interviewed, family-friendly policies including childcare can increase loyalty and employee retention especially among the women workers. All five employers with childcare solutions in place reported in their survey responses a reduction in employee absences and an increase in their employees' sense of belonging to the workplace as a positive impact (Figure 27).

FIGURE 26. PRIMARY MOTIVATIONS FOR OFFERING CHILDCARE SUPPORT

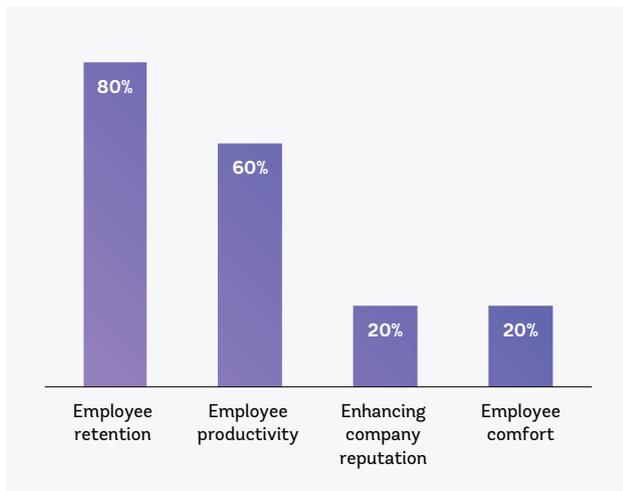
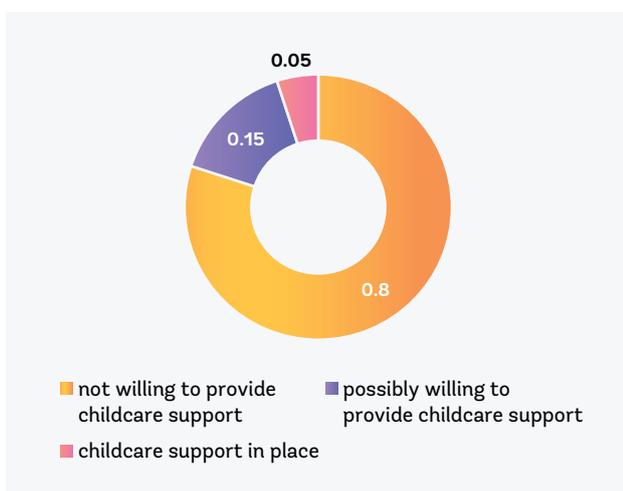


FIGURE 27. TOP THREE IMPACTS ON BUSINESSES PROVIDING CHILDCARE SUPPORT



FIGURE 28. EMPLOYERS' PROVISION OF CHILDCARE SUPPORT



4.2.2. EMPLOYERS WITH NO CHILDCARE SUPPORT IN PLACE

For the other ninety-five percent of surveyed employers that do not provide childcare solutions to employees, only fifteen percent indicated a willingness to provide childcare solutions at a future date (Figure 28). Over half of the employers mentioned the small number of employees with children aged 0-5 as the main reason behind their reluctance to provide childcare solutions for their employees. Over a third of employers also mentioned lack of willingness to assume childcare responsibility and no demand from employees as main reasons (Figure 29).

Most employers surveyed do not have a feedback system to fully understand employee demand for childcare. Only 10 percent of employers said they have solicited or received feedback from their employees on their needs and preferences to meet their childcare needs. Although the typical smaller size of Lebanese companies serves to encourage personal interactions, a systematic approach to collecting information on this topic could be a more reliable basis for measuring pressing needs, emerging gaps, and identifying opportunities for action. Understanding demand is one of the most critical early steps employers can take to support the needs of their employees, with potential benefits to the employers themselves. As a result, employers might lack awareness of the importance of childcare services and its link to business benefits such as employee retention, employees' mental health and employee work life balance. As an example, the business case developed by the World Bank Group on Malia Group, shows that businesses that invest in family-friendly policies tend to enjoy higher staff retention rates, reduced absenteeism, improved productivity, and greater workplace diversity.⁹⁹

When asked about resources that would help employers offer a solution to help meet the childcare needs of employees, almost half of the employers reported that they do not believe offering childcare services is applicable to them. Employers mentioned that the number of employees with children less than 5 years old in their respective workforce may not be enough to justify offering childcare services on-site; employers are also reluctant to assume the responsibility of such services. Fourteen percent explained that they are willing to offer childcare if financial support to help offset the cost of planning

⁹⁹ <https://www.worldbank.org/en/programs/mashreq-gender-facility#6>

FIGURE 29. MAIN REASONS EMPLOYERS ARE NOT PLANNING TO PROVIDE CHILDCARE SUPPORT TO THEIR EMPLOYEES

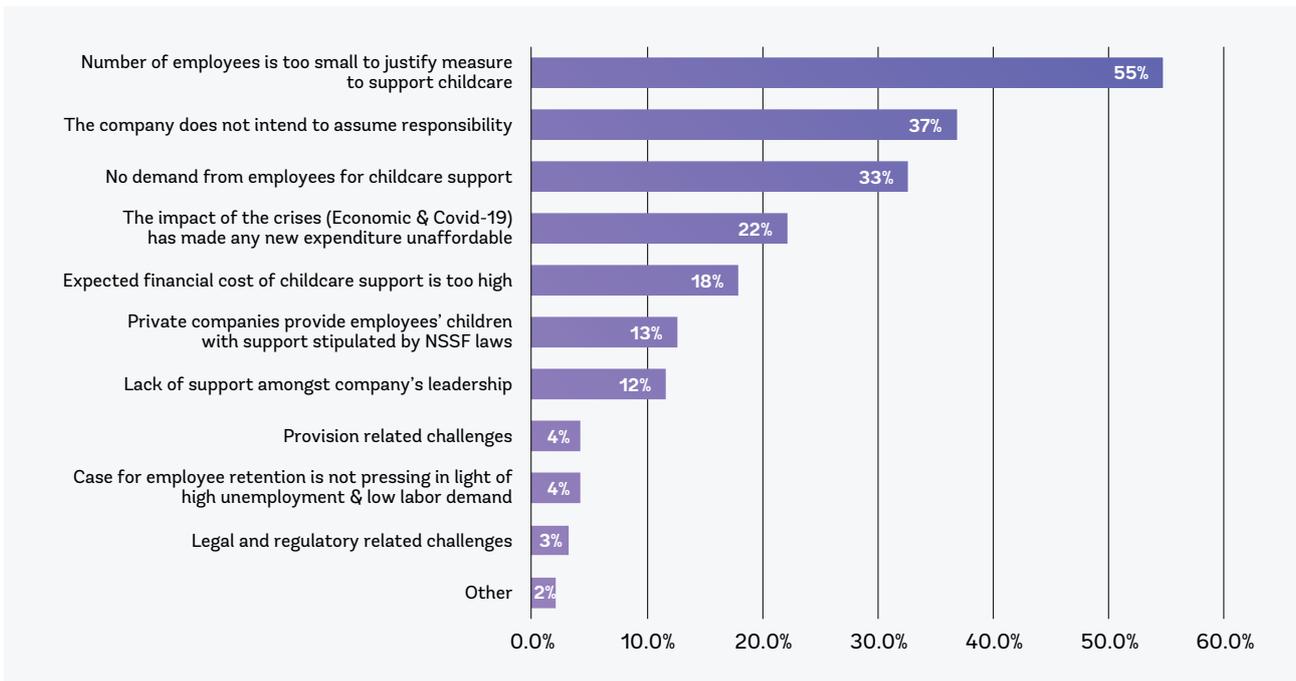


TABLE 12. FINANCIAL, PROVISION AND LEGAL CHALLENGES THAT PREVENTED EMPLOYERS FROM OFFERING CHILDCARE

Financial Challenges	Provision Challenges	Legal Challenges
<ol style="list-style-type: none"> Childcare center's operating costs Additional admin costs to the org Set-up costs for on-site daycare 	<ol style="list-style-type: none"> Finding an existing day-care center that matches employees' work hours Lack of space to build an on-site day-care center Identifying existing quality, affordable and conveniently located day-care centers Creating and administering a childcare voucher program 	<ol style="list-style-type: none"> Lack of clarity on COVID-19 related safety and health regulations Lack of clarity on implications on liability related to supporting care of children in relation to Covid-19 pandemic

and setting up a day care center is provided. Some businesses reported that they needed guidance on the characteristics of high-quality care and on planning a childcare solution while a few others mentioned that they would be encouraged to offer childcare support if a higher number of companies started providing them.

Results from key informant interviews show that Lebanon's economic and financial crisis is a main barrier to increase uptake of private employers' childcare provision. As many businesses are struggling to survive, nursery's projects are not among their main priorities. Furthermore, devaluation of the Lebanese currency and increased inflation are making childcare services unaffordable. Other barrier mentioned to increase the supply of childcare support is the scarcity of qualified early years educators at private and

public daycare facilities. Finally, enterprises might be reluctant to assume this responsibility unless compelled to do so by the law. As a consequence of reduced demand, nursery closures are anticipated by the nurseries' syndicates, especially in the poorer urban and rural areas.

Table 12 below summarizes the top barriers listed by surveyed employers by priority, in relation to financial, legal and provision-related challenges.

4.2.3. KEY TAKEAWAYS FROM INTERNATIONAL GOOD PRACTICES AND EXPERIENCES: A LITERATURE REVIEW

While the benefits of employer-supported childcare have been widely established (IFC 2019), case studies around the world show that there is no “one-size fits all” solution and the success of initiatives depends on specificities of each company, group of employees, and local context, including childcare subsidy regulations. Some key takeaways, however, emerge from successful experiences from around the world, which are summarized below.

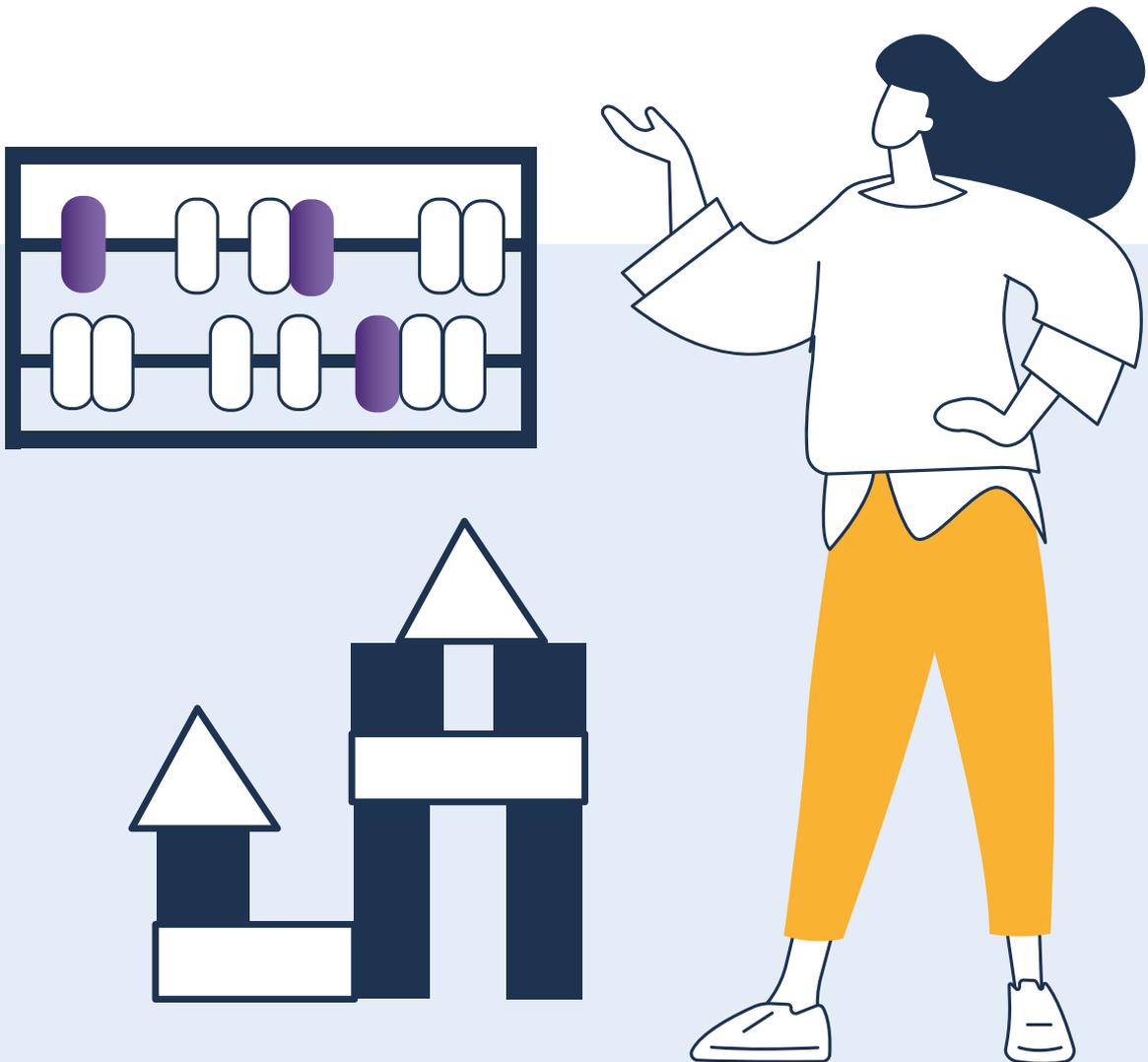
By implementing an employee feedback system, businesses can tailor solutions to employees’ needs and preferences and avoid investing in ineffective solutions. Based on employee satisfaction surveys, Amin Kawar and Sons (AKS), a Jordanian shipping and international transportation company, strengthened its flexible and remote working policy and offered childcare solutions. As a result, staff turnover was minimized which, in turn, brought substantial savings related to recruitment and training of new staff (WBG 2021). In the US, after conducting an employee survey to gauge the range of employee needs, Home Depot’s leadership team offered four options to their employees: on-site childcare, eligible associates backup care, care marketplace (discounts for qualified care) and pre-tax benefit accounts – FSA (U.S. Chamber of Commerce Foundation 2018).

Employer-supported childcare can lead to lower absenteeism, higher worker retention, and higher productivity. Understanding childcare as an investment in the workforce instead of an added cost can increase employers’ motivation to offer childcare solutions. In Pakistan, National Foods Limited established an on-site daycare facility to cater to the needs of working parents and other family-friendly policies. According to the company, business benefits related to childcare, such as greater gender diversity and higher maternity return rate and employee satisfaction, help offset the costs of running the facility (IFC 2021). A UNICEF-funded study in the Rwanda tea sector showed that on-site childcare significantly improved workers’ productivity as well as workers’ loyalty and retention (Salmaso et al. 2021). The footwear manufacturing company Feng Tay in Vietnam established an on-site kindergarten as an established part of their recruitment and retention strategy (IFC 2020).

Access to good-quality, affordable childcare works best in combination with other family-friendly workplace policies and practices (IFC 2019) which might include safe transportation, flexible working hours and extended maternity leave. Greenland, a footwear manufacturing business in Vietnam, supports parents with onsite kindergarten, enhanced maternity leave, medical care for children and subsidized housing for migrant workers with children. The childcare support offered by the company is a key element of the company’s wider strategy to increase recruitment, retention, and productivity of workers (IFC 2020). MAS Holdings, an apparel manufacturer, recorded an increase in the number of female employees and a reduction in absences due to sick leave by 9 percent within the first nine months of the introduction of an on-site daycare center, nursing care, breastfeeding room, and safe transport at its MAS Kreedaa Al Safi-Madaba factory in a remote area of Jordan (IFC 2019). F.J. & G de Saram, a law firm in Sri Lanka, came close to 100 percent maternity return rate since their childcare facility was launched. In addition to an on-site daycare facility, the firm provides extended maternity leave, work from home and flexible work hours upon request (IFC 2018).

If direct support is not a viable alternative, indirect support through vouchers or subsidies can incentivize quality options and complement other childcare solutions. However, effective subsidy amounts must be compatible with childcare costs and employees’ incomes. At a subsidiary of Borusan Mannesmann, a Turkish heavy manufacturer, the company offers a childcare subsidy specifically requested by its male blue-collar workforce to enable their wives to enter the formal workforce. According to the general manager, initially, the company tried to build its own childcare facility. However, in the end he realized a monthly subsidy seemed to be the fastest and most efficient solution (IFC 2019). At Taekwang Vina, a footwear manufacturer with factories in Vietnam, supervisors believe the monthly childcare subsidy provided to all mothers is one of the most appreciated types of support because it helps subsidize alternative childcare arrangements for parents who are not able, or choose not to, enroll their children in the on-site kindergarten (IFC 2020).

5. DEMAND-SIDE ASSESSMENT FOR CHILDCARE SERVICES



5.1. WOMEN'S ROLE REGARDING CHILDCARE RESPONSIBILITIES AND HOUSEHOLD WORK

In Lebanon, childcare duties are mostly carried out by women. More than half of the mothers reported in the household survey carried out to be “always” or “most of the time” the ones who do all childcare tasks such as dressing children, putting them to bed, caring for sick children, doing leisure activities or playing with children, helping with homework and taking children to and from school/daycare.¹⁰⁰ There is a generalized support for a gendered division of childcare and for the idea that childcare assistance offered by husbands should usually be on an ad-hoc basis or in response to urgent needs. Similar results were found by the UN Women IMAGES (International Men and Gender Equality Survey) in which 83 percent of women reported that it is always or usually they who are responsible for daily routine care of children in households in Lebanon. In addition, 80 percent of men and 72 percent of women reported that the husband's role in childcare work is mostly as a helper.¹⁰¹ Women also reported that husbands spend too little time with the children (75 percent) and that their main role in caring for children is as their financial providers (77 percent).¹⁰² Referring to the household survey, 62 percent of men and 45 percent of women, who responded, agree that when jobs are scarce, men should have more rights to a job than women. On the same question, the Second State of the Mashreq Women Report (Redaelli, S et al., 2023), shows consistent percentages of agreement from 70 percent and 50 percent for men and women respectively.

The high rate of economic inactivity of women with young children is largely related to the fulfillment of their role as mothers. According to the household survey, women and men agreed, by a majority of 75 percent, that the care for 0 to 3 year old children is a task under the family's responsibility. Women are more likely to be absent from work to care for children or family members than are men. Balancing work and care take a considerable toll on women's ability to engage in paid activities, particularly in the absence of state-supported or subsidized quality childcare. The burden of childcare and domestic chores was mentioned as the primary reason by most women as to why they were not available to work and/or not actively looking for a job (60-70 percent). This result is aligned with the Arab Barometer survey that found that a lack of childcare options was cited by respondents as the main barrier to their participation in the labor force (69 percent, Arab Barometer 2021).¹⁰³ Another qualitative study of women and men in the North Lebanon, Beirut/Mount Lebanon and South/Nabatieh regions revealed that childcare is a contributing factor for women regardless of where they are in their decision-making process about work (Elzir Assy and Sayed, 2018). Working women had fewer children with a smaller share having children below the age of six. Figure 30 demonstrates that having children aged 0 to 6 years is a determinant of labor force non-participation across all education levels. Moreover, the more children a woman has, the lower the probability of participation.

“We do not have any discussion and no help is given but it happens sometimes without pre-planning. For example, he can help with washing dishes or playing with children,”

(FGD, non-working woman, urban poor, Beirut and Mount Lebanon)

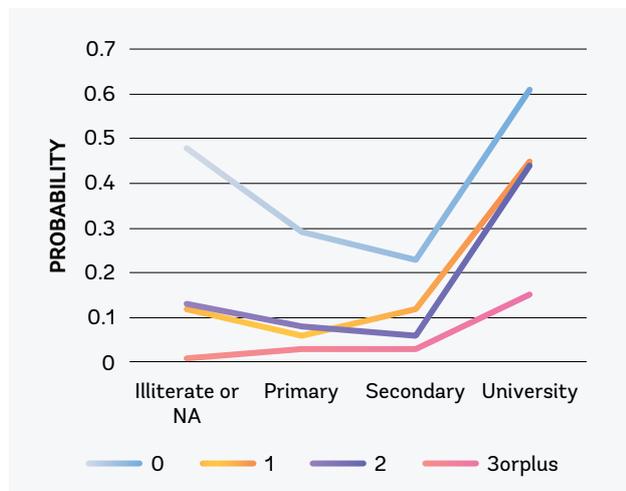
100 The conclusions should be interpreted with caution. They represent the conclusions of the surveyed mother, which is not representative of all mothers with children aged 0-3 in Lebanon. Please refer to the methodology section for more details.

101 Respondents were ever married men and women who were questioned about childcare tasks for the youngest or most recent child.

102 <https://www.equimundo.org/resources/international-men-gender-equality-survey-lebanon-summary/>

103 <https://www.arabbarometer.org/wp-content/uploads/Public-Opinion-Lebanon-Country-Report-2021-En-1.pdf>

FIGURE 30. PROBABILITY OF FLFP BY NUMBER OF CHILDREN IN THE HOUSEHOLD (0-6 YEARS), AND EDUCATION LEVEL, 25+, 2018/2019



Source: World Bank; UN Women. 2021. The Status of Women in Lebanon.

Women identified lack of time and fear of failure with childcare responsibilities as reasons for not working, and some also mentioned husbands not allowing it, as per the results of the FDGs (see quotes below). Women from poor urban and rural areas were more likely to consider lack of child support as a major reason for not working. Those from more affluent areas were more likely to attribute their non-working status to personal conviction or their husbands wishes. Studies show that women consider factors such as job flexibility, having no small children at home, availability of a nursery and encouragement from the spouse's family far more than men do when deciding whether to work (Akeel 2009, Elzir Assy and Sayed 2018).

"I stopped working because no one can take care of my children and my husband could not take care of them"

(FGD, non-working woman, rural poor, North)

"I prefer to raise my child and give them to needed care and attention then go back to work after the child grows up"

(FGD, non-working woman, urban affluent, South)

"He is not against me working but he would not like me to fall behind in my house duties"

(FGD, working woman, urban poor, North)

"I don't agree that my wife should work. It is not her job to make money. I don't even agree to get a babysitter, that is my mindset"

(FGD, man, urban affluent, Beirut and Mount Lebanon)

Studies have shown that societal expectations about women's traditional roles at home contribute to gender biases in hiring practices among employers who may be reluctant to hire women (World Bank 2020d). In a 2018 gender technical assessment carried out to understand female constraints in accessing jobs in Lebanon, the majority of employers interviewed reported preferences for hiring men because of their individual beliefs regarding women's care roles at home. A share of employers raised doubts about women's ability to take on management positions or jobs they considered "more suited for men" (Elzir Assy 2018). Such traditional roles are generally favored by men — and often by women who consider it to be the norm. When asked about challenges to entering or staying in the workforce, many women in Lebanon bring up family and spousal disapproval, which is in line with other reports that point to the roles that men have in influencing women's (specifically spouses) career choices, particularly given concerns about interference with household 'duties' (Elzir Assy 2018).¹⁰⁴ About 23 percent of women and around 30 percent of men believe that it is more important for a woman to marry than to have a career (World Bank 2020e, El Feki et al. 2017). During the FDGs with mothers and fathers of young children, there was also an observed acceptance of social norms that dictate that women should prioritize taking care of children and the household over employment. For employed mothers, most husbands encouraged them to work on the condition of not falling short of household and childcare duties.

¹⁰⁴ Elzir Assy conducted a qualitative study between November and December 2017. To capture a representative picture, the study consisted of 32 focus groups segmented by region, gender, age and labor market status. It was carried out in the three main regions of Lebanon: North Lebanon, Beirut/Mount Lebanon and South Lebanon/Nabatieh. It also included in-depth interviews with employers, conducted in January 2018.

Employed women continue to bear the double burden of balancing a job and the invisible work of taking care of children and household chores. In the FDGs women estimated that childcare duties usually take up on average 6 hours but can go up to 12 hours a day. Women feel they are always on duty as sole caregivers. Regardless of employment status, mothers reported experiencing increased stress level and pressure to not fail. All women consider personal time valuable, however, employed women reported having virtually no time to take care of themselves.

"We are superwomen because we are forced to work then come back home; take care of the house chores, check on the children and in case your baby is sick you have to attend to them while the man goes to the office to sit behind the desk and comes back home to sleep. The woman, on the other hand, needs to always maintain the balance"

(FGD, working woman, urban affluent, South).

"I have no time to take care of myself. I come home from work to do more work"

(FGD, working woman, urban poor, Beirut and Mount Lebanon).

The lockdown due to the COVID-19 pandemic increased women's time spent on childcare and household duties. Between 60 to 70 percent of surveyed women in the demand-side survey mentioned that time devoted to childcare¹⁰⁵ and household duties increased as opposed to 28 to 45 percent of men. Furthermore, even in affluent communities, it was observed that there is very limited reliance on domestic migrant labors, which was further reduced during the pandemic, which may be due to the fact that a share of the population could no longer afford domestic migrant labor due to their decreasing purchasing power following the economic crisis in Lebanon.¹⁰⁶ On top of other duties, women assumed the burden of supervising online teaching and keeping children occupied.

"We became teachers and maids at home, working 24/24 hours"

(FGD, non-working woman, rural poor, South)

Despite identifying a heavy workload, the majority of women (and men) in the household survey claimed they were satisfied (62 percent) or very satisfied (19 percent) with the distribution of childcare responsibilities in their household. Such results reinforce the idea that there is an acceptance of designated gender roles in childcare. Male respondents mentioned that mothers' care is essential and irreplaceable while fathers' main role is to give children a sense of security, be a moral compass and be the breadwinner. However, a nascent tendency of accepting working wives by both men and women was perceived by a limited number of respondents through the focus group discussions. It seems that the main reason could be because the two-income family is becoming a financial imperative due to the current dire economic situation. The second reason could be that husbands believe that marriage is an equal partnership with shared rights and responsibilities and that their wives should make the most out of their hard-earned education.

"It is a must for both the man and the wife to work especially in our economic situation"

(FGD, man, urban affluent, Bekaa).

¹⁰⁵Childcare activities considered were caring for children, including feeding and physical care; playing with, talking and reading to children; instructing, teaching, training, children.

¹⁰⁶See UN Women, World Bank (2021) *Status of Women in Lebanon Report* which reports that "An international assessment conducted of migrant workers found that close to 80 percent had lost their income since the financial/economic crisis of 2019; one third of those losses were reported during the COVID-19 pandemic (UNOCHA 2020)."

5.2. CURRENT UTILIZATION OF CHILDCARE SERVICES

The current utilization level of childcare services is low across Lebanon.¹⁰⁷ As previously mentioned, data gathered from nurseries illustrate a capacity utilization of only 58 percent – i.e., the number of children enrolled divided by the number of seats available (capacity). Enrollment rates in nurseries among children aged 0-3 is estimated to range only between 3 and 6 percent of all children aged 0-3 in Lebanon, which means that only 3 to 6 percent of children aged between 0-3 years old are enrolled in a formal childcare center in Lebanon.¹⁰⁸ According to the results of the household survey with parents of young children, in most surveyed households, parents (most likely mothers) are the exclusive caregivers of small children. Family members, especially grandmothers, help occasionally in many households but not in a consistent manner. There are significant regional differences in terms of rate of utilization at the household level with relatively high rates in the South and Beirut-Mount Lebanon, while in the North the rate was close to zero, consistent with the childcare provider desert as previously discussed. According to FGDs, most parents enroll their children in nurseries when they are older than 2 years old, when they can express themselves, are toilet trained and able to feed themselves. FGDs confirmed there is a relatively high registration in kindergarten compared to nursery childcare even if children were not regularly attending.

“I would prefer to enroll my child immediately into KG because at that age children can talk and express themselves, know the colors, and be ready”

(FGD, man, rural poor, Beirut and Mount Lebanon).

The higher cost of childcare services and the COVID-19 pandemic contributed to the reduced demand for such services. Key informants from both the public and private sector mentioned the reduced purchasing power of parents, coupled with the increased costs affecting affordability as key reasons for a decrease in the demand for private nurseries. Before the COVID pandemic, there was a slight increase in the number of children in care as a result of awareness campaigns and an increase in the rate of female employment. On the other hand, a key informant emphasized that the sector is very heterogeneous with a mix of high-quality and low-quality nurseries.

Devastating devaluation of the Lebanese currency (LBP) and increased inflation are making childcare services unaffordable and rather a luxury. According to two nursery syndicates, private childcare was already relatively expensive in relation to incomes prior to the crisis. As the private nursery sector adjusts its costs to keep up with the run-away inflation, it is expected that childcare will become an even greater “luxury.” Furthermore, the dire economic situation has pushed many households to dismiss migrant domestic workers (Kassamali, 2021). The lack of home-based alternatives to childcare has and continues to exacerbate the pressure for childcare for working women and thus will require larger efforts especially by companies and the private sector to consider offering childcare solutions in the future, once a national economic recovery is foreseeable.

107 Childcare and preschool services include daycare center, nurse, pre-school, afterschool program, self-organized childcare group, a babysitter, or other paid or unpaid arrangement on a consistent basis.

108 The estimations are based on 2021 and 2023 survey results, using population data from United Nations, Department of Economic and Social Affairs, Population Division (2022). World Population Prospects 2022, Online Edition. A range is provided due to the low numbers in 2021 used as a basis for the calculation as, in 2021, nurseries were operating at an average capacity of 50% due to COVID-19 restriction, with some nurseries (e.g. public ones) closed for a good part of the year. Estimations are done applying CAGR from absolute numbers of enrollment in 2021 CATI, CAPI and 2023 CAPI.

"We cannot take the past 5 years as one package, since the past two years were too exceptional. Of course, there has been a very big turnout at daycare centers for many reasons. First of all, there were many awareness campaigns carried out by all the public and civil bodies that have encouraged the parents to enroll their children in daycare centers... Secondly, the increase in the percentage of working women has also resulted in more children being enrolled in childcare."

(Ms. Abeer Abdel Samad, Head of the NGO Department of the Ministry of Social Affairs – MOSA)

"The supply and demand for childcare services are not equal. There are generations and geographical areas that are reluctant to enroll their children in nurseries, be it for financial reasons or due to traditions" (KII8)

(Mr. Charbel Abi Nader, President of the Syndicate of Specialized Nurseries'Owners in Lebanon)

5.3. POTENTIAL DEMAND FOR CHILDCARE SERVICES

The potential demand for formal childcare is strong, especially among working women, reflecting their need for childcare support, with preference for free services. Over half of surveyed parents who are non-users of formal center-based childcare, may be willing to use formal childcare. Regardless of whether parents prefer paid services or free services, the survey indicates that private facilities are preferred over public ones among respondents¹⁰⁹ (Figure 31 and Figure 32). Furthermore, findings based on nationally representative data collected¹¹⁰ under the Second State of the Mashreq Women Report, which focuses on the care economy (Redaelli, S et al., 2023), indicate that in Lebanon the untapped demand for formal childcare services is strictly conditional on services being provided at no cost. The report shows that, in Lebanon, among mothers of children below primary school age not currently using formal childcare services,¹¹¹ up to 22 percent would be willing to use these services: 17 percent free care only, 2 percent paid care only and 3 percent either paid or free. In Lebanon, 39 percent of employed women with children 0-5 not currently using childcare, would be willing to use this service. Leveraging untapped demand might require subsidizing the cost of childcare services, especially given the current situation in Lebanon.

For mothers who would be willing to use paid formal childcare, willingness to pay is lower than the cost paid by current users. Yet, untapped demand is also noticeable among unemployed women (39 percent) who are currently less likely to benefit from formal childcare services than employed mothers.

Though the sub-sample with fathers of young children in the survey conducted for this report is not nationally representative, results suggest that fathers are as willing or more than mothers to send their children to free or paid daycare (Figure 33).

The idea that mothers should be the ones to look after their own young children is the primary reason mentioned by both women and men not willing to use formal childcare services. For mothers, the lack of trust in daycare centers or other people caring for their children came in second, followed by the cost of care being too expensive. For fathers, cost was the second main reason. A key informant mentioned that social norms seem particularly strong in rural areas where the rate of working women is low. The informant mentioned the strong reluctance of rural mothers to enroll their children in nurseries. This problem is also present in Beirut but to a lesser extent. On the other hand, another

109 As previously mentioned is not nationally representative of households with young children.

110 The analysis of the Report is based on primary data on time-use and demand for childcare services collected (phone survey) from a sample of 2,168 women and 1,101 men in Jordan, Iraq, and Lebanon between March and June 2021.

111 This includes mothers aged 20-55 who were not using any form of childcare or only using informal childcare. The data on willingness to use childcare was collected from mothers who do not use childcare "under normal circumstances", i.e., before the pandemic began.

FIGURE 31. WILLINGNESS TO USE PAID DAY CARE SERVICES AT HOUSEHOLD LEVEL

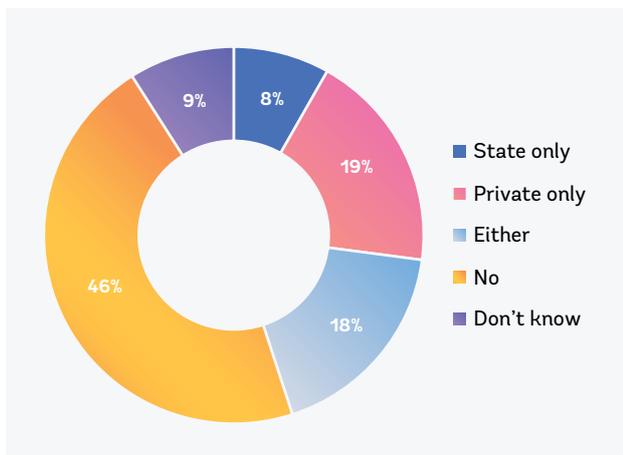
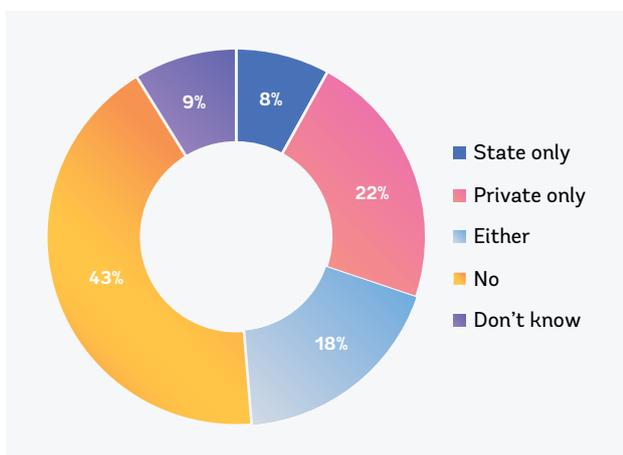
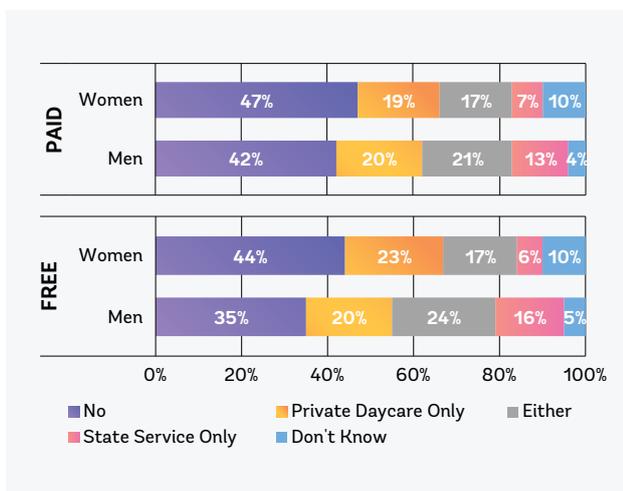


FIGURE 32. WILLINGNESS TO USE FREE DAY CARE SERVICES AT HOUSEHOLD LEVEL



Source: authors' calculations using the demand side survey

FIGURE 33. WILLINGNESS OF WOMEN AND MEN TO USE FREE OR PAID CHILDCARE SERVICES (CHILDREN 0-4)



Source: author's calculations using the demand side survey

key informant noticed that, though social norms are still a main influential factor on parents' decision to send their children to a daycare center, this is starting to change. Increased access to social media has a major role on a higher acceptance of the idea of working women. However, new centers established in non-affluent urban areas do not always meet the expected standards.

Increasing parents' awareness of the benefits of early education and increasing transparency on tuition, rules and regulations were mentioned as essential elements in increasing the demand for childcare services. An informant mentioned that parents are discouraged from putting their children in daycare when nurseries' owners are not clear about tuition, rules and regulations. Parents as well as nurseries need to be fully aware of all regulations and costs involved. According to an employer who provides a daycare centre, the way forward is to promote awareness among working mothers: "We need to explain to them the benefits of early childhood education (ECE) compared to keeping the children at home, as well as the financial benefits of having a free childcare centre run by the company," assuming the ECE and childcare service centers are of good quality and a stimulating environment for the children, compared to staying at home.

"If you are to look at social norms more ten years ago, people were much more resistant to the concept of nurseries, especially in non-affluent urban areas, such as Dahye and Ghoubeyri. However, in this day and age, people have realized the importance of childcare and there has actually been an increase in childcare centers in these neighborhoods. Nonetheless, the standards of these centers do not meet the standards set by the ministry because they have to remain somehow affordable based on the areas that they are servicing (KII8)".

(Mr. Charbel Abi Nader, President of the Syndicate of Specialized Nurseries' Owners in Lebanon)

Attitudes towards formal childcare

Benefits of enrollment in early childhood education mentioned by parents were related to social, emotional, and educational development while concerns were associated with poor access and quality of services, financial costs, health concerns as well as social norms (Figure 34).

Positive

Most parents recognize the benefits of high-quality nursery care on children’s social, emotional, and educational development. Nurseries were also considered important to relieve the pressure of childcare on already stressed mothers.

Social and Emotional benefits. Participants recognized the importance of social contact with other children. A positive aspect mentioned is that in organized activities, children learn to interact while having fun and releasing energy. Parents believe that the social contact and a nurturing environment can develop the children’s personality, help them express themselves, develop healthy eating habits and make them more independent while teaching them how to share and not be selfish.

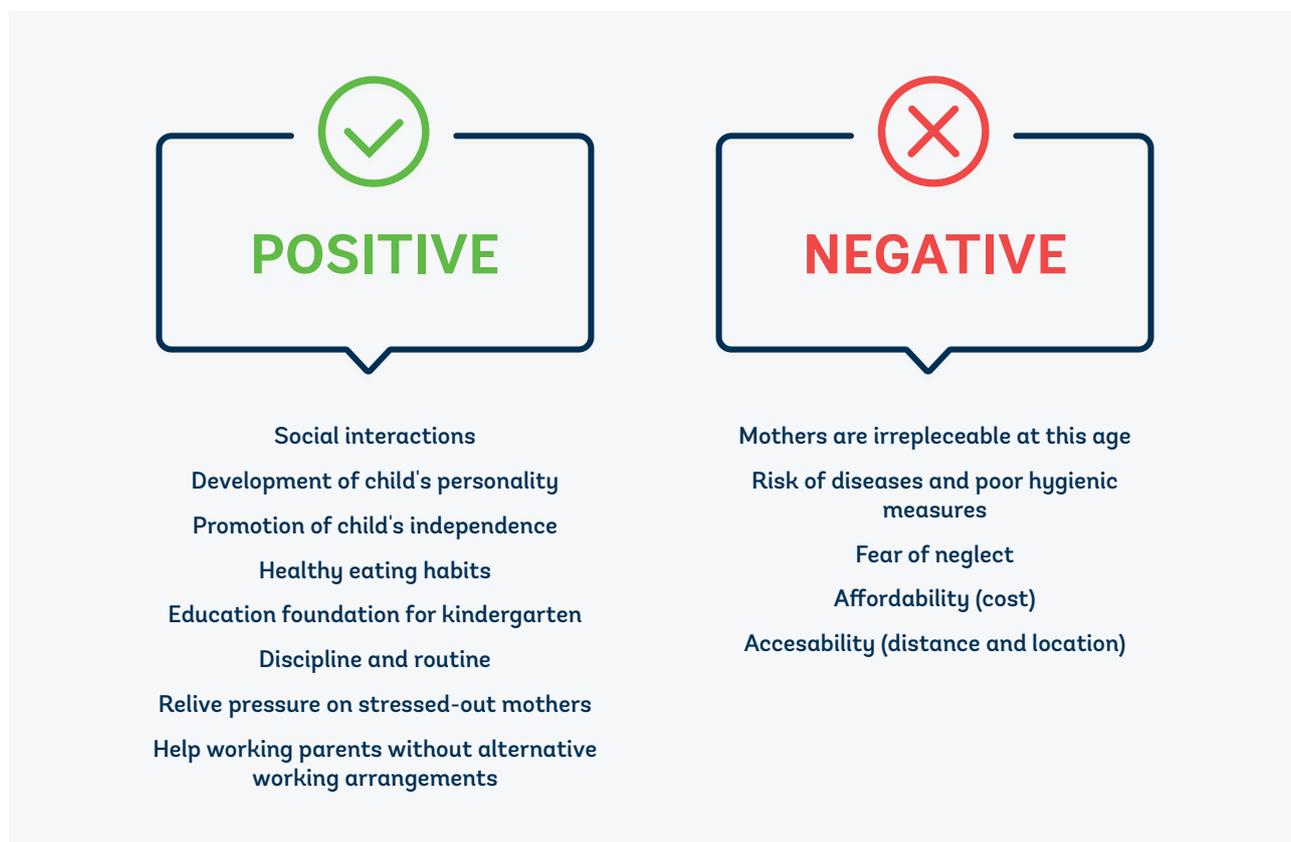
“I enrolled my child in a nursery to build his personality, especially at 3 years”
(FGD, non-working women, urban affluent, Bekaa).

Educational Development. According to most parents, nurseries are important to prepare children to attend kindergarten. This perception has been reinforced by certain schools, mainly centered in urban areas, that require a pre-kindergarten phase. Parents expect nurseries to provide an “education foundation” – where young children learn communication, language, and psychomotor skills. Parents from affluent areas emphasized the importance of learning specific skill sets: learning words, language, pronunciation and refinement of motor skills such as holding a pen, drawing and coloring.

“Rather than staying at grandmother watching television all day, the nursery is a better option where my child can learn music and new information”
(FGD, working woman, urban affluent, North).

“Don’t want my child to be an introvert or to imitate me. I would like her to learn coloring and holding a pen and they have play activities”
(FGD, non-working woman, urban affluent, North).

FIGURE 34. PARENTS’ PERCEPTIONS OF EARLY CHILDHOOD EDUCATION



Negative

Reluctance of parents to enroll their small children in nurseries was related to social norms, health, financial reasons, fear of neglect and accessibility.

Social norms. Both male and female participants in focus group discussions mentioned that the love of the mother is irreplaceable at this age and children should stay at home. Some employed moms trusted family support more than nursery care while other moms mentioned separation anxiety. Mothers and fathers of poor urban and rural areas believed that nurseries were only intended to assist employed mothers.

Health and Hygiene. Parents were also reluctant to send children to nurseries because of risk of diseases and contagion, a concern that was exacerbated by the COVID 19 pandemic. There was a fear that nursery centers did not have adequate hygiene protocols and neglected children's needs.

Affordability (Cost). Unaffordability of childcare was a concern of both male and female participants of all social classes both in urban and rural areas.

"If my wife works then she will spend her salary on nursery fees and transportation."

(FGD, man urban poor, South).

"Our income is too low, we barely have enough to pay for food and rent."

(FGD, non-working woman, rural poor, Bekaa).

Fear of neglect. A couple of parents were concerned with physical and verbal abuse and negligence. Many parents were concerned that a child may be subject to ill-tempered or inexperienced care givers. In general, concern was more focused on impatience and negligence than physical abuse.

"I hear from relatives that when they pick their child from nursery, they pick him up asleep and they are worried what they are giving him to sleep"

(FGD, man, urban affluent, North).

Accessibility (distance and location). Another concern was lack of access to conveniently located nurseries, which was more serious in outlying areas, non-coastal and inland regions in the North. In the Beirut and Mount Lebanon governorates, traffic was cited as problem. A father mentioned that a 15 km distance that should in theory be a 20-minute trip can turn into a two-hour journey in congested traffic.

"In my area, there are not enough nurseries, and the nearest ones are far away"

(FGD, working woman, urban poor, North).

In focus group discussions about kindergarten, participants expressed a negative opinion of early childhood education standards in public schools.

This was related to crowded classrooms, low staff to student ratio, unmotivated teachers, poor supervision, lack of school supplies and hygiene-related issues. A few parents emphasized that such issues varied depending on the quality of individual school administrations.

"I would not prefer public KGs because for every 20 children with is 1 teacher, while in the private sector there are 8 children with 1 teacher"

(FGD, man, urban poor, South).

"Public centers are unhygienic compared to private ones, for example the toilets are not clean"

(FGD, working woman, rural poor, Bekaa).

"Public schools are already bad so what do you expect from a public KG or worse a public nursery?"

(FGD, man, urban poor, Bekaa).

5.4. QUALITATIVE ANALYSIS ON PARENTS' EXPECTATIONS TOWARDS CHILDCARE SERVICES

During focus group discussions, parents expressed their expectations and preferences related to several aspects of childcare centers (Table 13). The presence of caring and experienced teachers and staff who stimulate children's learning and development was

a top priority. Childcare centers were expected to ensure that nutritional and hygienic needs of children were taken care of. Affordable and nearby centers were preferred by parents who also expected to have an open communication channel with them.

TABLE 13. PARENTS' EXPECTATIONS AND PREFERENCES

Staff and teachers	<ul style="list-style-type: none"> Professional experience is more valuable than a graduate degree. Management and staff should be professional, conscientious, and organized. Any corporal punishment or abuse is vehemently rejected. There should be enough staff to maintain hygiene standards and control the class. Younger children are expected to require more attention than older children.
Number of children	<ul style="list-style-type: none"> No general agreement on the optimal number of children per classroom. Employed women and men prefer a low number of students per class and per teacher ranging from 3-5 children to 10-15 children in each class. In general, non-working mothers were slightly more accepting of a higher number of students per teacher.
Hygiene, health	<ul style="list-style-type: none"> Sufficient staff to assist children to eat, go to the toilet and change diapers. Clean premises, particularly, toilet and kitchen areas in a center.
Center Activities	<ul style="list-style-type: none"> Adequate activities to stimulate children's learning and skills development. This is perceived to be a main differentiator between private and public facilities, although not all private centers live up to the ideals.
Nurse and a doctor	<ul style="list-style-type: none"> A doctor on call and a nurse in the center. A minority expressed a wish for a psychologist, a special teacher or speech therapist for those with delayed speech.
Meals	<ul style="list-style-type: none"> Nurseries are expected to provide nutritious meals.
Proximity	<ul style="list-style-type: none"> Preference for nearby affordable centers.
Access to affordable childcare	<ul style="list-style-type: none"> The urban poor and rural groups and even some urban affluent feel there is a barrier to accessing affordable good quality childcare. Certain parents believe that they are unable to consider the option of early childcare, particularly nursery care that is largely private and fee-paying.
Safe buildings/ infrastructure	<ul style="list-style-type: none"> Located away from highways, preferably in a peaceful and attractive location. Be surrounded by high perimeter walls. Windows should be at a sufficiently safe height from the ground level. Be bright/sunlit without dampness. Ventilated with heating/Air conditioning system. An independent structure, not an apartment in a building, is preferred. Distant from generators and the related pollution. Security system (though cameras are prohibited now by the government). Electric wiring/adaptors should be hidden/out of reach. No accessible glass surfaces
Material/ furniture	<ul style="list-style-type: none"> Sufficient number of toys. Child-friendly material/furniture (e.g small-low furniture, safe drawing materials. Floors should be safe and covered in child-safe materials.
Parent-school comms/others	<ul style="list-style-type: none"> Open communication with parents who wish to be kept informed of educational development issues and to be quickly notified about any sickness or health problems. Attractive child-friendly interior design, separate rooms for the different child activities: dining, sleeping, playing. Outdoor space/ playground/garden.

5.5. SUGGESTIVE WILLINGNESS TO PAY

Over half the surveyed households were not willing to pay for childcare (Table 14). Parents (regardless of them being users/non-users of formal childcare services) were asked about the share of the monthly household income that they would be willing to pay for childcare of acceptable quality, regardless of whether they are users of childcare services.¹¹² Over 50 percent

of surveyed households indicated that they would not be willing to pay for childcare services and a minority, only 19 percent, indicated willingness to pay. Social norms around the acceptance of not having the mother taking care of the children are contributing to these results.

TABLE 14. HOUSEHOLD SUGGESTED WILLINGNESS TO PAY FOR CHILDCARE

	Count	Percent
Not willing to pay	333	55.50%
Willing to pay	112	18.60%
Refused to answer	44	7.30%
Does not know	111	18.50%
Total	600	100.00%

TABLE 15. AVERAGE AMOUNT HH ARE PAYING AND SAY THEY ARE WILLING TO PAY FOR CHILDCARE (0-5 YEARS), BY GOVERNORATE AND IN TOTAL (LBP WITH US\$ EQUIVALENCE USING PARALLEL RATE AT THE TIME OF THE SURVEY IMPLEMENTATION)¹¹³

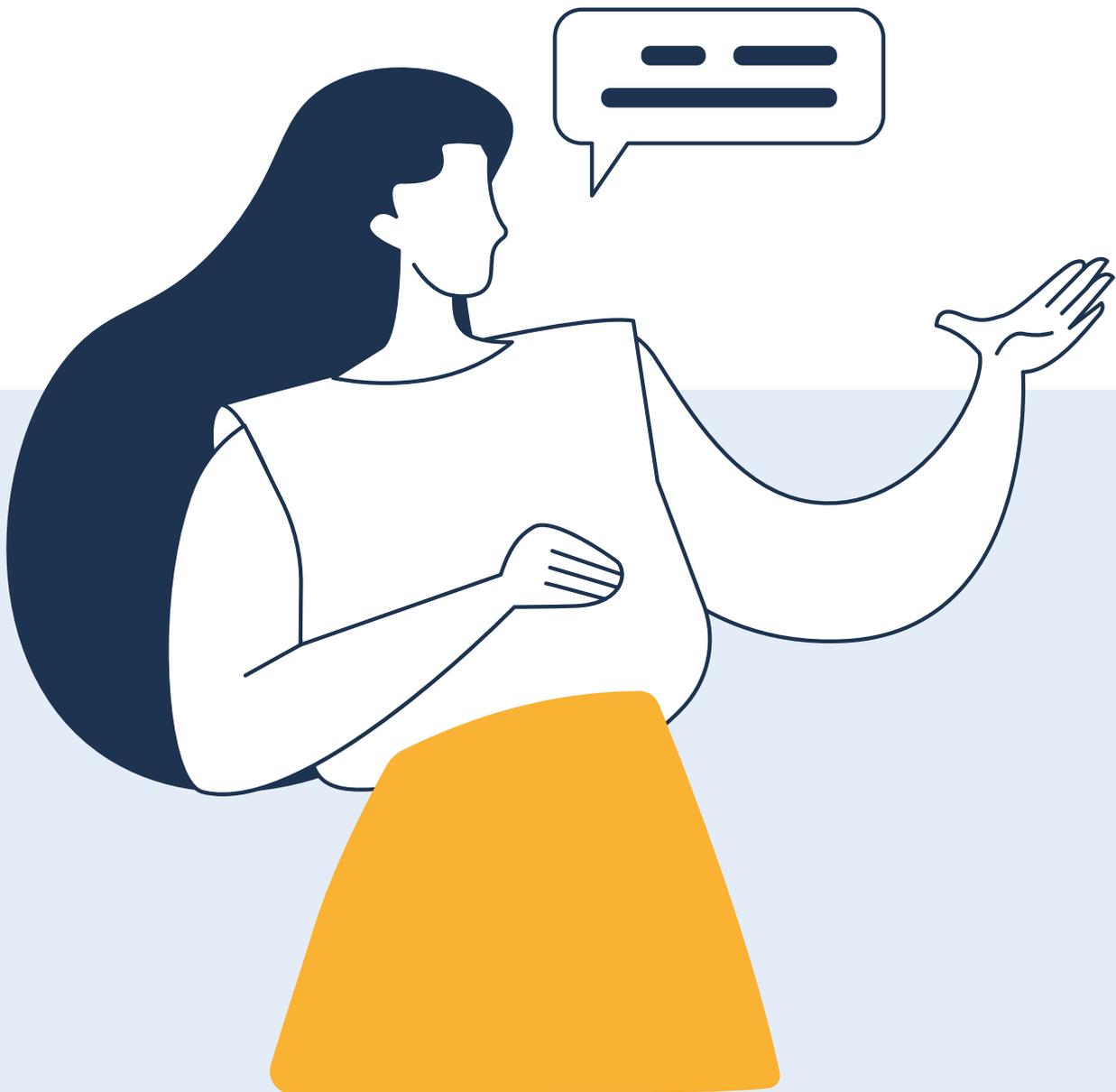
North	Beirut & Mount Lebanon	South	Bekaa	Total
Currently paying/Household				
566,667 (US\$29)	652,656 (US\$33)	650,000 (US\$33)	408,333 (US\$21)	615,467 (US\$32)
Willing to pay/Household				
650,000 (US\$33)	707,894 (US\$36)	583,333 (US\$30)	607,143 (US\$31)	642,000 (US\$33)

Note: Values in parenthesis correspond to the equivalent in \$US. Calculations correspond to the exchange rate US\$1=LBP19,527 for the period July 13 - August 12, 2021, when the demand survey was conducted.

¹¹² Furthermore, 'childcare' was defined to respondents as 'services for taking care of child such as a nursery, a pre-school, a nanny, other caregivers who help for a fee, etc. This does not include food, clothes and other expenses regarding children.'

¹¹³ Household current and willingness to pay was based on those affirming they are currently paying and those expressing willingness to pay respectively, cross tabulated with families having children between 0 and 5 years, not older.

6. CONCLUSIONS AND POLICY OPTIONS



This mixed-methods study examines the childcare arrangements and needs of households with young children in Lebanon and contrasts them relative to the provision of childcare services in the country. The study collects new evidence and document practices, norms, and behaviors around care needs, focusing on the role of women as caregivers and care providers. The analysis focuses on services for children in the 0-3 age group and involves primary data collection on both the demand and the supply of childcare.

In line with the findings from the second State of the Mashreq Women report (Redaelli, S. et al., 2023), this report confirms low enrollment and limited utilization of childcare services in Lebanon. This might reflect limited availability of childcare services (supply), but also unwillingness from families to use childcare services due to preferences for home care, existing social norms regarding women's role in the household, limited accessibility (demand), and/or a mismatch between demand and supply of childcare services. At a more general institutional level, Lebanon does not have a comprehensive childcare policy nor a strategy that guides in terms of objectives, implementation and budget of childcare services/programs. The current childcare policies are limited (focused on licensing only) and not suited to support mothers who are working or willing to work.

For women, the decision of whether to join the labor force and use formal/informal childcare services are connected. Any policy aimed at enhancing women's access to the labor market, should recognize the simultaneous nature of these decisions, and guarantee appropriate childcare support as its foundation.¹¹⁴ Formal childcare is a key element in creating viable opportunities of income generation for women, and to foster children development. The remainder of this chapter briefly discusses policy options aimed at better supporting Lebanese families

in this direction (for a comprehensive discussion of policy recommendations, see Redaelli et al.¹¹⁵). It is worth noting, that the consequences of a policy cannot be viewed in isolation,¹¹⁶ and that households will behave differently based on the combination of state policies in place and the number of available options. Policy options are framed under a four-pronged strategy aimed at achieving:

- (i) an enabling environment for efficient, affordable provision of quality childcare services,
- (ii) a more equitable distribution of the unpaid care work burden within the household,
- (iii) improved State support to address households' care needs, and
- (iv) inclusive family-friendly workplace conditions (private sector)

The adoption of policy reforms often relies on the political momentum in a country and the successful and persistent negotiations among responsible agencies and the government.¹¹⁷ It is recommended that the Government develops a comprehensive vision and long-term plan to improve the affordability, accessibility and quality of childcare services. Table 16 provides a matrix of potential reforms that could be considered, with a timeline (short term – less than 5 years, medium – between 5-10 years, and long term – more than 10 years) and proposed agencies to be engaged.

According to best practices,¹¹⁸ the combination of family friendly work policies coupled with an expansion in quality childcare services would have a positive impact on women's labor force participation. Also, a combination of demand and supply subsidies is considered as the best strategy for paying for childcare while encouraging healthy competition and maintaining quality.

114 See for instance Mateo Díaz, Mercedes, and Lourdes Rodríguez-Chamussy. 2016. Cashing in on Education: Women, Childcare, and Prosperity in Latin America and the Caribbean. Latin American Development Forum. <https://openknowledge.worldbank.org/server/api/core/bitstreams/233b2f71-001a-5a05-a279-a681a9e70387/content>

115 Redaelli, Silvia; Lnu, Anukriti; Buitrago Hernandez, Sandra Paola; Ismail, Tala. *State of the Mashreq Women Flagship : Who Cares? - Care Work and Women's Labor Market Outcomes in Iraq, Jordan, and Lebanon*. Washington, D.C. : World Bank Group. <http://documents.worldbank.org/curated/en/09900050222338765/P16815701c336d00e095dc093ef29af40a7>

116 Díaz, M. M., and L. Rodríguez-Chamussy (2016). *Cashing in on Education – Women, Childcare and Prosperity in Latin America and the Caribbean*. Washington, DC: IDB (Inter-American Development Bank).

117 *The Road to Reforming Ethiopia's Policies on Maternity and Paternity Leave*, provides insight into how Ethiopia increased the duration of paid maternity leave from 90 to 120 days and introduced three days of paid paternity leave in 2019. It also explores the critical role of political momentum and tripartite negotiations among the Confederation of Ethiopian Trade Unions, Ethiopian Employers' Federation, and the government, coupled with persistence by the country's trade unions, that led to the adoption of the reform.

Alemayehu, M., Khaitina, V., Woldeyesus, K., Mykhalchenko, O. and Schulz, K. (2023). *The Road to Reforming Ethiopia's Policies on Maternity and Paternity Leave*. [online] Available at: <https://documents1.worldbank.org/curated/en/099318205292329927/pdf/IDU059d92bf30a959042a90beaf0e2e4952e8aa1.pdf>.

118 (Díaz, M.M. & Rodríguez-Chamussy, L., 2016), (Alemayehu, M. et al 2023), (Del Boca, D. & Locatelli, M. 2006) and (Devercelli, A. & Beaton-Day, F. 2020)

TABLE 16. MATRIX OF POTENTIAL REFORMS AND PROPOSED TIMELINE

Four-Pronged Strategy	Proposed Reforms	Prioritization	Key Agencies
Enable environment for efficient, affordable provision of quality childcare services	Develop a comprehensive, multi-sectoral national childcare strategy	Short Term	Presidency of the Council of Ministers (PCM)
	Revise and properly enforce minimum quality standards	Short Term	Ministry of Public Health (MOPH) Ministry of Social Affairs (MOSA)/ Higher Council for Childhood (HCC)
	Establish professional standards establishing competences of a quality workforce	Short Term	Ministry of Education and Higher Education (MEHE) Ministry of Labor (MOL) National Commission for Lebanese Women (NCLW)
	Improve the data environment to support planning, monitoring, and evaluation of childcare policies (unified system that links up-to-date registry of all licensed providers)	Medium Term	Center of Educational Research and Development (CERD) Syndicate of nursery owners in Lebanon International community (IRC, K2P)
Improve state support to address household care needs	Improve the Lebanese legal system to enhance the enabling environment for employers and employees to benefit from childcare solutions and family-friendly policies	Short Term	Ministry of Labor (MOL) MOSA, MOPH, MEHE, International agencies and CSOs National Commission for Lebanese Women (NCLW)
	Address care needs of most vulnerable households by addressing affordability and accessibility constraints to quality care	Medium Term	
	Expand the availability of affordable and quality small-scale childcare options, with a diversification of modalities (e.g. home-based care)	Medium Term	
Distribute unpaid household work burden more equitably, addressing social norms	Develop and implement information and communication campaigns (critical role of fathers and mothers, importance of ECD for children's well-being and development)	Medium to Long Term	MOSA, MOPH, MEHE, MOL, NCLW Syndicate of Advertisement Agencies Ministry of Transport Ministry of Energy and Water
	Improve access to basic services to reduce women's indirect care work burden (e.g. energy, water, technology)		
Family-friendly workplace conditions in the private sector	Support childcare solutions to respond to the needs of employees	Short Term	Private Sector Chamber of Commerce, Industry and Agriculture, Beirut and Mount Lebanon (CCIA-BML) MOL, NCLW, MOPH, MOSA
	Improve internal policies for family-friendly workplace within private sector firms that would attract and retain talent	Short Term	
	Support campaigns that highlight the business aspects in terms of economic value of investing in a more gender diverse workforce	Short to Medium Term	
	Provide incentives to increase uptake of employer-supported childcare	Short to Medium Term	

Provide an enabling environment for efficient provision of quality childcare services

Creating an enabling environment for efficient provision of quality childcare services is a crucial step towards addressing households' care needs. Activities in this direction include:

1. *Developing multi-sectoral national childcare policies and strategies* detailing objectives, implementation plans, budget and appropriate institutional arrangements (i.e., delegating a formal ECCE coordinating body or ministry to lead and manage activities).
2. *Revising and properly enforcing minimum quality standards* for various types of ECCE service providers, encouraged through incentives to perform well and sanctioned when standards are not met. Governments could explore, along with inspection visits, complementary monitoring activities such as self-assessment surveys, introducing child development assessments and parental feedback, and engaging parents.
3. *Establishing professional standards* and recognizing competences of ECCE workforce.
4. *Improving the data environment* to support planning, monitoring, and evaluation of care policies. This could be done by developing a Monitoring and Information system (MIS) that provides an up-to-date registry of all licensed providers, and that is also integrated with administrative records (vital statistics records) to better assess capacity and enrollment (and identify supply/demand constraints). Future reforms could include a specific mandate on periodic data collection and/or reporting from both public agencies and service providers.

Improve State support to address household care needs

Mashreq countries, including Lebanon, have for the most part delegated the provision of care services to the market. Coverage of care policies, including (limited) financial support for households' care needs, is very limited as it is mostly restricted to formal workers. In a context characterized by fiscal constraints such that of Lebanon, this objective could be achieved through a progressive and multipronged approach which focuses on:

1. *Improving the Lebanese legal system to enhance the enabling environment for employers and employees*

and benefit from childcare solutions and family-friendly policies. KIs and survey results suggest multiple recommendations, including the following:

- a. Ratification of international standards such as No.183 to provide maternity protection in the form of breastfeeding breaks.
 - b. Adoption of 10 nonconsecutive day of paternity leave that can be taken within two months from the birth of the child.
 - c. Adoption of flexible working conditions including but not limited to part time work, remote work and compressed work schedules.
 - d. Update of maternity leave to match the ILO's recommended duration of 14 weeks instead of 10 (International Labor Organization, 2014).
 - e. Adoption of a family care leave of 5 days per year.
 - f. Consider creating a legal requirement for private sector companies that employ a minimum number of employees to provide childcare solutions to their employees (in addition to creating the requirement, provisions would have to be made for enforcing it) – ideally this would be paired with a program to support the private sector in this task (through technical guidance, financial support, training of professionals, etc.).
 - g. Expansion in the coverage of the NSSF to allow mothers on unpaid leave to maintain their entitlement to the medical and maternity (medical) coverage during their absence.
2. *Addressing care needs of most vulnerable households* (who face the strongest affordability constraints) by, for example, including care related support in existing safety net programs and public work programs (e.g., childcare services at worksites), providing monetary allowances to poorer households, and/or providing free or heavily subsidized standalone childcare services (e.g., through community and home-based programs).
 3. *Expanding the availability of affordable and quality small-scale childcare options*, with a diversification of modalities to fill the gap in childcare deserts through public private partnerships as well as, for example, establishing a lean regulatory framework to allow licensing of home-based childcare services, also by facilitating access to credit for small childcare businesses, and/or integrating ECCE provision into existing community-based healthcare programs.

Distributing unpaid household work burden more equitably

1. *Developing and implementing information and communication campaigns to raise awareness about the critical role that both fathers and mothers play in child development*, as well about the importance of early childhood development. For instance, in-person interventions (facilitated through social workers/health centers) aimed at equipping at-home caregivers to provide their children with stimulating environments at home; communication campaigns with wider audiences conducted on radio, TV and social media (e.g., to encourage fathers to increase their participation in parenting). Communication regulatory agencies could also consider working on the establishment of guidelines to promote more positive gender roles and to fight gender stereotyping in marketing and advertising.
2. An important step in this direction would be to *recognize unpaid care work of both men and women at the national policy level*. For instance, recognizing at least 14 days of paid paternity leave could be an important first step in supporting a greater parental responsibility-sharing.
3. *Improving access to basic services to reduce women's indirect care work burden which would also contribute to a more equitable distribution of care responsibilities*. Investments in water, sanitation, electricity (and clean energy, in general) and labor- and time-saving technology, are critical to enable women to spend less time doing very low productivity tasks. These investments should incorporate gender-sensitive approaches (e.g., context-specific gender analyses) and engage women in project design and investment decisions.

Additional recommendations to promote private sector support for childcare

As described in the previous section, only 5 percent of sampled employers in Lebanon offer childcare services. This serves as a call to action to create better workplaces that support all employees with family responsibilities. Access to quality, affordable childcare is a pressing problem for working families, making it essential for the private sector's participation in this area, allowing more women to join and remain in the labor force and contributing to the country's economic recovery. One of the most valuable resources for an employer is retaining talent and improving performance and productivity.

Lebanese employers would benefit from developing a better understanding of their employees' needs, including childcare needs, if they are to ensure their retention, satisfaction, as well as productivity at work. Employers can gain from consulting and listening to workers in both formal and informal ways to develop solutions that work for all sides. There are many opportunities for employers to begin providing low-cost childcare and family-friendly policies such as back-up childcare services, telecommuting, flexible work hours, employee support groups and parental webinars, or discussing corporate discounts to be offered by near-site daycare centers.

1. *Supporting childcare needs of employees through existing quality childcare services*. When deciding which childcare solution is the best fit, employers need to assess their resources as well as their employees' demands for different types of support. The syndicate of nurseries suggests that the private sector invest in supporting the childcare needs of their employees through existing childcare nurseries rather than investing in the setup of new on-site facilities. This solution would remove the burden of care responsibility from companies and enable the hard-pressed nursery sector to survive by giving them a reliable income. Establishing a partnership with a specific center or network of centers or developing a childcare voucher program would allow firms to be part of the solution without incurring large cost of opening an on-site facility and running it, for example.
2. *Improving internal policies for a family-friendly workplace within private sector firms that would attract and retain talent*. Such policies could include flexible working hours (including compressed work schedules), transportation allowance and solutions, part-time options, breastfeeding breaks and availability of rooms. On the legal front, much opportunity remains to improve working conditions and the status of employer-supported childcare in Lebanon (see previous section). As a start, pending policies and the ratification of international standards can be advocated for. Through concerted actions in this area, concerned entities can play an important role in supporting young children, their families and the business community.
3. *Childcare support tends to be more effective when combined with family-friendly workplace policies, as needed* (IFC 2019, 2020). Childcare solutions should be tailored to employees' demands and employers' resources, preferably with support from experts in the field. In general, employers should

see investment in childcare as a strategic business decision based on securing leadership buy-in and support, reviewing business goals and strategy, understanding employees' needs (through an employee feedback system), and considering the company's capacity and resources (IFC 2019).

4. *Support campaigns that raise awareness of the importance of women's participation in the labor force*, highlighting the business aspects in terms of economic value of investing in a more gender diverse workforce. Likewise, campaigns to explain the value of childcare provision should be incentivized not only to increase women's economic empowerment but to foster improved child welfare and development.
5. *The government can play an important role in increasing uptake of employer-supported childcare*. Government incentives can be in the form of fiscal incentives (e.g. corporate tax exemptions), grants and subsidies to employers, and other measures. On the other hand, recommendations of private sector experts and the syndicate of nurseries have focused on alleviating the childcare cost burden of private sector nurseries through tax exemptions and offering targeted assistance to incentivize private sector firms to offer this support to employees. In particular, the sector mentioned special tax exemptions for the exception periods starting 2019 when the private institutes were closed and non-operational. A bill passed in 2018 accorded the nursery sector its rights as an educational service. However, the nursery sector still does not enjoy the tax exemptions granted to educational institutions such as schools.

Based on the above, some more concrete private sector solutions are mentioned below.

- *Employer-supported childcare:*
 1. Adopting low-cost childcare solutions such as work from home for new parents, flexible working hours, breastfeeding room, lactation break.
 2. Ensuring benefits provided are made available to all employees, men and women.
 3. Developing anonymous feedback mechanisms (e.g., online survey) to assess employee satisfaction and identify the need for childcare solutions.

4. Models with different financing modalities: (a) unsubsidized model: discussing corporate discounts or offers for employees with near-site daycare centers; (b) partially subsidized model: A partial childcare subsidy (child allowance) provided to employees; or (c) fully subsidized model: Partnering with existing near-site daycare centers instead of setting up on-site facilities if that is an option. This could be done through a voucher system established between the employer and near-site daycare centers.

- *Family friendly policies:*

1. Allowing the possibility of transitioning into part-time or remote work for new parents when their paid parental leave is exhausted, as well as offering this option to other employees with care responsibilities, if the work can be adapted to accommodate lesser responsibilities or can be filled in on a part-time basis by another employee (current or new).
2. Monitoring and Evaluation: Implementing a system to regularly monitor and evaluate results, refining solutions as needed

This report is the first comprehensive landscape assessment summarizing the supply and demand of childcare services for the 0-3 age range in Lebanon; however, more research is needed. The study contributes with evidence to inform the multi-stakeholder dialogue with the government and responsible agencies to support the provision of high-quality, affordable and accessible childcare services in Lebanon. It also addresses the importance of promoting family-friendly policies in both the private and public sectors, as an investment for improved talent retention, increased productivity and employee loyalty. Agreeing on a clear roadmap to improve the availability, quality, and services options available to families in a coherent and comprehensive manner should be a priority, while more research is also needed to better understand families' complex decision-making related for the use of childcare services.

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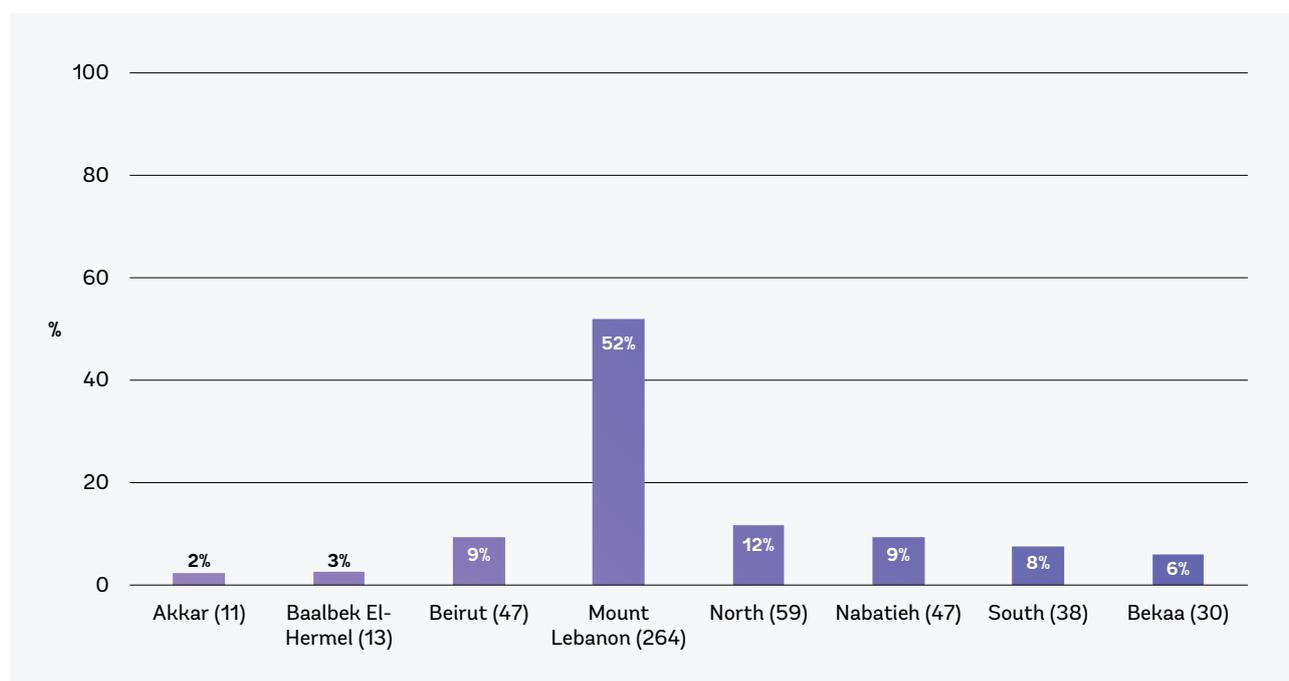
ANNEX 1.

ADDITIONAL DETAILS ON THE OVERALL METHODOLOGY FOR THE SUPPLY AND DEMAND COMPONENTS

Mapping of formal childcare services (i.e. center-based care), supply-side assessment with costing exercise.

The first activity under this component is a *mapping of existing childcare services in Lebanon*. Data collection consisted of a census-like brief (10–15-minute duration) computer assisted telephone interview (CATI) with 509 center-based providers, excluding the permanently closed (Figure A1.1).

FIGURE A1.1. UNIVERSE OF CHILDCARE PROVIDERS IN LEBANON (CATI), DISTRIBUTION ACROSS GOVERNORATES (%)



Note: numbers in parenthesis on the axis refer to number of providers; total is 509 identified providers for the mapping exercise (which excludes 27 nurseries that closed permanently).

The second activity is a *supply-side assessment* which is based on a comprehensive survey applied to a sample of 285 childcare providers randomly drawn from the universe gathered through the mapping activity. It consisted of a computer assisted personal interview (CAPI) with an approximate duration of 70-90 minutes. The supply-side questionnaire (available in Annex 6) addresses the situation of providers in terms of operation, ages served and enrollment, accessibility, human resources, service fees and cost of service provision, daily activities and overall program, safety and health procedures and other structural quality characteristics (Table A1.1).

TABLE A1.1. TOPICS COVERED IN THE SURVEY QUESTIONNAIRE AMONG CHILDCARE PROVIDERS

Modules	
Background information	<ul style="list-style-type: none"> Respondent’s information (sex, education, age) Center information: type, licensing entity, ages served, capacity
Accessibility and Enrollment	<ul style="list-style-type: none"> Hours/months of operation Distance and means of transportation from families Enrollment processes/ requirements Management of waitlists
Shifts, Price and Costs	<ul style="list-style-type: none"> Number and hours of shifts Ages per shift Fees of service, criteria for discounts Food and other additional services provided Operational costs (by item including COVID-19 related) Cost to set up a center like this % cost covered by fees Funding sources (other than fees) Center’s main needs to be able to operate post COVID19
Staffing	<ul style="list-style-type: none"> Staff composition Credentials Wages Hiring practices
Daily routine and activities	<ul style="list-style-type: none"> Program / curriculum development Daily routine Activities with children Children with disabilities
Family Involvement	<ul style="list-style-type: none"> Systems in place for parent’s engagement Center-parent communication during COVID closures
Regulation and Standards (for registered nurseries only)	<ul style="list-style-type: none"> Inspection visits received in last year Inspection agency Frequency of visits Staff training Awareness of government resources Caregivers’ evaluation practices
Awareness, perception, and application of licensing regulations	<ul style="list-style-type: none"> Is nursery registered? Awareness of licensing requirements Perception of licensing process Awareness, perception of COVID-19 health measures Implementation of COVID-19 health measures
Checklist of indoor and outdoor spaces (by enumerator)	<ul style="list-style-type: none"> Yes/No questions of availability of resources, for example: Spaces Toys/stimulation materials Ventilation, temperature Safety Cleanliness Furniture Outdoor spaces (if any)
COVID-19 protocols	<ul style="list-style-type: none"> Social distancing Use of facemasks Availability of hand sanitizer

Assessment of the demand for and use of childcare.

Data collection consisted of a detailed survey to households with presence of children younger than 6 years old and a total of 36 *Focus Group Discussions* (FGDs) were virtually conducted (over Zoom) with mothers and fathers of children in the 0-5 age group. (See details on the structure of FGDs in Annex 3).

Individual (in-person) CAPI interviews were conducted with 600 parents of young children living in the household (486 women and 114 men). Surveyed households were located across eight Lebanese governorates, namely Beirut, Mount Lebanon, South, Nabatiyeh, North, Akaar, Bekaa, and Baalbek-Hermel (see distribution of respondents in Annex 2).

The Individual questionnaire (available in Annex 6) examines socio-demographic characteristics, employment characteristics, division of care and household responsibilities, demand for and attitudes/preferences around childcare (including willingness to pay for services), and impact of COVID-19 on childcare (Table A1.2).

The minimum age of surveyed mothers was 19 years old, and the maximum age was 56 years old, although the majority are in the ages 22–45 (92 percent of surveyed women). Over 90 percent of mothers live with their partner/spouse. More than a third of female respondents had completed tertiary education (38 percent), and a quarter had completed secondary school (25.3 percent). Most surveyed households are nuclear (96 percent of surveyed households), and the remaining minority are extended. The average number of children 0-5 per households is 1.16.

TABLE A1.2. TOPICS COVERED IN THE DEMAND QUESTIONNAIRE FOR HOUSEHOLDS WITH CHILDREN IN THE 0-5 AGE GROUP

Modules	
Respondent characteristics	Sex, age, marital status, education
	Status in the labor force and other labor-related characteristics
	Parental benefits at work
	Individual and household income
	Share of income to childcare
	Willingness to pay for childcare
Household roster	Household composition (per age group)
	Care needs per household member
Non-household members	Roster of non-household members who help providing care for household members
Childcare division of tasks (for children 0-5)	Time spent caring for children
	Type of childcare used (formal/informal), for each child 0-5
	Help received from relatives/friends
	Household division of childcare tasks
	Satisfaction with division of tasks
Effect of COVID-19 on childcare responsibilities	Childcare coping mechanisms during lockdowns
	Changes in respondent's load regarding household activities and childcare
	Coping mechanisms with childcare in case COVID-19 measures continue
	Willingness (and requirements/expectations) to send child back to nursery once they open
(Potential) Demand for childcare	Willingness to use free/paid formal childcare services, and reasons
	Willingness to pay for childcare services
	Willingness to start work or work more hrs. if access to formal childcare
Values and attitudes	Values and attitudes around care and work (including as a result of COVID-19)

ANNEX 2.

SAMPLING METHODOLOGY FOR HOUSEHOLD (DEMAND) SURVEY

Statistics Lebanon (SL), the firm in charge of field work, has developed an extensive database of clusters and households covering all the Lebanese territory. This database has been constructed based on a complete listing of all localities, small villages, medium villages, small towns, large towns, and cities, obtained from “door to door” visits covering each household in Lebanon. It is also based on detailed maps of the “urban” and “rural” areas comprising every city and large town, small town and/or neighborhood. There are 1,134,000 households in Lebanon¹¹⁹ and 819,000 are listed in Statistics Lebanon database. This database has been used to draw samples in survey research in the country, and it was also used to draw the households that were interviewed for the demand assessment.

As a first step, a nationally representative sample of general households (with no special conditions regarding household composition) was constructed. This involved using the available layer of district (Mohafaḡa), which has counts of dwellings and clusters, as the *first stage* sample frame. A first stage of selection was based on a probability proportionate to estimated size (PPES) sample of the district, where the measure of size is the number of citizens by district. For the *second stage*, a systematic choosing sample was drawn based on cluster distribution. The number of selected clusters per district should be proportionate to the population size per district, and then 10 households were selected per cluster.

Once the larger sample of general households was constructed, eligible households, with the presence of children in the 0-5 age group, were drawn and interviewed for the demand assessment. While the sample of general households is nationally representative, the sub-sample of surveyed households is not nationally representative of households with young children in Lebanon. The target respondent of the demand household survey corresponds to respondents with the following characteristics: 18 years old or older, Lebanese citizens, and parent of children in the 0-5 age group living in the household. In the sub-sample of interviewed households, mother respondents were prioritized over father respondents.

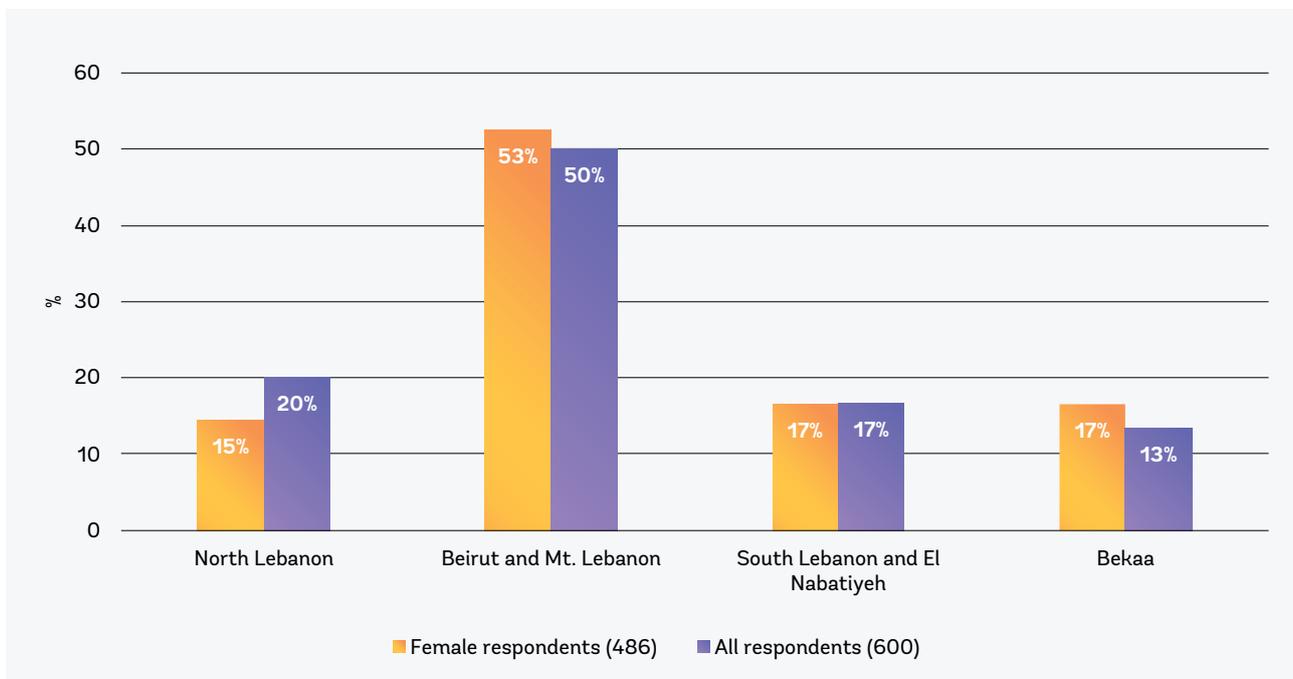
Replacement was based on the following criteria (see table A2.1 below):

- If eligible respondent is not present, or the respondent is away from home, take note and come back again to interview.
- In case of an empty home, a demolished home, business location, etc., take note and skip to the household that comes just after. If at the next household, for any of the above reasons, enumerator is not able to fill a questionnaire, move on to the next household until a successful interview is conducted.
- Three attempts were made of each household. If they all fail, move to the next household coming after.

¹¹⁹ Based on the May 2021 update executed by Statistics Lebanon.

TABLE A2.1. REPLACEMENTS PER REGION (%)

Governorate	Success Rate in (%)	Fail Rate (%)	Total attempts	Interviewed HHs	HHs that were passed over
Bekaa	63%	37%	63	40	23
Baalback-Hermel	66%	34%	61	40	21
Akkar	68%	32%	59	40	19
North Lebanon	71%	29%	113	80	33
South Lebanon	69%	31%	87	60	27
El Nabatieh	67%	33%	60	40	20
Mount Lebanon	55%	45%	436	240	196
Beirut	52%	48%	115	60	55
Average	63.88%	36.13%	994	600	394

FIGURE A2.1. DISTRIBUTION (%) OF SURVEYED PARENTS OF YOUNG CHILDREN ACROSS REGIONS

ANNEX 3.

STRUCTURE OF DEMAND-SIDE FOCUS GROUP DISCUSSIONS

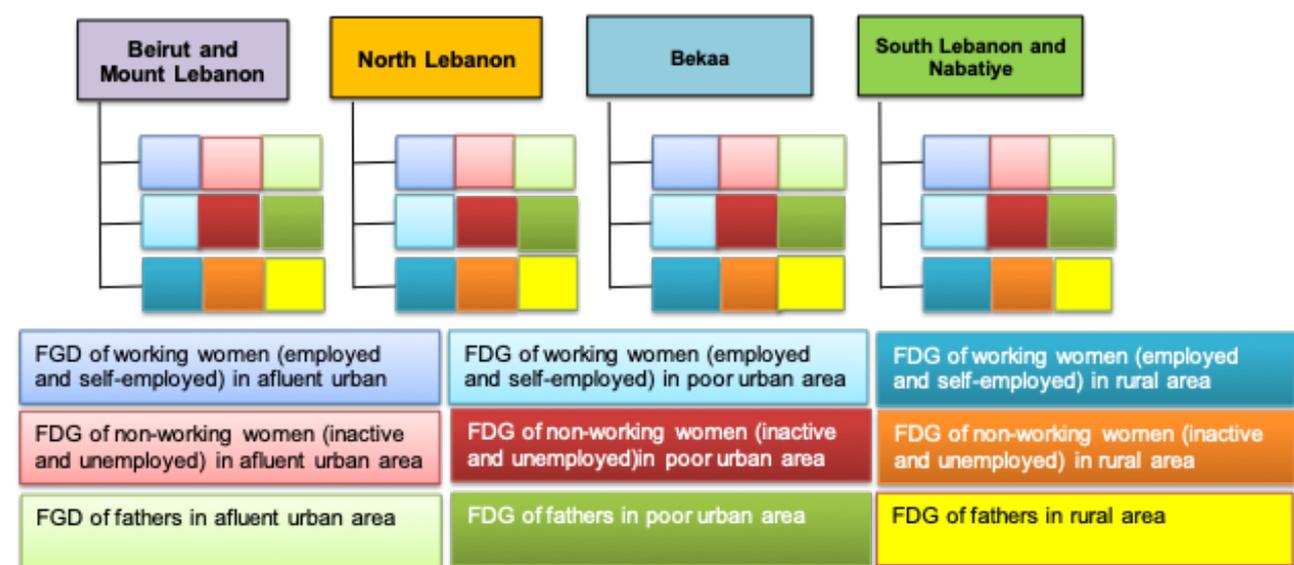
A total of 36 Full Focus Groups discussions (FDGs) were conducted by a team of SL qualitative research experts based on a discussion guides developed for each target profile. To maintain correspondence with the household survey, the participants were largely drawn from the same areas with a few minor differences due to the inclusion of groups from the capital Beirut, and expansion of certain area perimeters in the North due to problems of connectivity and access.

The target profile included working mothers, non-employed mothers and fathers from all areas and diverse communities to ensure a broad overview.

Target Profile of FDGs

- **Age:** above 18 to 45 years of age
- **Gender:** Women and men
 - » Working women who were also mothers of children 6 months to 6 year olds
 - » Non-working women who were mothers of children 6 months to 6 year olds
 - » Fathers of children aged 6 months to 6 years old
- **Children:** Families with children aged 6 months to 6 years
- **Daycare enrollment of children:** Non-users of childcare; Users of childcare: Public and private / formal and informal
- **Geographical location:** (i) Beirut and Mount Lebanon; (ii) North Lebanon; (iii) Bekaa; (iv) South Lebanon and Nabatiyeh
- **Communities**
 - » Affluent urban neighborhood,
 - » Poor urban neighborhood.
 - » Rural setting

The FDGs were organized as follows:



ANNEX 4.

FAMILY-FRIENDLY POLICIES IN LEBANON

Family friendly policies are comprised of: (i) Paid parental leave to care for young children; (ii) support for breastfeeding; (iii) affordable, accessible, and quality childcare; (iv) child benefits (no uniform legal basis for such benefits); and (v) flexible working arrangements. To date, with the exception of maternity leave, the rights under (i), (ii) and (iii) have no legal basis under the current Lebanese legal framework.

Maternity Leave: mandatory maternity leave was extended to 10 weeks in 2014 (laws Nos. 266 and 267 of 2014, which are still below the International Labor Organization recommendation of 14 weeks. --ILO Maternity Protection Convention, 2000 (No. 183)¹²⁰ mandates a minimum leave period of 14 weeks for women around childbirth, and its accompanying Recommendation (No. 191) promotes the optimal maternity leave to be at least 18 weeks. As mentioned above, a draft law was submitted by 7 members of Parliament in 2021, proposing to increase maternity leave to 15 weeks. Moreover, in 2017, and Lebanon's Social Security Law (promulgated by Decree No. 13955 dated 9/1963) was amended to allow retirees to benefit from the provisions of sickness and maternity in the National Social Security Fund. The Social Security Law requires membership of the fund for a period of more than ten months as a condition for entitlement to maternity leave and maternity medical care benefits, and temporary and domestic service workers are excluded from the benefits.

Moreover, the Labor Law forbids dismissal of a working woman on grounds of pregnancy or during maternity leave.

Educational Allowances¹²¹: The Social Security Law provides for educational allowances for private, public and disability schools (article 46 of the Social Security Law, further to Decree #2521 dated 11/2/2016).

Breastfeeding: Breastfeeding rights are not guaranteed under any law. A draft law was submitted by seven members of Parliament in 2021 granting women one hour per working day for breastfeeding, for a period of one year after their return from maternity leave. Law No. 47, issued on 11/12/2008, supports and promotes exclusive breastfeeding for a period of six months and promotes the importance of certain newborn feeding products, methods and tools. The Labor Code gives working women the right to rest for no less than an hour after five hours of work, as opposed to six hours for men (article 34 of the Labor Code).

Paternity Leave: A draft law providing for three consecutive days of paternity leave with full pay and to be taken within a maximum period of two months from the date of the baby's delivery, was approved by the Council of Ministers Cabinet and referred to Parliament for ratification in 2017. Another draft law proposes one day and a recent draft law proposes 10 consecutive or non-consecutive days. To date, men still do not benefit from paternity leave.

Parental leave: Parental leave is not guaranteed under any law. However, a recent draft law submitted by 7 members of Parliament, proposes a 7-day parental care leave for the care of their sick children until the age of 7 years old.

¹²⁰ Article 4.4 of the Convention reads: "Maternity leave shall include a period of six weeks' compulsory leave after childbirth, unless otherwise agreed at the national level by the government and the representative organizations of employers and workers."

¹²¹ See <https://www.ssa.gov/policy/docs/progdesc/ssptw/2018-2019/asia/lebanon.html#:~:text=The%20fund%20normally%20reimburses%20insured,52%20weeks%20in%20special%20cases.>

ANNEX 5.

MAPPING OF CENTER-BASED CHILDCARE SERVICES

Methodology for estimating population of children 0-3 years in year 2021

The estimates are based on the population figures reported by the 2018 Central Administration of Statistics (CAS).¹²² One of the datasets contains the 2018 distribution of residents by governorate and according to age categories beginning with 0 to 4-year-olds (Sheet HL7) and another contains the 2018 distribution of residents aged 3 and above by governorate (Sheet ED3). By computing the difference between the two aforementioned data (See footnote, data in Sheet HL7 in the first URL – Sheet ED3 in the second URL), the 2018 population of residents 0 to 3-year-olds by governorate in 2018 was isolated. Forecasting in SPSS was used to estimate Lebanon's projected population for 2021, and using this projected population, the 2021 population of 0 to 3-year-olds by governorate was calculated using the following formula:

$$\text{Projected 0 to 3-year-old population 2021} = [(\text{Projected population of Lebanon 2021} * \text{2018 Population 0-3 by governorate}) / \text{Population of Lebanon 2018}]$$

Finally using the CAS data of the distribution of Lebanese population by caza in 2018, the projected 0-3-year-old population in 2021 was calculated for each caza using the following formula:

$$\text{Projected 0 to 3-year-old population in 2021 for each caza} = (\% \text{ residents by each Caza of Governorate "A"} * \text{Projected 0-3 population in governorate "A" 2021})$$

TABLE A5.1. CHILDREN 0-3 ESTIMATED POPULATION AND CHILDCARE PROVIDER CAPACITY (CATI MAPPING), BY CAZA

Governorate	Caza	FLFP 2018 (%) (A)	Estimated 2021 population of children aged 0-3 (B)	Number of childcare facilities (C)	Total capacity in caza	Average provider capacity (D)	Childcare Seats per 100 estimated children [(D*C)/(B)]*100
Akkar	Akkar	15.00%	19,248	11	348	32	2
Baalbek El-Hermel	Baalbek	21.90%	10,877	13	616	47	6
	El Hermel	18.20%	1,746	0	0	0	0
Beirut	Beirut	36.80%	13,147	47	3879	83	30

122 http://www.cas.gov.lb/images/Publications/LFHLCS2018-2019/LFHLCS_2018_2019_Demography.xls (Sheet HL7)
http://www.cas.gov.lb/images/Publications/LFHLCS2018-2019/LFHLCS_2018_2019_Education.xlsx (Sheet ED3)

Governorate	Caza	FLFP 2018 (%) (A)	Estimated 2021 population of children aged 0-3 (B)	Number of childcare facilities (C)	Total capacity in caza	Average provider capacity (D)	Childcare Seats per 100 estimated children [[D*C]/(B)]*100
Mount Lebanon	Kesrwane	39.20%	8,828	51	3258	64	37
	Jbeil	42.20%	4,420	13	923	71	21
	El Metn	41.60%	23,426	81	5113	63	22
	Aley	27.60%	8,989	30	1546	52	17
	Baabda	32.30%	28,490	71	3973	56	14
	Chouf	26.90%	8,420	18	733	41	9
North	Zgharta	26.80%	2,982	15	843	56	28
	El Koura	32.40%	2,608	8	404	51	15
	Tripoli	24.90%	14,355	26	1705	66	12
	Batroun	33.70%	2,493	5	221	44	9
	El Minieh- Dennie	22.20%	6,417	5	190	38	3
	Bsharri	21.70%	1,148	0	0	0	0
Nabatieh	Nabatieh	20.70%	7,687	35	1478	42	19
	Bint Jbeil	17.70%	4,069	9	438	49	11
	Hasbaya	19.60%	1,917	2	70	35	4
	Marjaayoun	24.70%	3,249	1	33	33	1
South	Saida	30.00%	13,467	29	1324	46	10
	Sour	19.60%	10,793	9	370	41	3
	Jezzine	28.40%	1,088	0	0	0	0
Bekaa	Zahle	21.30%	9,249	22	1368	62	15
	Rachaya	18.90%	1,721	6	195	33	11
	West Bekaa	26.90%	3,436	2	77	39	2
Lebanon		29.30%	214,270	509	29105	57	14

Note: number of childcare providers and data on maximum capacity are based on the census-type CATI survey.

ANNEX 6.

QUESTIONNAIRES CHILDCARE PROVIDERS QUESTIONNAIRE

The childcare providers questionnaire was adapted from previous mixed methods studies on childcare supply conducted by the World Bank in Turkey, the Western Balkans, and the South Caucasus (see World Bank 2019; World Bank 2015).

Interviewer name:

INTRODUCTION

Hello, my name is [name] and I am coming from firm . We contacted you on [date] to set up this appointment. I am coming here for an academic study conducted by the World Bank that investigates how households cope with child care responsibilities in this area. As part of this, we are working to identify and assess all care service providers that households might use. Is now still a good time for you to talk about [name of service provider]? The interview should last around 90 minutes, and all of the information you share will remain anonymous and confidential, and will only be used for the above-mentioned research purposes. No individual institution information will be shared with third parties and/or disclosed. Names and identifying information will only be collected for reference purposes, but are not to be used in any publication or presentations. Findings from the interviews will be used in reports

1. I hereby give consent to be subject of your research	
1. Yes	2. No

2. Date of 1 st interview attempt: DD/MM/YYYY	--/--/----	3. Completed interview? Use code from List A	4. If revisit rescheduled (3 in List A), when? DD/MM/YYYY	--/--/----
5. Date of 2 nd interview attempt: DD/MM/YYYY	--/--/----	6. Completed interview? Use code from List A	7. If revisit rescheduled (3 in List A), when? DD/MM/YYYY	--/--/----

List A
 Completed=1
 Revisit scheduled=2
 Refused to participate=3

Section A. Respondent Information

1	What is your name?	
2	What is your role here? (Check all that apply)	1. Management (for example, principal.) 2. Owner 3. Administrator (For example accountant, HR manager) specify: 99. Refuses to answer
3	Year of birth 99. Refuses to answer
4	What is your highest level of educational attainment?	1. Less than primary school completed 2. Primary school / Elementary school (5 years) 3. Intermediate 4. Secondary/ Baccalaureate II 5. Vocational BT, specify: 6. Vocational TS, specify: 7. Vocational LT, specify: 8. University Degree, Specify: 9. Graduate Degree, Specify: Higher Education 99. Refuses to answer
5	Gender (Please note the respondent's gender.)	1. Male 2. Female

PART I: INTERVIEW WITH NURSERY PROVIDER REPRESENTATIVE

Section A: Service Provider Background

1	What is the name of the service provider? (This refers to the name of the child care center, institution, etc., NOT the name of the individual. Use this name throughout the questionnaire when it says [service provider].) (Check that the address information on file is correct.) FOLLOWING QUESTIONS IN THIS QUESTIONNAIRE REFER TO THIS BRANCH ONLY, NOT THE WHOLE INSTITUTION)	Name of the Institution: Detailed Address: Governorate: Caza: City/Town/village (As applicable): Neighborhood: Street (if available)/landmark: Number: GPS Location
2	Is [service provider] public, private, non-profit, religious, a cooperative or association, or a different type of institution?	1. Public, specify ministry 2. Private (affiliated with a private school, company/business or individual owner), specify, 3. Non-profit (non-religious), specify 4. Religious (church/mosque/ religious institute, specify: 5. Cooperative/association/organization, specify 6. Other, specify: _____ 98. Does not know 99. Refuses to answer
3	Is [service provider]	1. Licensed by Ministry of Health (MOPH) 2. Licensed by Ministry of Education (MEHE) 3. Subject to the Ministry of Social Affairs (MOSA) 4. Licensed by the MEHE and MOPH 5. Other, specify

4	When did [service provider] open? (Write the full year)		Specify: 98. Does not know 99. Refuses to answer			
5	How many age levels are there in [service provider]? (For each age group, fill in one row in the following multi-part question)		Specify: 98. Does not know 99. Refuses to answer			
6		a) What ages are in this level?	b) How many groups of children are there for this age level at present?	c) What is the maximum number of children you can accommodate in each group for this age level at present?	d) How many children are currently enrolled in this age level (total of all classes)?	e) How many teachers/caregivers are assigned to care for this age group at present?
	Group Age 1	0+ – 12				a. Teachers/caregiver, No:..... b. Teacher Assistant, No:.....
	Group Age 2	12+ – 24				a. Teachers/caregiver, No:..... b. Teacher Assistant, No:.....
	Group Age 3	24+ – 36				a. Teachers/caregiver, No:..... b. Teacher Assistant, No:.....
	Group Age 4	36+ – 48				a. Teachers/caregiver, No:..... b. Teacher Assistant, No:.....
	Group Age 5	48+ – 60				a. Teachers/caregiver, No:..... b. Teacher Assistant, No:.....
	Group Age 6	60+ – 72				a. Teachers/caregiver, No:..... b. Teacher Assistant, No:.....
	Other specify:	specify minimum and maximum age				a. Teachers/caregiver, No:..... b. Teacher Assistant, No:.....
7	Do you have space to expand to accommodate more children in the current space?		1. Yes 2. No– go to Q 9 (suggestion to add skip) 98. Does not know 99. Refuses to answer			
8	What is [service provider]'s total capacity (of children who can receive care)? (This should be the sum of answers to part c of the question above)		Specify 98. Does not know 99. Refuses to answer			

9	What percentage of mothers (whose children receive care here) are employed ("working mothers")?	<p>At present</p> <ol style="list-style-type: none"> 1. 0% 2. More than 0, but less than 20% 3. 21-40% 4. 41-60% 5. 61-80% 6. 81-100% 98. Does not know 99. Refuses to answer 	<p>Before September 2019 (Economic crisis & Covid-19)</p> <ol style="list-style-type: none"> 1. 0% 2. More than 0, but less than 20% 3. 21-40% 4. 41-60% 5. 61-80% 6. 81-100% 98. Does not know 99. Refuses to answer
10	<p>Which best characterizes the average income level of the facility's immediate area?</p> <p>Question geared towards the particular area the facility is located in as opposed to the parents it services</p>	<ol style="list-style-type: none"> 1. High 2. Medium 3. Low 98. Does not know - 	
11	Approximately what percentage of students in your facility has the following background?	<p>A) Come from low income households:</p> <ol style="list-style-type: none"> 1. 0-10% 2. 11-25% 3. 26-50% 4. >50% <p>97. Does not apply 98. Does not know 99. Refuses to answer</p>	
12	<p><i>Overall impressions</i></p> <p><i>Interviewer should note if there were any issues during this part of interview</i></p>		

SECTION B: Accessibility and Enrolment

1	What are the days and hours of operation? (Check the days that it is open and mark the hour using a 24-hour clock)		From	Until
		1. Open Mon.	--:-- 98. Does not know 99. Refuses to answer	--:-- 98. Does not know 99. Refuses to answer
		2. Open Tues.	--:-- 98. Does not know 99. Refuses to answer	--:-- 98. Does not know 99. Refuses to answer
		3. Open Wed.	--:-- 98. Does not know 99. Refuses to answer	--:-- 98. Does not know 99. Refuses to answer
		4. Open Thurs.	--:-- 98. Does not know 99. Refuses to answer	--:-- 98. Does not know 99. Refuses to answer
		5. Open Fri.	--:-- 98. Does not know 99. Refuses to answer	--:-- 98. Does not know 99. Refuses to answer
		6. Open Sat.	--:-- 98. Does not know 99. Refuses to answer	--:-- 98. Does not know 99. Refuses to answer
		7. Open Sun.	--:-- 98. Does not know 99. Refuses to answer	--:-- 98. Does not know 99. Refuses to answer
2	What months is [service provider] closed? (Check months that apply and specify days) (closure during normal times year prior to Covid-19 and social protests during 2019)	# Number of days closed		
		1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December 13. Do not close 98. Does not know 99. Refuses to answer		
3	What are the means used by students to arrive to the nursery? (more than one answer possible)	1. Walking/ By foot 2. Private Car (caregiver, carpool, taxi) 3. School Bus 4. Moped/ motorcycle 5. Other Specify: _____ 98. Does not know 99. Refuses to answer		Please sort by order of importance (show card for respondent)

4	How long does it take most of the children to get to the center?	1. Less than 15 minutes 2. 15-30 minutes 3. 30-45 minutes 4. 45 minutes – 1 hour 5. More than 1 hour 98. Does not know 99. Refuses to answer		
5	How does [service provider] get new clients? (Check all that apply)	1. Publicity 2. Word of mouth 3. Social Media 4. School Recommendation 5. Other, specify: _____ 98. Does not know 99. Refuses to answer		
6	a) What in your opinion are the reasons parents enroll children in your center (More than one answer possible) b) Then rank by order of importance perceived reasons for enrolling children in your center	<div style="text-align: right;">Rank</div> 1. Price 2. Proximity 3. Safety & security measures at center 4. Cleanliness & hygiene 5. Quality of care 6. Qualifications of caregivers & professionals 7. Number of staff 8. Only available option 9. Working hours 10. Language of educational program/curriculum 11. Other, specify:		
7	How often is [service provider] at capacity (meaning has the maximum number of children)?	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> At present 1. Always at capacity 2. Usually at capacity 3. Sometimes at capacity 4. Rarely at capacity 5. Never at capacity 98. Does not know 99. Refuses to answer </td> <td style="width: 50%; vertical-align: top;"> Before September 2019 1. Always at capacity 2. Usually at capacity 3. Sometimes at capacity 4. Rarely at capacity 5. Never at capacity 98. Does not know 99. Refuses to answer </td> </tr> </table>	At present 1. Always at capacity 2. Usually at capacity 3. Sometimes at capacity 4. Rarely at capacity 5. Never at capacity 98. Does not know 99. Refuses to answer	Before September 2019 1. Always at capacity 2. Usually at capacity 3. Sometimes at capacity 4. Rarely at capacity 5. Never at capacity 98. Does not know 99. Refuses to answer
At present 1. Always at capacity 2. Usually at capacity 3. Sometimes at capacity 4. Rarely at capacity 5. Never at capacity 98. Does not know 99. Refuses to answer	Before September 2019 1. Always at capacity 2. Usually at capacity 3. Sometimes at capacity 4. Rarely at capacity 5. Never at capacity 98. Does not know 99. Refuses to answer			
8	When does enrollment of new children happen?	1. Throughout the year, on a rolling basis 2. At the beginning of the school year Other, specify: _____ 98. Does not know 99. Refuses to answer		
9	Is the [service provider] currently accepting new children?	1. Yes 2. No 98. Does not know 99. Refuses to answer		
10	If there is a waitlist, how many children are currently on it?	1. Yes, Specify: _ _ _ 2. There is no waitlist (Skip Q13 and Q14) 98. Does not know 99. Refuses to answer		
11	Are there screening procedures and/or requirements for accepting new children?	1. Yes - Continue to Q12 2. No - Skip to Q13 98. Does not know 99. Refuses to answer		

12	<p>What are the screening procedures and/or requirements for accepting new children? (Check if applies- relevant to public /MOSA)</p>	<p>1. Income requirement, specify: _____ if the income is above _____ (or) if the income is below _____</p> <p>2. Address requirement, select which: (specific to MOSA centers)</p> <p>(a) To live in a specific part of a municipality (b) To live in a specific municipality (c) To live in specific neighborhoods in the surrounding area (not necessarily a municipality) (d) No municipality or neighborhood specified, but have to live in that town/city (e) Other, specify: _____</p> <p>3. Reference 4. Marital status of parents 5. Working status of both parents 6. Entrance/aptitude exams/interview (only for centers that cover ages 4-6 years) 7. Other, specify: _____</p> <p>98. Does not know 99. Refuses to answer</p>	
13	<p>How does [service provider] select which of the children will join first? (Mark all that apply. Do not read answers.)</p>	<p>1. First come, first served 2. Based on income 3. Based on the territory where they live 4. Children whose parents are both employed have priority 5. Orphan 6. Children from single parent (divorced-widowed...) groups have priority 7. Interview with parents 8. Interview with the child 9. Other, specify: _____</p> <p>98. Does not know 99. Refuses to answer</p>	
14	<p>Is there a way for families to get their children moved up the waitlist? (Skip if answer in Q10 'No waitlist')</p>	<p>1. Yes, specify: _____ 2. No</p> <p>98. Does not know 99. Refuses to answer</p>	
15	<p>From 10 prospective children whose families have requested enrollment here, approximately how many are admitted?</p>	<p>At present Specify:/10 98. Does not know 99. Refuses to answer</p>	<p>Before September 2019 Specify:/10 98. Does not know 99. Refuses to answer</p>
16	<p>Are there a minimum number of hours or days children are required to be enrolled?</p>	<p>1. Yes, specify: _ _ _ hours/days/weeks/months/semesters (circle one per day/week/month/year (circle one)) 2. No</p> <p>98. Does not know 99. Refuses to answer</p>	
17	<p>What is the minimum age that [service provider] accepts?</p>	<p>Specify: _ _ days/weeks/months/years (insert one) 97. There is no minimum age 98. Does not know 99. Refuses to answer</p>	

18	What is the maximum age that [service provider] accepts?	Specify: _ _ months/years (insert one) 97. There is no maximum age 98. Does not know 99. Refuses to answer
19	Why children aged older than 4 years are attending your nursery?	1. There are no pre-schools for this age group in this area 2. Pre-schools in this area are not good 3. Pre-school in this area are too expensive 4. Child care centers' hours are more convenient for working parents 5. Parents prefer to keep young children in the center they are used to 6. Child care centers' opening days during COVID-19 are more convenient for parents 7. For health reasons about COVID-19 8. Parents don't believe in online teaching for this age category (COVID-19) 9. Parents are not willing to pay school fees for online learning (COVID-19) 10. Other, specify: 98. Does not know 99. Refuses to answer
20	Do any children who are currently receiving care here come from somewhere farther than those surrounding areas?	1. Yes - Continue to Q24 2. No - Skip to Q26 98. Does not know 99. Refuses to answer
21	About how many children who are currently receiving care here come from somewhere besides this caga?	Specify: _ _ _children s 98. Does not know 99. Refuses to answer
22	Which kadaa and towns/cities do these children come from?	List names of towns/cities and kadaa
23	<i>Overall Impressions</i> <i>Interviewer should note if there were any issues during this part of interview</i>	

SECTION C: Shifts, Pricing and Costing

1	What are the number and times of the shifts at the center.....? (specify time for each shift)	Number of shifts..... For each shift specify time Shift one, specify time: From..... To..... Shift two. Specify time: From..... To..... Shift three: Specify time: From..... To..... (as many shifts as applicable)
2	Does the center receive all age groups enrolled in all the shifts?	1. Yes (skip to Q4) 2. No (Ask Q3 to specify which age groups)
3	Which age group is enrolled in each shift? (Repeat for each shift) (Check all that apply.)	1. Age group 1 2. Age group 2. 3. Age group 3 4. Age group 4 (Repeat for all shifts as applicable)
4	For each shift, what is the price (repeat for every shift)	1. Weekly payment: _____ LL 2. Monthly payment: _____ LL 3. Semester payment: _____ LL 4. Yearly payment: _____ LL 5. Other, specify: _____ LL
5	Do you charge an entry deposit?	1. Yes: _____ LL 2. No - Skip to Q7
6	Is the entry deposit later refunded?	1. Yes 2. No
7	Are there price reductions for certain services, individuals, or families?	1. Yes - Continue to Q8 2. No - Skip to Q9 98. Does not know 99. Refuses to answer
8	What are the criteria for price reductions? (Check all that apply.)	1. Number of children from that family that goes to our childcare 2. Monthly income of the family 3. Employment status of parents 4. Age of child 5. Health condition of child (special needs, chronic disease, etc.) 6. Either parent sick or disabled 7. Financial status of parents 8. Orphaned 9. Single parent (divorced- widowed) 10. Other, specify: _____ 98. Does not know 99. Refuses to answer
9	Are children served food?	1. Yes, and it's included in price 2. Yes, but parents pay extra for the food 3. No, but used to be included in price pre-covid 19 4. No, but parents used to pay extra for food pre-covid 19 5. Children bring their own food - Skip to Q14 6. No - Skip to Q14 98. Does not know 99. Refuses to answer

10	When are children in the following shifts served food? (Cover all shifts as above)			
11	Shift one	1. Breakfast 2. Morning snack 3. Lunch 4. Afternoon snack 5. Dinner 6. Other, specify: 98. Does not know 99. Refuses to answer	If not included in price, please specify the extra cost	
12	Shift two	1. Breakfast 2. Morning snack 3. Lunch 4. Afternoon snack 5. Dinner 6. Other, specify: 98. Does not know 99. Refuses to answer	If not included in price, please specify the extra cost	
13	Shift three	1. Breakfast 2. Morning snack 3. Lunch 4. Afternoon snack 5. Dinner 6. Other, specify: 98. Does not know 99. Refuses to answer	If not included in price, please specify the extra cost	
14	Do you have transportation to and from the childcare center?	1. Yes, and it's included in price - Skip to Q15 2. Yes, but parents pay extra for the transportation 3. No - Skip to Q15 98. Does not know 99. Refuses to answer	If not included in price, please specify the <u>average</u> extra cost	In your area
				In the surrounding area

15	<p>What is included in the price? (Check all that apply)</p>	<p>1. Professional care (by professional teachers and nurses) 2. Materials, such as toys and pencils 3. Educational activities (for example, language classes) 4. Sports 5. Medical check-up Other, specify: 98. Does not know 99. Refuses to answer 98. Does not know 6. 99. Refuses to answer</p>	<p>If not included in price, please specify the extra cost for each</p>
16	<p>Is there any flexibility for families that have trouble paying for the care services?</p>	<p>1. Yes, specify: (Check all that apply) (a) we prolong the deadline for payment (b) we give them a discount (c) we allow payment by installment (monthly/quarterly-circle relevant) (d) other, specify: _____ 2. No 98. Does not know 99. Refuses to answer</p>	
17	<p>What percentage of families have trouble paying for the services?</p>	<p>At present 1. 0% 2. More than 0, but less than 20% 3. 21-40% 4. 41-60% 5. 61-80% 6. 81-100% 98. Does not know 99. Refuses to answer</p>	<p>Before September 2019 1. 0% 2. More than 0, but less than 20% 3. 21-40% 4. 41-60% 5. 61-80% 6. 81-100% 98. Does not know 99. Refuses to answer</p>
18	<p>What do you think were the approximate set up costs? (Assume the building is rented) (Check all that apply)</p>	<p>1. Renovation costs _____ \$ 2. Furniture _____ \$ 3. Teaching materials _____ \$ 4. Licensing _____ in LL 5. Vehicles _____ \$ 6. Security (Guard rails, fire extinguishers etc.) 7. Other, specify _____ \$</p>	<p>Furniture and teaching materials are locally produced or imported 1. Locally produced 2. Imported 98. Does not know 99. Refuses to answer 1. Locally produced 2. Imported 98. Does not know 99. Refuses to answer 97. N/A 97. N/A</p>

19	To set up a facility like this today, how much would you need to pay; e.g. for building costs, providing the materials, furniture, etc.? (Assume the building is rented)	Specify: _____\$ (approximate amount)
20	How many square meters in the total indoor area of the center?	Specify: _____ m ²
21	How many square meters in the total outdoor area of the center? (if available)	Specify: _____ m ²
22	Is the school building owned by you or you rent the place?	1. Owner of the building - Skip to Q24 2. Tenant - Continue to Q23 3. State-owned school -Skip to Q25 4. Other (belongs to municipality, charitable organization etc.) - Continue to Q24
23	How much does [service provider] pay for the rent (imputed rent if property is owned) on a monthly basis?	Specify: _____LL
24	If you would rent the school building out, how much would you ask for it (monthly)? (What would be the amount of imputed rent?)	Specify: _____LL (imputed rent)
25	What are the monthly operational costs of this facility? (Check all that apply)	1. Salaries of managerial staff _____LL 2. Salaries of teachers/caregivers _____LL 3. Salaries of janitorial staff _____LL 4. Salaries of nursing/medical _____LL 5. Salaries of cooking staff/catering _____LL 6. Cost of food/snacks items _____LL 7. Maintenance _____LL 8. Utilities (Electricity, generator, water and gas) _____LL 9. Telecommunication (Includes telephone and interne...) _____LL 10. Insurance _____LL 11. Stationery _____LL 12. Cleaning, products and sanitizers _____LL 13. Protection supplies from COVID-19 (facemasks, gowns, gloves, thermometers, etc.) _____LL 14. Publishing and printing _____LL 15. Health _____LL 16. Education and training _____LL 17. Transport costs _____LL 18. Other 1, specify _____LL 19. Other 2, specify _____LL
26	Do student fees cover all operational costs or a certain percentage of operational costs?	At present 1. it covers b/w 0 – 20% of operational costs 2. it covers b/w 20 – 40% of operational costs 3. it covers b/w 40 – 60% of operational costs 4. it covers b/w 60 – 80% of operational costs 5. it covers b/w 80 – 100% of operational costs 6. it covers more than operational costs Before September 2019 1. 0-20% 2. 20-40% 3. 40-60% 4. 60-80% 5. 80-100% 6. >100% (profitable)

27	What were the sources of the funding used to initially open [service provider]? (Check all that apply)	1. Public, specify: 2. Private, specify: 98. Does not know 99. Refuses to answer
28	What are the current operational sources of funding for [service provider] outside parental fees? (Check all that apply)	1. Public, specify: 2. Private, specify: 97. Does not apply (covered by parental fees) 98. Does not know 99. Refuses to answer
29	What type of assistance will the nursery need to be able to operate during the COVID19 pandemic? (Select all that apply)	1. Financial assistance to cover losses resulting from closing 2. Financial assistance to cover operating costs, additional staff, purchase supplies. 3. Protection supplies for staff (facemasks, gowns, gloves, thermometers, etc.) 4. Training on COVID protocols 5. Modifications of the space such as screens, room dividers, etc. 6. Other, specify: 7. None 98. Don't know 99. Refuses to answer
30	<i>Overall Impressions</i> <i>Interviewer should note if there were any issues during this part of interview</i>	

SECTION D: Staffing

			Before September 2019	
			Specify	How many are women? Specify
1	What is total number of staff employed at the center (full, part-time but not contractual/consultants ex center lawyer/ external accountant/ doctor on call)?		-----	-----
2	For each category of the following how many	Management/administration (receptionist, HR, accountant but excluding Director) Main teacher(s) Assistant teachers/caregivers Janitorial/ cooking/gardening/security/ driving staff Nurse(s)/ assistant nurse	----- ----- ----- ----- -----	----- ----- ----- ----- -----

Say: We would like to know about the qualifications & salaries of people who work in this institution /childcare center at present. All managerial staff, teachers and childcare providers must be in the list. So, can you first tell me the names of everyone who works here?

#	Name	1. Job title/ profession	2. SSex	3. (AGE)	4. Highest degree attained	5. For any staff with vocational school or university (if 1,2,3,5)	6. TTotal years of experience with children (if 1,2,3,5)	7. Type of contract	8. For all with permanent contract: Do you provide NSSF/ insurance	9. Years of working for center / institution	10. Working hours per week	11. Net Monthly Salary earned from this work
1		1. Director (Managerial staff) 2. Main/ teacher/ caregiver 3. Assistant/ supportive caregiver/ teacher 4. Administrative staff, Specify job: 5. Nursing/ medical staff 6. 11.Other, specify	1. Male 2. Female	--	1. Less than primary school completed 2. Primary school 3. Intermediate 4. Secondary / BAC II 5. BT 6. TS 7. LT 8. University (Bachelors) 9. Graduate (Masters/ PHD) 99. Refuses to answer	1. Sociology 2. Psychology/ Counselling 3. Early Childhood Education -ECE 4. Education 5. Business Admin 6. Law 7. Medical DR 8. Nursing 9. Other, specify: 99. Refuses to answer	1. 0-3 years 2. 3-5 years 3. 5-10 years 4. 10-15 years 5. >15 years 6. Other, specify..... 99. Refuses to answer	1. No contract 2. Permanent contract 3. Temporary contract 4. Voluntary, or internship contract 5. Other, specify..... 98. Does not know 99. Refuses to answer	1. Yes NSSF/ Medical insurance 2. No	Specify: ---	Specify: --- hr. per week	1. No earnings 1. ≤ (67500LL) 2. 676,000 LL to 1,500,000 LL 3. 1,501,000 to 2,500,000 LL 4. 2,501,000 to 4,000,000 LL 5. 4,001,000 to 6,000,000 LL 6. 6,001,000 to 10,500,000 LL 2. > 10,500,000 LL 99. Refuses to answer
2	Repeat for all											
3												

SECTION E: Daily Routine and Activities

1	Is there a developmental and/or educational program/curriculum?	1. Yes - Continue to Q2 2. No - Skip to Q4 98. Does not know 99. Refuses to answer
2	What language is used in the educational program/curriculum?	1. Dual language program Ara-Eng 2. Dual language program Ara-Fre 3. Dual language program Eng-Fre 4. Triple language program Ara-Eng-Fre 5. Ara only language program 6. Eng only language program 7. Fre only language program 8. Other language program
3	How was/is the program or curriculum developed? (Check all that apply)	1. It ensures the physical development of children 2. It ensures the intellectual development of children 3. It ensures the psychological development of children 4. It ensures the social development of children 5. Other, specify: 98. Does not know 99. Refuses to answer

4	Is the option available for a child to remain with the same staff and group for more than 1 year?	1. Yes 2. No 98. Does not know 99. Refuses to answer			
5	How is discipline administered to children in this center? (Check all that apply)	1. Verbally (warning, scolding) 2. Staff ignores them 3. They are not allowed to play for a while 4. Partially isolated from other children (for example sitting alone at the table) 5. Other, specify: _____ 98. Does not know 99. Refuses to answer			
6	Does the center have capacity to accept children with disability? (Special needs might include: any type of physical or mental disability.)	1. Yes - Continue to Q6 2. No - Skip to next section 98. Does not know 99. Refuses to answer			
7	How many are currently enrolled?	Specify:			
8	What are the provisions for special needs (check all that apply)	1. Smaller groups of children 2. Additional staff for special needs children 3. Frequent supervision 4. Staff with special training to work with children with disabilities 5. Other, specified: _____ 98. Does not know 99. Refuses to answer			
9	Does this entail additional cost to the center?	1. Yes: Specify amount: :...:LL 2. No (All types)			
10	Would that increase the fees for the parents?	1. Yes: Specify amount: :...:LL 2. No 98. Does not know 99. Refuses to answer			
11	Overall Impressions Interviewer should note if there were any issues during this part of interview				
12	Which of the following happen each day? (Check all that apply.)	1. Leisure, free play 2. Education and developmental enrichment 3. Rest 4. Other, specify:			
13	How frequently do you apply these activities for those under 3 years old: (In normal days not during COVID-19)	1. Socializing with other children Religious/spiritual activities 2. Reading books 3. Active physical play and/or exercise 4. Arts and crafts 5. Music/dancing 6. Fine motor activities (for example: pegs and pegboards, building toys, sewing cards, play with blocks)	Frequently	On a limited basis	never

SECTION F: Family involvement

1	<p>Are there any systems in place to give feedback to parents about their children/receive parental feedback/for parents to present and discuss additional needs? (Check all that apply.)</p>	<p>At present:</p> <p>1. Yes, specify:</p> <p>(a) regular group meetings with parents</p> <p>(c) there is set day in week/month when parent can come and meet caregiver in person</p> <p>(d) Meetings on a need basis (</p> <p>(f) online/phone questions to staff</p> <p>(g) parents can informally speak with caregivers when they pick up or drop off children</p> <p>(h) other, specify:_____</p> <p>2. No</p> <p>98. Does not know</p> <p>99. Refuses to answer</p>	<p>In September 2019:</p> <p>1. Yes, specify:</p> <p>(a) regular group meetings with parents</p> <p>(c) there is set day in week/month when parent can come and meet caregiver in person</p> <p>(d) Meetings on a need basis (</p> <p>(f) online/phone questions to staff</p> <p>(g) parents can informally speak with caregivers when they pick up or drop off children</p> <p>(h) other, specify:_____</p> <p>2. No</p> <p>98. Does not know</p> <p>99. Refuses to answer</p>
2	<p>Are there any other opportunities for parental interaction? (check all that apply)</p>	<p>At present:</p> <p>1. Yes, specify:</p> <p>(a) special days when parent can be present in the group that child attend</p> <p>(b) Parents can be present in some off-premises activities (field trips, etc.)</p> <p>(c) Parents can help in some extra activities such as plays</p> <p>(d) other, specify:</p> <p>2. No</p> <p>98. Does not know</p> <p>99. Refuses to answer</p>	<p>In September 2019:</p> <p>1. Yes, specify:</p> <p>(a) special days when parent can be present in the group that child attend</p> <p>(b) Parents can be present in some off-premises activities (field trips, etc.)</p> <p>(c) Parents can help in some extra activities such as plays</p> <p>(d) other, specify:</p> <p>2. No</p> <p>98. Does not know</p> <p>99. Refuses to answer</p>
3	<p>Who of the parents is usually engaged? (check all that apply)</p>	<p>1. Mother</p> <p>2. Father</p> <p>3. Other, specify:</p> <p>98. Does not know</p> <p>99. Refuses to answer</p>	
4	<p>During COVID closures how centers communicate with families? (Check all that apply)</p>	<p>1. Send suggested routines and activities for parents to do with children</p> <p>2. Online meetings with families.</p> <p>3. Updates on Government measures regarding childcares</p> <p>4. Information about psychological needs for children during lockdown</p> <p>5. Suggested workshops or webinars about positive parenting during lockdown</p> <p>6. Other, specify:</p> <p>7. None</p> <p>98. Does not know</p> <p>99. Refuses to answer</p>	
5	<p>Is there anything else we need to know?</p>		
6	<p><i>Overall Impressions</i> <i>Interviewer should note if there were any issues during this part of interview</i></p>		

SECTION G: Regulations and Standards (For registered nurseries)

Before finalizing our questions, we are going to ask some questions about the regulations and standards that you need to fulfil as a childcare service provider. The Ministries of MOPH (Public health), and MOSA (Social Affairs) are currently interested in the findings of this study as they reformulate the standards. Please provide your open and honest opinion on the standards, with the knowledge that this information will be kept confidential. This information will not be used to evaluate or inspect the center.

1	Has the center received any inspection/monitoring/examination visits from any party during the last year?	1. Yes Continue to Q2 2. No - Skip to Q6 99. Refuses to answer
2	From which party(ies) (multiple answers possible)	1. MOPH 2. MEHE 3. MOSA 4. Other, specify: _____
3	What is the frequency of such visits?	1. Yearly 2. Monthly
4	When did the last such inspection/monitoring/visit occur	Specify month/year: _____
5	What was the outcome reported for the last visit	Specify: _____
6	Have the caregivers undergone any training	1. Yes Continue to Q7 2. No - Skip to Q9 99. Refuses to answer
7	What party was responsible for the training	Specify: _____
8	Who conducted the training	Specify: _____
9	Are you aware of the Toolkit-National Guidelines for Early Childhood Care-	1. Yes - Continue to Q10 2. No - Skip to Q11 99. Refuses to answer
10	Do you implement the recommendations of the Toolkit	1. Partially 2. Completely 3. Not at all 98. Does not know 99. Refuses to answer
11	Is the owner of the center the manager	1. Yes 2. No 99. Refuses to answer
12	Are caregivers evaluated during their work?	1. Yes 2. No - Skip to Q14 99. Refuses to answer

13	On what basis are caregivers evaluated (Check all that apply)	<ul style="list-style-type: none"> 1. Based on training evaluation 2. Written test 3. Parents feedback 4. Children-based evaluation 5. Other specify: 6. There is no specific evaluation criteria <ul style="list-style-type: none"> 98. Does not know 99. Refuses to answer
14	Is there a training for new caregivers (fresh graduated/inexperienced)?	<ul style="list-style-type: none"> 1. Yes, 2. No - Skip to Skip to next section <ul style="list-style-type: none"> 98. Does not know 99. Refuses to answer
15	Which of the following best describes training of new caregivers?	<ul style="list-style-type: none"> 1. Through on-job training of assisting main caregivers 2. Attendance of training seminars 3. Written test based on our nurseries' toolkit 4. Other specify: <ul style="list-style-type: none"> 98. Does not know 99. Refuses to answer

Section H (For all nurseries)

	For nurseries	
1	Is the nursery registered? (Do not ask)	<ul style="list-style-type: none"> 1. Yes (go to Q3) 2. No
2	Have you heard of registration requirements for nurseries by MOPH	<ul style="list-style-type: none"> 1. Yes (continue) 2. No (go to Q10) 99. Refuses to answer (go to Q10)
3	To what extent do you agree with the following statement: The licensing regulation is accessible	<p>On a scale of 5 (5 means totally agree and 1 means totally disagree)</p> <ul style="list-style-type: none"> 5 Totally agree 4 Agree 3 Neither agree nor disagree 2 Disagree 1 Totally disagree
4	To what extent do you agree with the following statement: The licensing regulation is clear	<p>On a scale of 5 (5 means totally agree and 1 means totally disagree)</p> <ul style="list-style-type: none"> 5 Totally agree 4 Agree 3 Neither agree nor disagree 2 Disagree 1 Totally disagree
5	To what extent do you agree with the following statement: Operational standards are clear	<p>On a scale of 5 (5 means totally agree and 1 means totally disagree)</p> <ul style="list-style-type: none"> 5 Totally agree 4 Agree 3 Neither agree nor disagree 2 Disagree 1 Totally disagree

6	To what extent do you agree with the following statement: Licensing process is time consuming	On a scale of 5 (5 means totally agree and 1 means totally disagree) 5 Totally agree 4 Agree 3 Neither agree nor disagree 2 Disagree 1 Totally disagree
7	How difficult is to comply with physical requirements?	a. On a scale of 5 (5 means not difficult at all and 1 means very difficult) 5 Not difficult at all 4 Somewhat difficult 3 neutral 2 Difficult (Ask Qb) 1 Very difficult. (Ask Qb) b. Why? Check all that apply. 1. Time consuming 2. Expensive/involves high costs 3. Reduces services accessibilities 4. Other, specify:
8	How difficult is to comply with human resources requirements?	a. On a scale of 5 (5 means not difficult at all and 1 means very difficult) 5 Not difficult at all 4 Somewhat difficult 3 neutral 2 Difficult (Ask Qb) 1 Very difficult. (Ask Qb) b. Why? Check all that apply. 1. Time consuming 2. Expensive/involves high costs 3. Reduces services accessibilities 4. Other, specify:
9	How difficult is to comply with safety and security?	a. On a scale of 5 (5 means not difficult at all and 1 means very difficult) 5 Not difficult at all 4 Somewhat difficult 3 neutral 2 Difficult (Ask Qb) 1 Very difficult. (Ask Qb) b. Why? Check all that apply. 1. Time consuming 2. Expensive/involves high costs 3. Reduces services accessibilities 4. Other, specify:
10	To what extent do you agree with the following statement: COVID-related additional health measures, are accessible	On a scale of 5 (5 means totally agree and 1 means totally disagree) 5 Totally agree 4 Agree 3 Neither agree nor disagree 2 Disagree 1 Totally disagree
11	To what extent do you agree with the following statement: COVID-related additional health measures, are clear	On a scale of 5 (5 means totally agree and 1 means totally disagree) 5 Totally agree 4 Agree 3 Neither agree nor disagree 2 Disagree 1 Totally disagree
12	What are the effects of COVID-related additional health measures? Check all that apply.	1. Cost 2. Capacity 3. Increasing caregivers/staff number 4. Other specify: 5. None

13	Are children taught healthy habits, such as hand washing? (check all that apply)	1. Yes, specify: a. Caregivers take children several times a day to bathroom and supervise washing hands b. Caregivers remind children several times a day to wash hands, but do not supervise them 2. No, explain: 3. It depends on the age of the children
14	Do you clean all surfaces with disinfectants regularly	1. Yes 2. No 99. Refuses to answer
15	Do you disinfect toys, kitchen, bathrooms and other equipment	1. Yes 2. No 99. Refuses to answer
16	Is the nursery disinfected by a professional service at least once a week	1. Yes 2. No 99. Refuses to answer
17	Do you check children temperature twice a day	1. Yes 2. No 99. Refuses to answer
18	Do you check staff members' temperature daily	1. Yes 2. No 99. Refuses to answer
19	Do staff members change clothes and shoes as soon as they enter the center?	1. Yes 2. No 99. Refuses to answer

Say: Thank you so much for participating in this interview. Now, can I please look around at the facilities?

PART II: OBSERVATION AT THE CARE PROVIDER FACILITY

Section I: Indoor facilities

Please check which of the following you observe, and include any relevant notes.

Overall layout, displays, and facilities		
1	There is sufficient indoor space for children and adults to move freely	1. Yes 2. No Notes:
2	Space is in good repair, clean and well-maintained.	1. Yes 2. No Notes:
3	There is adequate lighting	1. Yes 2. No Notes:
4	There is adequate ventilation	1. Yes 2. No Notes:

5	The facilities do not have unpleasant odors	1. Yes 2. No Notes:
6	There is adequate temperature control	1. Yes 2. No Notes:
7	Floors, walls, and other surfaces are made of easy to clean materials	1. Yes 2. No Notes:
8	Space is accessible for persons with disabilities	1. Yes 2. No 99. Not applicable Notes:
9	Arrangement of the room makes it possible for staff to see all children at a glance	1. Yes 2. No Notes:
10	Sufficient child-sized furniture for the age groups represented (infants, toddlers, etc.)	1. Yes 2. No Notes:
11	There are clean, appropriately sized toilets for staff members	1. Yes 2. No Notes:
12	There are clean, appropriately sized toilets for potty-trained children	1. Yes 2. No 99. Not applicable Notes:
13	There is a separate diaper area with supplies	1. Yes 2. No 99. Not applicable Notes:
14	Items are displayed at children's eye level	1. Yes 2. No Notes:
15	The facilities feel comfortable and nurturing	1. Yes 2. No Notes:
16	The kitchen is equipped for food preparation, sterilizing milk & other utensils for infants (if present) and has fridge large enough to store food	
17	Floors are smooth and have nonskid surfaces. Rugs are skid proof	1. Yes 2. No Notes:
18	Doors and windows are childproof when appropriate (for example, windows can't open fully, heavy doors close slowly, etc.)	1. Yes 2. No Notes:
19	Walls and ceilings have no peeling paint, have no cracked or falling plaster, and are free of crumbling asbestos	1. Yes 2. No Notes:

20	Safety covers are on all electrical outlets	1. Yes 2. No Notes:
21	Electrical cords are out of children's reach	1. Yes 2. No Notes:
22	Covers and guards for fans have openings small enough to keep our children's fingers. They are placed out of reach.	1. Yes 2. No 99. Not applicable Notes:
23	Central heating is used instead of freestanding heaters	1. Yes 2. No Notes:
24	Children cannot reach pipes, radiators, and other hot surfaces	1. Yes 2. No Notes:
25	Sharp furniture edges are cushioned	1. Yes 2. No Notes::
26	Medicines, cleaning supplies, and other materials labeled "keep out of children's reach" are not accessible to children	1. Yes 2. No Notes:
27	Thumbtacks, staples, and other adult materials are not used where children can reach them	1. Yes 2. No Notes:
28	Heavy equipment or furniture that could tip over is anchored	1. Yes 2. No Notes::
29	There are no drowning hazards	1. Yes 2. No Notes::
30	Stairway gates are locked in place when infants or toddlers are nearby	1. Yes 2. No 99. Not applicable Notes:
31	Doorways to unsupervised or unsafe areas are closed and locked unless the doors are used for emergency exits	1. Yes 2. No 99. Not applicable Notes:
32	Emergency exits are clearly marked and identified	1. Yes 2. No 99. Not applicable Notes:
33	There are no facilities in warehouse or next to the building or in the same building producing and/or storing explosive and flammable materials	1. Yes 2. No Notes:

34	Ground or first floor of building	1. Yes 2. No Notes:
35	Total area not less than 200 m2	1. Yes 2. No Notes:
36	There are different classes for different age groups (under 1.5year /1.5 – 2.5yrs/ 2.5 – 3.5yrs)	1. Yes 2. No Notes:
37	There is a separate infirmary	1. Yes 2. No Notes:
38	Classes are furnished with movable beds (rate of 1 per walking child)	1. Yes 2. No Notes:
39	There is a separate dining area with child sized tables & chairs	1. Yes 2. No Notes:
40	There is a sleeping room (with a maximum of 10 cots) for children under 1 year	1. Yes 2. No Notes:

Section J: Toys, equipment, and materials

Toys and materials		
1	There is organized and convenient storage for toys	1. Yes 2. No Notes::
2	Toys are clean and in good repair	1. Yes 2. No Notes:
3	There is a selection of age-appropriate books, toys, development enrichment materials, such as puzzles and blocks	1. Yes 2. No Notes::
4	There are age-appropriate materials for children's active play, such riding toys, shovels, and buckets	1. Yes 2. No 99. Not applicable Notes:

Section K: Playing area facilities

1	There is playing area space	1. Yes - Continue to Q2 2. No - Skip to next section Notes:
2	The playing area space is easily accessible to children in groups	1. Yes 2. No Notes:
3	The playing area space is generally safe (for example, mats under swings, fenced area, etc.)	1. Yes 2. No 99. Not applicable Notes:
4	There are sufficient materials for physical activity, so children have access without long periods of waiting	1. Yes 2. No 99. Not applicable Notes:
5	There is outdoor space?	1. Yes - Continue to Q6 2. No - Skip to next section Notes:
6	How noisy is the outdoor space?	1. Quiet 2. Moderate noise 3. Very noisy 99. Not applicable Notes:

Section L: COVID-19 health measures:

1	There is social distance between children	1. Yes 2. No Notes:
2	Caregivers/workers wear masks	1. Yes 2. No Notes:
3	Center provides hands sanitizers in reception area, class rooms and toilets	1. Yes 2. No Notes:

UPDATED SUPPLY-SIDE SURVEY

Interviewer name:

INTRODUCTION

Hello my name is [], I am working with the World Bank, and we are conducting a follow up survey to the Spring 2021 academic study conducted by the World Bank that investigates how households cope with child care responsibilities in this area. You should have been informed by the Ministry of Public Health, who are supporting this initiative. The objective of this survey is to improve childcare services, using your feedback and experience. The interview should last around 20 minutes, and all of the information you share will remain anonymous and confidential, and will only be used for the above-mentioned research purposes. No individual information will be shared with third parties and/or disclosed. Do you agree to respond to this short questionnaire?

1. I hereby give consent to be subject of your research	
1. Yes	2. No

2. Date of 1 st interview attempt: DD/MM/YYYY	--/--/----	3. Completed interview? Use code from List A	4. If revisit rescheduled (3 in List A), when? DD/MM/YYYY	--/--/----
5. Date of 2 nd interview attempt: DD/MM/YYYY	--/--/----	6. Completed interview? Use code from List A	7. If revisit rescheduled (3 in List A), when? DD/MM/YYYY	--/--/----

List A

Completed=1
Revisit scheduled=2
Refused to participate=3

SHIFTS, PRICING AND COSTING

1.	What is the length of the main shift at the center?	specify time Main Shift , specify time: From..... To.....
2.	What is the monthly price of the core shift of care services? (does it include Professional Care, Material, Periodic Health Check Ups, Extra Activities such as language, sports, music)	Monthly payment: _____ LL / FUSD
3.	Do you propose extra shifts after the end of the main shift?	1. Yes: _____ LL / FUSD 2. No
4.	Do you charge an entry deposit?	1. Yes: _____ LL / FUSD 2. No
5.	What is [service provider]'s total capacity (of children who can receive care)?	Specify: 98. Does not know 99. Refuses to answer

6.	How many children are currently enrolled in the setting (total of all classes)?	Specify: 98. Does not know 99. Refuses to answer	
7.	Are children served food?	1. Yes, and it's included in price 2. Yes, but parents pay extra for the food 3. No, Children bring their own food 98. Does not know 99. Refuses to answer	If not included in price, please specify the extra cost in LL / FUSD
8.	What are the monthly operational costs of this facility? (Check all that apply)	1. Monthly Rent _____LL / FUSD 2. Salaries of managerial staff _____LL / FUSD 3. Salaries of teachers/caregivers _____LL / FUSD 4. Salaries of janitorial staff _____LL / FUSD 5. Salaries of nursing/medical _____LL / FUSD 6. Salaries of cooking staff/catering _____LL / FUSD 7. Cost of food/snacks items _____LL / FUSD 8. Maintenance _____LL / FUSD 9. Electricity / Generator _____LL 10. Other Utilities (Water, Gağ..) _____LL 11. Telecommunication (Includes telephone and internet) _____LL / FUSD 12. Insurance _____LL / FUSD 13. Stationery _____LL / FUSD 14. Cleaning, cleaning products and sanitizers _____LL / FUSD 15. Protection supplies from COVID-19 (facemasks, gowns, gloves, thermometers, etc.) _____LL / FUSD 16. Publishing and printing _____LL / FUSD 17. Health _____LL / FUSD 18. Education and training _____LL / FUSD 19. Transport costs _____LL / FUSD 20. Other 1, specify..... _____LL / FUSD 21. Other 2, specify..... _____LL / FUSD	
9.	Do student fees cover all operational costs or a certain percentage of operational costs?	At present 1. it covers b/w 0 – 20% of operational costs 2. it covers b/w 20 – 40% of operational costs 3. it covers b/w 40 – 60% of operational costs 4. it covers b/w 60 – 80% of operational costs 5. it covers b/w 80 – 100% of operational costs 6. it covers more than operational costs 98. Does not know 99. Refuses to answer	Before September 2019 1. 0-20% 2. 20-40% 3. 40-60% 4. 60-80% 5. 80-100% 6. >100% (profitable)
10.	What percentage of families have trouble paying for the services?	At present 1. 0% 2. More than 0, but less than 20% 3. 21-40% 4. 41-60% 5. 61-80% 6. 81-100% 98. Does not know 99. Refuses to answer	
11.	Is there anything else you would like to share with us related to the pricing and cost structure?	(Enumerator: Be synthetic)	
12.	<i>Overall Impressions</i> <i>Interviewer should note if there were any issues during this part of interview</i>		

HOUSEHOLD SURVEY - INDIVIDUAL QUESTIONNAIRE

The core questionnaire was adapted from previous mixed methods studies on childcare supply conducted by the World Bank in Turkey, the Western Balkans, and the South Caucasus (see World Bank 2019; World Bank 2015). The questions related to the implications of COVID-19 for childcare arrangements were adapted from the rapid gender assessments of COVID-19 conducted by UN Women (2020).

Interviewer name:

INTRODUCTION

Hello, my name is [name] and I am coming from firm .

I am coming here for an academic study conducted by the World Bank that investigates how households are coping with childcare responsibilities in this area.

I would like to ask you about how your family covers childcare needs, and about the distribution of work and care responsibilities in your household. We are trying to better understand needs in this area.

All the information that you will provide will remain fully anonymous and confidential and no one will be able to link your names to your responses. Would you consent to participating?

I hereby give consent to be subject of your research	
Yes	2. No

1. Date of 1 st interview attempt: DD/MM/YYYY	--/--/----	21. Completed interview? Use code from List A -	22. If revisit rescheduled (3 in List A), when? DD/MM/YYYY	--/--/----
2. Date of 2 nd interview attempt: DD/MM/YYYY	--/--/----	25. Completed interview? Use code from List A -	26. If revisit rescheduled (3 in List A), when? DD/MM/YYYY	--/--/----

<p>List A <i>Completed=1</i> <i>Revisit scheduled=2</i> <i>Refused to participate</i></p>

SECTION 1: BASIC INFORMATION ABOUT RESPONDENT

Say: We would like to start by asking you some questions about you. Please answer the questions as accurately and completely as you can. If there is a question you do not want to answer, you may skip it.

13	Phone number:	
14	Location:	
15	Year of birth	---- 99. Refuses to answer
16	What is your marital status?	1. With a partner/spouse who lives together with you in your household 2. With a partner/spouse who lives outside of the household 3. Divorced with no current partner/spouse 4. Widowed with no current partner/spouse 97. Other, specify: 99. Refuses to answer
17	What is the highest level of education completed (Please check one)	1. None 2. Pre-school 3. Primary incomplete (Level 1 & 2) 4. Primary (Level 1 & 2) 5. Complementary (Level 3) 6. Secondary 7. University 8. BP (Complementary Technical) 9. BT (Bacalaureat Technique) 10. TS (Technique Superieure) 11. LT (Licence Technique) 12. Non-standard curriculum 13. Special curriculum for disabled 99. Refuses to answer
18	During the past 7 days, that is from [day] up to yesterday, did you do any work for wage, salary, commission, tip or any other pay, for one or more hours?	1. Yes - Continue to question 14 2. No
19	During the past 7 days, did you run or do any kind of business, farming or other activities to generate income, for one or more hours?	3. Yes - Continue to question 14 4. No
20	During the past 7 days, did you help without pay in a business owned by a household or family member or help a member of household or family in his/her paid job, for one or more hours?	5. Yes - Continue to question 14 6. No
21	Even though you did not work in the past 7 days, did you have a paid job or a business?	7. Yes - Continue to question 10 8. No - Skip to question 23
22	What are the reasons for not having worked over the past 7 days? DO NOT READ. MULTIPLE ANSWERS. SELECT UP TO THREE CLOSEST ANSWER OPTIONS BASED ON THE RESPONDENT'S ANSWER. IF RESPONDENT'S ANSWER IS NOT INCLUDED IN THE LIST, SELECT "OTHER" AND SPECIFY.	1. Off season/ low season (skip to question 23) 2. Shift work, flexi time, nature of work, 3. Vacation, holidays 4. Own sickness, illness, accident 5. Maternity / Paternity leave 6. Education leave / training 7. Temporary layoff, no clients or materials, work break 8. Bad weather, natural disaster 9. Strike or Labour dispute 10. COVID-19 measures/lockdown 11. Looking after the home or family 12. Assisting my children in online learning 13. Waiting for a new business or economic project to start 97. Other, please specify _____

23	Will you return to work or your economic project within 3 months or less?	<ol style="list-style-type: none"> 1. Yes - Continue to question 12 2. No - Continue to question 13 98. Don't know
24	Have you been absent from this job or business for 3 months or less?	<ol style="list-style-type: none"> 1. Yes - Continue to question 14 2. No - Continue to question 13 3. 98. Don't know
25	Do you continue to receive an income from your job or business during this absence?	<ol style="list-style-type: none"> 1. Yes 2. No - Continue to question 23 3. 98. Don't know
26	<p>Enumerator, read aloud: I am going to ask you some questions regarding the main job you had either last week or the last week you worked before your temporary absence. The main job is the job for which you worked the longest hours.</p> <p>In your main job, what kind of work you usually do? What is your job title? What are your main tasks or duties</p>	<ol style="list-style-type: none"> 1. Managers 2. Professionals 3. Technicians and associate professionals 4. Clerical support workers 5. Service and sales workers 6. Skilled agricultural, forestry and fishery workers 7. Craft and related trades workers 8. Plant and machine operators, and assemblers 9. Elementary occupations 10. Cleaners and helpers 11. Agricultural, forestry and fishery labourers 12. Labourers in mining, construction, manufacturing and transport 13. Food preparation assistants 14. Street and related sales and service workers 15. Refuse workers and other elementary workers 16. Armed forces occupations 17. Other, please specify:
27	What is the sector of the employment? (for your main job)	<ol style="list-style-type: none"> 1. Private sector 2. A government institution or a state-owned enterprise 3. Own or family owned business 4. A household as domestic worker 5. A NGO, non-profit institution, religious institution
28	How often do you do this activity (for your main job)	<ol style="list-style-type: none"> 1. Part-time (less than 48 hours per week but regular throughout the year) 2. Full-time (full time means 48+ hours per week) 3. Seasonal 97. Other, specify:

29	<p>What is the economic activity of the establishment/business where you work in your main job?</p> <p>What are the main goods or services produced?</p> <p>Do not read industries, select based on the description by the respondent.</p>	<ol style="list-style-type: none"> 1. Agriculture; forestry and fishing 2. Mining and quarrying 3. Manufacturing 4. Electricity; gas, steam and air conditioning supply 5. Water supply; sewerage, waste management and remediation activities 6. Construction 7. Wholesale and retail trade; repair of motor vehicles and motorcycles 8. Transportation and storage 9. Accommodation and food service activities 10. Information and communication 11. Financial and insurance activities 12. Real estate activities 13. Professional, scientific and technical activities 14. Administrative and support service activities 15. Public administration and defence; compulsory social security 16. Education 17. Human health and social work activities 18. Arts, entertainment and recreation 19. Other service activities 20. Activities of households as employers; undifferentiated goods- and services-producing activities of households for own use 21. Activities of extraterritorial organizations and bodies 97. Other, specify_____ 96. I did not indicate that my main activity involved paid work (not applicable)
30	<p>Does your current employer provide any type of social security (Pension Fund / Health / «)?</p>	<ol style="list-style-type: none"> 1. Yes 2. No 99. Refuses to answer
31	<p>Do you have a paid annual leave?</p>	<ol style="list-style-type: none"> 1. Yes 2. No 99. Refuses to answer
32	<p>Does [name] get paid sick leave in case of an illness or injury?</p>	<ol style="list-style-type: none"> 1. Yes 2. No 99. Refuses to answer
33	<p>(To those who did work in the past week, or those who did not but have a job)</p> <p>Does your employer provide any benefits related to childcare? SINGLER ANSWER</p>	<ol style="list-style-type: none"> 1. Yes 2. No
34	<p>(To those who did work in the past week, or those who did not but have a job)</p> <p>What kind of benefits does your employer provide for childcare? Multiple ANSWER</p>	<ol style="list-style-type: none"> 1. Maternity leave 2. Paternity leave 3. Voucher for daycare 4. On-site daycare 5. Flexible work arrangements 97. Other, please specify _____
35	<p>During the past four (4) weeks, that is from [date] until yesterday, did you do anything to find a paid job or start a business?</p>	<ol style="list-style-type: none"> 1. Yes, tried to find a job 2. Yes, tried to start a business 3. No

36	<p>What did [name] mainly do in the past four weeks to find a job or start a business? Please give me up to four ways, starting with the most important.</p> <p>Record up to four reasons, starting to most important, followed by the second most important and so on.</p> <p>If no more reasons, code '14' and move to the next question.</p>	<ol style="list-style-type: none"> 1. Applied to prospective employers 2. Placed / answered job advertisements 3. Studied or read job advertisements 4. Posted / updated resume on professional / social networking sites 5. Registered with the National Employment Office 6. Registered with private employment agency 7. Took a test or interview 8. Sought help from relatives, friends, acquaintances 9. Checked / asked at workplaces (e.g. factories, worksites, markets, farms) 10. Waited on the street to be recruited 11. Sought financial resources to start a business 12. Looked for land, building/s, equipment, machinery, materials to start a business 13. Applied for permits / licenses to start a business 14. Nothing else 97. Other, specify
37	For how long have you been trying to find a job or start a business?	<ol style="list-style-type: none"> 1. Less than 1 month 2. Less than 3 months 3. Less than 6 months 4. Less than 12 months 5. Less than 2 years 6. 2 years or more
38	What is the main reason why you did not try to find a job or start a business in the last 4 weeks?	<ol style="list-style-type: none"> 1. Waiting for results of a previous search 2. Awaiting recall by previous employer/job 3. Waiting for the season to start 4. Waiting to start new job/business 5. Believes no work available in the area 6. Could not find a suitable job 7. Lack of experience 8. Lack of job matching qualifications or skills 9. Family responsibilities, household chore 10. Family objection 11. Education or training 12. Own illness, disability or injury 13. Considered too young or too old by prospective employers 14. Lack of infrastructure in the area (assets, roads, transportation, employment services) 15. Don't need to work because has other source of income (pension, rent) 16. Does not want to work 17. Gender considerations 97. Other, specify
39	If a job became available, would you be available to start working within the next two weeks?	<ol style="list-style-type: none"> 1. Yes skip to Q29 2. No
40	What is the main reason you are not available to work within the next two weeks?	<ol style="list-style-type: none"> 1. Studies, training 2. Own illness, injury 3. Travel 4. Family reasons 5. Household chores (excluding childcaring) 6. Childcaring responsibilities 7. Old age, retired 8. Preparing to start a new job 9. Family objections 10. Awaiting recall from previous job 11. Waiting for the season to start 97. Other, specify

41	(For those who have a job) What is your estimated monthly income from your paid work (not your entire household)?	1. ≤ (675000LL) 2. 676,000 LL to 1,500,000 LL 3. 1,501,000 to 2,500,000 LL 4. 2,501,000 to 4,000,000 LL 5. 4,001,000 to 6,000,000 LL 6. 6,001,000 to 10,500,000 LL 7. > 10,500,000 LL 96. I do not work for pay (not applicable) 99. Refuses to answer
42	(All respondents) What is your HH estimated monthly income?	1. ≤ (675000LL) 2. 676,000 LL to 1,500,000 LL 3. 1,501,000 to 2,500,000 LL 4. 2,501,000 to 4,000,000 LL 5. 4,001,000 to 6,000,000 LL 6. 6,001,000 to 10,500,000 LL 7. > 10,500,000 LL 96. No one works for pay (not applicable) 99. Refuses to answer
43	What percentage of your monthly income goes to childcare? (By childcare we mean services for taking care of child such as a nursery, a pre-school, a nanny, other caregivers who help for a fee, etc. This does NOT include food, clothes and other expenses regarding children)	----- % 96. I do not work for pay (not applicable)
44	Does anyone else in your household pay for care? (By childcare we mean services for taking care of child such as a nursery, pre-school, a nanny, any other caregivers who help for a fee, etc. This does NOT include food, clothes and other expenses regarding children)	1. Yes 2. No - Skip to 34 (or Q35 if the respondent does not work)
45	If someone else in your household pays for care, who is it? (Put relationship to respondent as in a roster)	1. Husband/wife 2. Mother/father 3. Mother in law/father in law 4. Sister/brother 5. Sister in law/brother in law 97. Other, specify:
46	(To those who did work in the past week, or those who did not but have a job) What percentage of your monthly income are you willing to pay for childcare that is of acceptable quality? (By childcare we mean services for taking care of child such as a nursery, a pre-school, a nanny, other caregivers who help for a fee, etc. This does NOT include food, clothes and other expenses regarding children)	----- % 96. I am not willing to pay 98. Don't know 99. Refuses to answer
47	What percentage of your household monthly income are you willing to pay for childcare that is of acceptable quality? (By childcare we mean services for taking care of child such as a nursery, a pre-school, a nanny, other caregivers who help for a fee, etc. This does NOT include food, clothes and other expenses regarding children)	----- % 96. I am not willing to pay 98. Don't know 99. Refuses to answer

SECTION 2: HOUSEHOLD ROSTER

Say: Next, we would like to know about the people who live with you in your household. By “household,” we mean people who live together under the same roof. First, can you please tell me the names of everyone in your household, starting with your partner/spouse if there is one in your household?

Note to interviewer: First, list the names of everyone in the household in the column entitled “Name,” with one person per row, starting with the respondent’s partner/spouse if there is one in your household. Then, start with the first person the respondent listed and, in that row, ask the additional information about him/her that is found in each column. Ask about their relationship to the respondent (mark the answer using a code from List B), ask their sex (mark M for male or F for female), ask and write down their age, write their primary activity (use a code from List C) and whether s/he does this part-time, full-time, or seasonally (mark PT for part-time, FT for full-time, or S for seasonally), and ask the questions about their care needs and help. Please do NOT include the respondent.

#	Name	Relationship to you (Use code from List B)	Sex	Age	Activity (Use a code from List C)	Does this person need help and care?	Do you provide care for this person?	Does this person help you with care responsibilities? (Mark all that apply)
1			1. M 2. F		1. PT 2. FT 3. S	1. Not at all 2. Yes, needs some help 3. Yes, needs a lot of help	1. No 2. Yes, but rarely 3. Yes, sometimes 3. Yes, frequently	1. No 2. Yes, s/he cares for me 3. Yes, s/he helps me to care for a child/children 4. Yes, s/he helps me to care for the elderly
2								

<p>List B (Relationship to R)</p> <p>Household member is respondents:</p> <ol style="list-style-type: none"> Partner or spouse Biological child with the current partner or spouse Biological child with a former partner or spouse (this includes partner or spouse who died) Stepchild Adopted child Biological or adoptive parent Stepparent or foster parent Biological or adoptive parent of current partner or spouse Stepparent or foster parent of current partner or spouse Grand- or great-grandparent (either R’s or partner’s) Brother or sister Partner or spouse’s brother or sister Partner or spouse of a child Other relative of R Other relative of partner or spouse A Non-relative, domestic helper Other non-relative 	<p>List C (Main job)</p> <ol style="list-style-type: none"> Monthly paid employed Weekly, daily or on the basis of productivity paid employee Employer Own-account workers/self-employed (includes farming) Unpaid family helper/ Helping a family member in a family business or a farm Unemployed and looking for work Not working – and not looking for work / inactive Trainee, apprentice Student, in school, in vocational training Retired Other <p>List D (Location)</p> <ol style="list-style-type: none"> In the same building In the same street In the same city In the same district In the same governorate Other, specify
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SECTION 3: ROSTER FOR NON-HOUSEHOLD MEMBERS

Is there anyone who does NOT live in your household but either **helps you with care** responsibilities (caring for you or others) or that **you help and provide care to**?

1. Yes - Continue to roster

2. No - Skip to [Section 4](#)

Say: Can you please tell me the names of everyone who does NOT live in your household but either **helps you with care** responsibilities (caring for you or others) or that **you help and provide care to**?

Note to interviewer: In the roster below, first list the names of everyone in who falls into this category in the column entitled "Name," with one person per row. Then, start with the first person the respondent listed and, in that row, ask the additional information about him/her that is found in each column, as you did for the household roster. Ask about their relationship to the respondent (mark the answer using a code from List B), ask their sex (mark M for male or F for female), ask and write down their age, write their primary activity (use a code from List C) and whether s/he does this part-time, full-time, or seasonally (mark PT for part-time, FT for full-time, or S for seasonally), and ask the questions about their care needs and help. Please do NOT include the respondent.

#	Name	Relation-ship to you (Use code from List B)	Sex	Age	Main job (Use code from List C)	Where does s/he live? (Use code from List D)	Does this person need help and care?	Do you provide care for this person?	Does s/he pay you for this care?	Does s/he help you with care responsibilities? (Mark all that apply)	Do you pay him/her for this help with your care responsibilities?
1			1. M 2. F		1. PT 2. FT 3. S		1. Not at all 2. Yes, needs some help 3. Yes, needs a lot of help	1. No 2. Yes, but rarely 3. Yes, sometimes 3. Yes, frequently	1. Yes 2. No	1. No 2. Yes, s/he cares for me 3. Yes, s/he helps me to care for a child/children 4. Yes, s/he helps me to care for the elderly	1. Yes 2. No
2											

SECTION 4: CHILDCARE DIVISION OF TASKS

"We will focus on children in the 0-5 age group only"

Say: Next we are going to ask about how childcare works for you, your household, and your family.

1	Over the last 12 months, have you given regular help with childcare to other people?	1. Yes - Continue to question 2 2. No - Skip to question 4
2	How much time do you spend on caring for a child/children as your primary activity on a typical day? (help in providing care not providing care as a paid job) This is for ALL children you care for, including children in your household and not in your household. Please write down amount of hours and minutes per day. We are interested in weekdays.	-- hours and -- minutes

3	<p>How much time do you spend on caring for a child/children while you are doing something else on a typical day? (help in providing care not as a paid job)</p> <p>By this we have in mind time spent on some other activities while in the same time you take care of the child (for example cooking, doing housework, or just being at home but without possibility to do some paid job out of home due to childcare).</p> <p>This is for ALL children you care for, including children in your household and not in your household.</p> <p>Please write down amount of hours and minutes per day. We are interested in weekdays.</p>	-- hours and -- minutes
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Roster for childcare division of tasks

Now we would like to know how you handle your child's care in terms of division of tasks, and financial matters.

"We will focus on children in the 0-5 age group only"

#	1. Age of the child	2. Do you get regular help with childcare from a day care center, a nursery or pre-school, an afterschool care-center, a self-organized childcare group, a babysitter, or from some other institutional or paid or unpaid arrangement? (In present) 3. Before September 2019 (do not ask if the child was born after)	4. Where do you get the main regular help from? (In present) 5. Before September 2019	6. If you are receiving help from a family member, who is s/he? (In present) (multiple answers) 7. Before September 2019 (multiple answers)	8. How frequently do you make use of this main help? (In present) 9. Before September 2019	10. Do you pay for this main help? (In present) 11. Before September 2019	12. If you pay for this main help, how much do you usually pay? (In present) 13. Before September 2019	14. In total, what percentage of your household income goes toward paying for childcare? 15. (By childcare we mean services for taking care of child such as pre-school, nanny, etc. It does NOT include food, clothes and other expenses regarding children) (In present) 16. Before September 2019
1.	--	1. Yes 2. No	1. From a state, formal institution/such as a state day care center, nursery, or afterschool care-center 2. From a state, formal institution/pre-school 3. From a private, formal institution/such as a private day care center, nursery, or afterschool care-center 4. From a private, formal institution/pre-school 5. From an informal institution, such as a self-organized group 6. From a private individual at my home (such as a nanny, babysitter or domestic helper) 7. From a private individual NOT at my home (such as a nanny or babysitter) From a family member at my home From a family member NOT at my home 97. From another institutional or paid or unpaid arrangement, specify: _____	1. My partner or spouse 2. Another of my children (biological, adopted, stepchild, or foster child) 3. My mother 4. My father 5. My mother-in-law 6. My father-in-law 7. My sister 8. My brother 9. Another female relative 10. Another male relative 11. A female friend/neighbor 12. A male friend/neighbor 97. Other, specify: _____	-- days per week/month/year (check one)	1. Yes 2. No	----- LL per hour/day/week/month (check one)	1. 0% 2. More than 0, but less than 10% 3. 10-20% 4. 21-30% 5. 31-40% 6. 41-50% 7. 51-60% 8. More than 60%

20. Below is a list of various tasks that have to be done when one lives together with children. Please tell me who in your household does these tasks?

	Always me	Usually me	Me and someone else about equally	Usually someone else	Always someone else	Children themselves	Not applicable
a) Dressing the children or seeing that the children are properly dressed	1	2	3 1.In Household, member # from roster: ----- 2.Not in household	4 1.In Household, member # from roster: ----- 2.Not in household	5 1.In Household, member # from roster: ----- 2.Not in household	6	99
b) Putting the children to bed and/or seeing that they are in bed	1	2	3 1.In Household, member # from roster: ----- 2.Not in household	4 1.In Household, member # from roster: ----- 2.Not in household	5 1.In Household, member # from roster: ----- 2.Not in household	6	99
c) Staying at home with the children when they are ill	1	2	3 1.In Household, member # from roster: ----- 2.Not in household	4 1.In Household, member # from roster: ----- 2.Not in household	5 1.In Household, member # from roster: ----- 2.Not in household	6	99
d) Playing with the children and/or taking part in leisure activities with them	1	2	3 1.In Household, member # from roster: ----- 2.Not in household	4 1.In Household, member # from roster: ----- 2.Not in household	5 1.In Household, member # from roster: ----- 2.Not in household	6	99
e) Helping the children with homework	1	2	3 1.In Household, member # from roster: ----- 2.Not in household	4 1.In Household, member # from roster: ----- 2.Not in household	5 1.In Household, member # from roster: ----- 2.Not in household	6	99
f) Taking the children to/from school, day care center, babysitter, or leisure activities	1	2	3 1.In Household, member # from roster: ----- 2.Not in household	4 1.In Household, member # from roster: ----- 2.Not in household	5 1.In Household, member # from roster: ----- 2.Not in household	6	99

21. How satisfied are you with the way childcare tasks are divided between you and your partner/spouse? Please use this card and tell me the value on the scale.

Show Satisfaction Scale to respondent.

Value from Satisfaction Scale: ___



The effect of COVID-19 on childcare responsibilities

1. As a result of COVID19, has the number of hours devoted to the following activities changed?

		I do not usually do it	Increased	Unchanged	Decreased
a	Caring for children, including feeding and physical care				
b	Playing with, talking to and reading to children	4	3	2	1
c	Instructing, teaching, training children	4	3	2	1
d	Cooking and cleaning	4	3	2	1

2. Since the spread of COVID19, in which activity do you spend the most time?

	Please select one, then NEXT
Caring for children, including feeding and physical care	
Playing with, talking to and reading to children	
Instructing, teaching, training children	
Cooking and cleaning	

3. Since the spread of COVID19 have roles and responsibilities within the household been affected? Select all that apply.

	Yes	No	Not applicable
a. My partner helps me more with household chores	1	2	3
b. My partner helps me more with caring for family	1	2	3
c. My daughter(s) helps me more with household chores and caring for family	1	2	3
d. My son(s) helps me more with household chores and caring for family	1	2	3
e. Other family/household members help me more with household chores and caring for family	1	2	3
f. Hired a domestic worker/babysitter / nurse / teacher for online	1	2	3
g. Domestic worker/babysitter/nurse works longer hours with us	1	2	3
h. Domestic worker/babysitter/nurse no longer works with us	1	2	3
i. I am on my own, no one can help me with household chores and caring for family	1	2	3

4	<p>If the restrictive measures related to spread of COVID19 continue (in particular, closures of childcare centers), what would you most likely do to cover childcare needs (Check all that apply)</p>	<ol style="list-style-type: none"> 1. Will have to ask help from relatives 2. Will have to hire a nanny/domestic worker/babysitter 3. Will cut the number of hours worked 4. Will quit job 5. Will send children to centers that re-open <p>97. Other, specify: 96. Does not apply 98. Does not know 99. Refuses to answer</p>
5	<p>Did you already take any of those actions to cover childcare needs during last year's restrictive measures related to spread of COVID19? (Check all that apply)</p>	<ol style="list-style-type: none"> 1. Ask help from relatives 2. Hire a nanny/ domestic worker/babysitter 3. Cut the number of hours worked 4. Quit job 5. Send children to centers that re-open <p>97. Other, specify: 96. Does not apply 98. Does not know 99. Refuses to answer</p>
6	<p>Under what conditions would you consider sending your children to a nursery or pre-school?</p>	<ol style="list-style-type: none"> 1. When the government authorizes centers to re-open 2. Even if government authorizes centers to re-open, I will not send them until people receive the vaccine 3. Will not send them at all <p>96. Does not apply 98. Does not know 99. Refuses to answer</p>
7	<p>Once the government authorizes re-opening of childcare centers, what are the actions you would like to see in the center of your choice (select all that apply)</p>	<ol style="list-style-type: none"> 1. Children going certain days per week only 2. Fewer number of children per group or classroom 3. Center mixes in-person days with virtual days (pre-schools only) 4. Make it mandatory for children to wear a mask 5. Shorter shifts 6. Government to closely supervise protocols in childcare centers 7. Constant communication with parents <p>96. Does not apply 98. Does not know 99. Refuses to answer</p>
8	<p>Which of your family members are mainly involved in schooling of child/ren at home during the quarantine (supervising study, assistance with homework)? (Check all that apply) (For families with children older than 6)</p>	<ol style="list-style-type: none"> 1. I do it on my own 2. Partner (spouse) 3. Ex-partner (if you are divorced or separated) 4. (Great-)grandmothers/ (Great-)grandfathers 5. Hired workers (teacher) 6. Neighbors 7. Older children 8. Other relatives 9. Nobody, the child/children study on their own <p>97. Other, specify: 99. Refuses to answer</p>

SECTION 5: DEMAND FOR CHILDCARE

1	<p>If the respondent has children aged 4 or below and not enrolled in childcare facilities (answered 5. From an informal institution, such as a self-organized group, 6. from a private individual at my home (such as a nanny, babysitter or domestic helper), 7. From a private individual NOT at my home (such as a nanny or babysitter), 8. From a family member at my home, 9. From a family member NOT at my home for item 7 under Roster for childcare division of tasks)</p> <p>Would you be willing to use free day care (through the state or private day care) services? SINGLER ANSWER</p>	<p>1. Yes – state services only 2. Yes – private daycare only 3. Yes – either 4. No 98. Don't know</p>
2	<p>If the respondent has children aged 4 or below and not enrolled in childcare facilities (answered 5. From an informal institution, such as a self-organized group, 6. from a private individual at my home (such as a nanny, babysitter or domestic helper), 7. From a private individual NOT at my home (such as a nanny or babysitter), 8. From a family member at my home, 9. From a family member NOT at my home for item 7 under Roster for childcare division of tasks)</p> <p>Would you be willing to use paid day care (through the state or private day care, including at one's work) services? SINGLER ANSWER</p>	<p>1. Yes – state services only 2. Yes – private daycare only 3. Yes – either 4. No 98. Don't know</p>
3	<p>ASK IF Q1 CODED 4 OR Q2 CODED 4</p> <p>What is the main reason you would not be interested in using day care services? DO NOT READ. SINGLE ANSWER.</p>	<p>1. I don't trust day care center/ other people to watch my children 2. Believe mothers should look after their own young children 3. I am able to watch my children myself / don't need additional help 4. Husband/ family do not approve 5. There are other family members to look after the children 6. Too expensive 7. Expect it to be too far 8. Day cares are not good for child development 9. Fear that society would disapprove of the woman for being a bad mother 10. Sending child to day care might negatively affect family's image/ status 11. Expect daycare to be of low quality 12. Expect inconvenient hours 13. Religious/ social leader disapproves 14. Don't want child to mix with people of different background 15. Had bad experience with day care in the past 97. Other, <i>please specify</i> _____</p>
4	<p>ASK IF Q1 CODED 1 OR 2 or 3</p> <p>Would you be willing to start working/ open a business/ work longer hours if you had access to FREE day care (through state or private including through one's work) services? SINGLE ANSWER.</p>	<p>1. Yes 2. No 98. Don't know</p>
5	<p>ASK IF Q4 CODED 1</p> <p>What type of work would you do? READ. MULTIPLE ANSWERS</p>	<p>1. Start own business at home 2. Work for family business at home 3. Work for someone else at home 4. Start own business outside home 5. Work for family business outside home 6. Work for someone else outside home 7. Work more hours in current position [[SCRIPTER: SHOW IF 1. Q6 or Q7 or Q8 or Q9 CODED 1 98. Don't know [EXCLUSIVE]</p>

6	<p>(If the respondent has a child aged 4 or 5 years old and does not attend pre-school) Why you did not send your child to pre-school? (Check all that apply)</p>	<ol style="list-style-type: none"> 1. There are no pre-schools for this age group in this area 2. Pre-schools in this area are not good 3. Pre-schools in this area are too expensive 4. Child care centers' hours are more convenient for me 5. I prefer to keep my child in the center he/she is used to 6. Child care centers' opening days during COVID-19 are more convenient for me 7. For health reasons about COVID-19 8. I don't believe in online teaching for this age category (COVID-19) 9. Not willing to pay school fees for online learning (COVID-19) 97. Other, specify: 98. Does not know 99. Refuses to answer
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SECTION 6: VALUES AND ATTITUDES

Say: Finally, we have some questions about your values and attitudes.

1	<p>There are widely varying views on how we should care for people in our society. Please indicate for each of the topics mentioned whether you think (your own opinion) it is mainly the task for society, the family or for both.</p>	a. Care for children 3 and below	<ol style="list-style-type: none"> 1. Mainly a task for society 2. Mainly a task for the family 3. Both a task for society and the family
		b. Care for pre-school children (4-5)	<ol style="list-style-type: none"> 1. Mainly a task for society 2. Mainly a task for the family 3. Both a task for society and the family
		c. Care for schoolchildren during after-school hours	<ol style="list-style-type: none"> 1. Mainly a task for society 2. Mainly a task for the family 3. Both a task for society and the family
		e. Financial support for younger people with children who live below subsistence level	<ol style="list-style-type: none"> 1. Mainly a task for society 2. Mainly a task for the family 3. Both a task for society and the family
2	<p>To what extent do you agree or disagree with each of the following statements?</p>	a. Grandparents should look after their grandchildren if the parents of these grandchildren are unable to do so	<ol style="list-style-type: none"> 1. Agree 2. Neither agree nor disagree 3. Disagree
3	<p>To what extent do you agree or disagree with the following statements?</p>	a. Looking after the home or family is just as fulfilling as working for pay	<ol style="list-style-type: none"> 1. Agree 2. Neither agree nor disagree 3. Disagree
		b. A pre-school child is likely to suffer if his/her mother works	<ol style="list-style-type: none"> 1. Agree 2. Neither agree nor disagree 3. Disagree
		c. Children often suffer because their fathers concentrate too much on their work	<ol style="list-style-type: none"> 1. Agree 2. Neither agree nor disagree 3. Disagree
		d. If parents are divorced it is better for the child to stay with the mother than with the father	<ol style="list-style-type: none"> 1. Agree 2. Neither agree nor disagree 3. Disagree

4	To what extent do you agree or disagree with the following statements?	a. When jobs are scarce, men should have more right to a job than women	1. Agree 2. Neither agree nor disagree 3. Disagree
		b. When jobs are scarce, younger people should have more right to a job than older people	1. Agree 2. Neither agree nor disagree 3. Disagree
		c. When jobs are scarce, people with children should have more right to a job than childless people	1. Agree 2. Neither agree nor disagree 3. Disagree
5	To what extent do you agree or disagree with the following statements?	a. It is okay for married women to work outside of their homes	1. Agree 2. Neither agree nor disagree 3. Disagree
		b. It is okay for a woman who has a child younger than 5 years old to work outside the home if she can leave her young child with close relative	1. Agree 2. Neither agree nor disagree 3. Disagree
		c. It is okay for a woman who has a child younger than 5 years old to work outside the home if she can leave her young child at daycare	1. Agree 2. Neither agree nor disagree 3. Disagree
6	In your opinion:	a. At what age is it appropriate for women to leave a child at daycare or elsewhere and work outside?	___ years and _____ months 95. Never 98. Don't Know 99. Refused
		b. At what age is it appropriate for women to leave a child with a relative and work outside?	___ years and _____ months 95. Never 98. Don't Know 99.. Refused
7	To what extent do you agree or disagree with the following statement?	As a result of the spread of COVID-19 and the closures of nurseries, pre-schools and schools, women should work less and dedicate more time to household responsibilities.	1. Agree 2. Neither agree nor disagree 3. Disagree

1	Please name all nurseries and day care centers in your neighborhood	Specify name:
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EMPLOYER-PROVIDED CHILDCARE QUESTIONNAIRE

INTRODUCTION

Thank you for agreeing to participate in a World Bank Group and Statistics Lebanon study on Family-Friendly Workplaces - Tackling Childcare in Lebanon 2021. You will be asked to respond to this survey on employer-supported childcare in Lebanon. Your inputs will help multiple stakeholders understand the challenges and opportunities that employers face and they will inform dialogue on childcare.

The study will result in a publicly available policy brief with recommendations for public and private sector action to advance family-friendly workplaces in Lebanon.

The survey will take approximately 15 minutes to complete. The reporting of survey results will not, in any form, identify any company or respondent. All responses will be compiled and communicated at the aggregate level.

Section 1: All Respondents					
1. What is the name of your organization? (This information will be kept in the strictest of confidence, and will be anonymized in our report, we only ask it to avoid collecting data twice from the same organization)					
2. Please select the primary industry of your organization: Do not read answers					
<input type="checkbox"/>	Agriculture; forestry and fishing	<input type="checkbox"/>	Mining and quarrying	<input type="checkbox"/>	Manufacturing
<input type="checkbox"/>	Electricity; gas, steam and air conditioning supply	<input type="checkbox"/>	Water supply; sewerage, waste management and remediation activities	<input type="checkbox"/>	Construction
<input type="checkbox"/>	Wholesale and retail trade; repair of motor vehicles and motorcycles	<input type="checkbox"/>	Transportation and storage	<input type="checkbox"/>	Accommodation and food service activities
<input type="checkbox"/>	Information and communication	<input type="checkbox"/>	Financial and insurance activities	<input type="checkbox"/>	Real estate activities
<input type="checkbox"/>	Professional, scientific and technical activities	<input type="checkbox"/>	Administrative and support service activities	<input type="checkbox"/>	Education
<input type="checkbox"/>	Human health and social work activities	<input type="checkbox"/>	Arts, entertainment and recreation	<input type="checkbox"/>	Other service activities
<input type="checkbox"/>	Other please specify _____				
3. What best describes your position in your organization?					
<input type="checkbox"/>	Officer	<input type="checkbox"/>	Manager	<input type="checkbox"/>	Senior Manager
<input type="checkbox"/>	Director	<input type="checkbox"/>	Vice President	<input type="checkbox"/>	Senior Vice President
<input type="checkbox"/>	Director - General	<input type="checkbox"/>	Managing Director	<input type="checkbox"/>	Chief Executive Officer
<input type="checkbox"/>	President	<input type="checkbox"/>	Prefer not to answer	Other please specify.....	
4. What is your sex?					
<input type="checkbox"/>	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>	Prefer not to answer

5. Please select the location of your work site in Lebanon (where you are currently located):					
<input type="checkbox"/>	Beirut	<input type="checkbox"/>	Mount Lebanon	<input type="checkbox"/>	South
<input type="checkbox"/>	Nabatiyeh	<input type="checkbox"/>	Bekaa	<input type="checkbox"/>	Baalbek-Hermel
<input type="checkbox"/>	North	<input type="checkbox"/>	Akaar		
Please specify the region (Caça in each governorate) _____					
6. Please fill out the following information about your organization.					
Total Estimated Number of Employees (Male & Female) in your organization (multiple worksites combined)- (if applicable)					
Estimated % of Female Employees in your organization (multiple worksites combined) – (if applicable)					
Total Estimated Number of Employees (Male & Female) at your specific worksite (where you are located) <i>only if different from above</i>					
Estimated % of Female Employees at your specific worksite (where you are located) <i>only if different from above</i>					
7. Please enter the approximate number of employees that are working parents with children in the 0 to 5 (end) age group in your organization. (Leave blank if you do not know)					
Approximate number of employees with children 0-5 years old					
Of those employees: approximate share of female employees with children 0-5 years old					
8. What is the approximate share of employees who work on a full-time basis?					
<i>*Definition: Full-time jobs in Lebanon have a minimum of 48 working hours/week.</i>					
Male Salaried Full-time				Female Salaried Full-time	
9. Please select the types of shifts at your work site (Select all that apply):					
*Rotating Shifts refers to shifts that rotate or change according to schedule.					
<input type="checkbox"/>	5-day week daytime shifts	<input type="checkbox"/>	6-day week daytime shifts	<input type="checkbox"/>	Evening shifts
<input type="checkbox"/>	Overnight shifts	<input type="checkbox"/>	Rotating shifts*	<input type="checkbox"/>	Extended hour shifts
<input type="checkbox"/>	Weekend shifts				
Note: In this sub-section, we will assess your company's awareness of various legislations in Lebanon that are relevant to family-friendly policies at the workplace.					
10. Are you familiar with the following legislations? (Select all that apply)					
<input type="checkbox"/>	Lebanese Labor Laws	<input type="checkbox"/>	National Social Security Laws	<input type="checkbox"/>	I am not familiar with any such legislation
<input type="checkbox"/>	If any other legislation is not mentioned, please specify:				
11. What is the status of your company informing employees about parental leave and childcare support?					
<input type="checkbox"/>	In place regardless of any legislation or legal provisions requiring companies to inform employees	<input type="checkbox"/>	In place due to legal / legislative or external requirements (labor union/syndicate) to inform employees	<input type="checkbox"/>	Under consideration but awaiting implementation
<input type="checkbox"/>	Yet to consider	<input type="checkbox"/>	Don't know		
12. Does your company offer maternity leave to your female employees?					
<input type="checkbox"/>	Yes, as per Company Policy (Please specify duration in <u>weeks</u>) _____	<input type="checkbox"/>	No paid maternity leave (go to Q.14)		

13. During the paid maternity leave, what percentage of wages do you pay your employees?				
<input type="checkbox"/>	100%	<input type="checkbox"/>	Any other percentage (please specify) _____	
14. What is the length of unpaid maternity leave offered to your female employees?				
<input type="checkbox"/>	No unpaid maternity leave	<input type="checkbox"/>	As per Company Policy (Please specify duration in <u>weeks</u>) _____	
15. Does your company offer paid paternity leave to your male employees?				
<input type="checkbox"/>	Yes, as per Company Policy (Please specify duration in <u>days</u>) _____	<input type="checkbox"/>	No paid paternity leave (go to Q 17)	
16. During the paid paternity leave, what percentage of wages do you pay your employees?				
<input type="checkbox"/>	100%	<input type="checkbox"/>	Any other percentage (please specify) _____	
17. What is the length of unpaid paternity leave offered to your male employees?				
<input type="checkbox"/>	No unpaid paternity leave	<input type="checkbox"/>	As per Company Policy (Please specify duration in <u>days</u>) _____	
18. Please identify which family-friendly policies, programs or resources your organization currently offers, or plans to offer in the next 12 months. (Select all that apply)				
	Currently offers	Doesn't offer but plans to in the next 12 months	Doesn't offer and doesn't plan to in the next 12 months	Don't know
Transportation for employees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation for children of employees (to childcare center)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dedicated paid time off to care for sick children (other than vacation days)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care for school-age children when school is closed – Afterschool programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care for school-age children when school is closed – Summer camps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maternity return to work support / returnship program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A breastfeeding/lactation room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-hour breastfeeding break after shift of five continuous hours of work (In addition to lunch break)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telecommuting: working from home on regular days each month or week (not related to Covid-19 lockdown or other emergency measures)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible work hours: flexibility with start and stop times (while working core hours)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work/life balance programs including training and/or support groups, or other special interest (care for elderly parents or new parents)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A performance appraisal system taking into consideration that the employee was on parental leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For all indicated 'currently offered': Which of those policies, programs or support were introduced as a response to specific needs under COVID

Drop down menu for all selected item in column one

None of the family-friendly policies, programs or resources currently offered were initiated as a result of covid

Other policies, programs, supports offered in past year, specify:

Now we'll move on to talking about childcare support

Examples of childcare options (between 2 months and 5 years) that employers support (but are not limited to) include:

- A daycare center/nursery, whether on the work site or in a near-site location, managed by an employer or an external daycare provider / non-governmental organization. The nursery may belong to the private or public sector, a partnership between the public and private sectors, or a partnership with other employers for a joint daycare center.
- Community based arrangement near employees' homes.
- A childcare voucher to be used at the employee's discretion (e.g. for home- based childcare).
- Back-up or emergency care for children.
- Afterschool and / or during school holidays and / or extended hours sponsorship (early, late, nights, and/or weekends).
- Childcare resources, referral service for parents.

19. What is the status of your organization's childcare support provision? Refer to definition of employer-supported childcare provided above.

<input type="checkbox"/>	Childcare support in place (go to Section 2A)	<input type="checkbox"/>	No childcare support in place (go to Q.20)
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20. Are you or would you be willing to provide childcare support to your employees?

<input type="checkbox"/>	Yes (go to Section 2B)	<input type="checkbox"/>	No (go to Section 2C)	<input type="checkbox"/>	Possibly (go to Section 2C)
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Section 2A: Respondents Providing Childcare Support - This section is for respondents who answered that they have a childcare solution in place. (Q. 19, option 1)

20. You indicated that your organization or work site currently provides support to meet the childcare needs of your employees. What were your organization's primary motivations for offering childcare support? (Select up to three options)

<input type="checkbox"/>	Attracting talent	<input type="checkbox"/>	Employee retention	<input type="checkbox"/>	Employee productivity
<input type="checkbox"/>	Employee absenteeism	<input type="checkbox"/>	Enhancing company reputation		
<input type="checkbox"/>	Don't know	<input type="checkbox"/>	Other, please specify.....		

21. What does your childcare support entail? (Select all that apply) Do not read answers

<input type="checkbox"/>	An on-site daycare center operated by your organization	<input type="checkbox"/>	An on-site daycare center operated by an external daycare provider / NGO	<input type="checkbox"/>	A near-site center in partnership with an established daycare provider (tie-up)
<input type="checkbox"/>	A community-based arrangement near employees' homes	<input type="checkbox"/>	Partnerships with other employers in proximity for a shared daycare center arrangement (consortium)	<input type="checkbox"/>	A childcare allowance or subsidy provided to employees for use in a childcare center of their choice
<input type="checkbox"/>	A partnership with the public sector (for example the Ministry of Social Affairs...)	<input type="checkbox"/>	A center that provides afterschool programs and/or programs during school holidays	<input type="checkbox"/>	A center for extended hours care (early, late, nights, and/or weekends)
<input type="checkbox"/>	Other please specify				

22. What percentage of daycare center usage fees does your organization cover for employees? Do not read answers					
<input type="checkbox"/>	Pay 100 % of daycare center usage fees for employees (go to Q.23 A)	<input type="checkbox"/>	Pay more than 50% but less than 100% of usage fees (go to Q.23 A)	<input type="checkbox"/>	Pay less than 50% of usage fees (go to Q.23 A)
<input type="checkbox"/>	It differs from one employee to the next (go to Q.23 B)	<input type="checkbox"/>	Does not offer financial support (go to Q.24)	<input type="checkbox"/>	Don't know (go to Q.24)
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Other please specify _____
23. What is the cost for your organization of childcare support per child in L.L. per month?					
A. Fixed cost Please enter amount (leave blank if you do not know)		LL		
B. Sliding scale, enter minimum to maximum amount (leave blank if do not know)			From Minimum.....LL To Maximum.....LL		
24. Is your childcare support available to the children of male and female employees? Do not read answers					
<input type="checkbox"/>	Yes, childcare support is available to both male and female employees	<input type="checkbox"/>	No, childcare support is available to female employees only		
<input type="checkbox"/>	Yes, childcare support is available to the children of the employee providing NSSF coverage to their children (of either sex)	<input type="checkbox"/>	Don't know		
25. How many employees approximately are currently using the company-sponsored childcare support? (Leave blank if you do not know)					
Total number of employees using childcare support					
Number of male employees using childcare support					
26. Has offering support to meet the childcare needs of your employees positively impacted your organization in the following areas? (Select all that apply)					
	Yes	No, but I expect it to	No	Don't know	
Attracting and retaining talent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Reducing employee absences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Employees report improvements in their work-life balance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Increased employees' sense of belonging to the workplace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Increasing organizational profitability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. What challenges have you faced in providing day care support during the Covid-19 pandemic? Do not read answers					
<input type="checkbox"/>	Company can no longer afford to provide previous daycare support	<input type="checkbox"/>	Employees cannot afford to pay contributions to daycare support	<input type="checkbox"/>	Employees withdrew children from daycare because of health-related Covid-19 fears/risks
<input type="checkbox"/>	Lockdown and other Covid-19 measures closed daycare facilities for extended periods	<input type="checkbox"/>	Employees are unwilling to contribute to daycare support when facilities are closed for extended periods of time	<input type="checkbox"/>	No challenges
<input type="checkbox"/>	Don't know			<input type="checkbox"/>	Other, specify

28. Do you know why parents of eligible children are not using your childcare support? (Select all that apply) Do not read answers

<input type="checkbox"/>	Non-users prefer other childcare arrangements	<input type="checkbox"/>	Daycare facility hours are not convenient	<input type="checkbox"/>	Daycare facility location is not convenient
<input type="checkbox"/>	Daycare facility is full/no spaces available	<input type="checkbox"/>	Daycare service more expensive than alternative options	<input type="checkbox"/>	Don't know

Other please specify _____

Please Go To Section 3

Section 2B: Respondents Planning to Provide Childcare Facilities

This section is only for respondents who answered that they are in the process of planning/preparing to offer childcare support to their employees, but have not started to do so yet. (Q. 20, option 1)

You indicated that you are in the process of exploring, planning, or developing support to your employees' childcare needs. What are you considering? (Select all that apply) **Do not read answers**

<input type="checkbox"/>	An on-site daycare center operated by your organization	<input type="checkbox"/>	An on-site daycare center operated by an external daycare provider / NGO	<input type="checkbox"/>	A near-site center in partnership with an established daycare provider (tie-up)
<input type="checkbox"/>	A community-based arrangement near employees' homes	<input type="checkbox"/>	Partnerships with other employers in proximity for a shared daycare center arrangement (consortium)	<input type="checkbox"/>	A childcare allowance or subsidy provided to employees for use in a childcare center of their choice
<input type="checkbox"/>	A partnership with the public sector (for example the Ministry of Social Affairs...)	<input type="checkbox"/>	A center that provides afterschool programs and/or programs during school holidays	<input type="checkbox"/>	A center for extended hours care (early, late, nights, and/or weekends)
<input type="checkbox"/>	Don't know	Other please specify _____			

21. What do you expect would be the cost for your organization of childcare per child in L.L. per month?

Please enter amount (leave blank if you do not know)

22. How does your organization plan to support employees with childcare costs at your work site? Do not read answers

<input type="checkbox"/>	Pay 100 % of daycare center usage fees for employees	<input type="checkbox"/>	Pay more than 50% but less than 100% of usage fees	<input type="checkbox"/>	Pay less than 50% of usage fees
<input type="checkbox"/>	Does not offer financial support	<input type="checkbox"/>	Don't know	Other please specify _____	

23. Are there existing quality, affordable daycare centers near your work site?							
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Don't know		
24. Did you encounter any of the following challenges? Select all that apply							
<input type="checkbox"/>	Financial (go to Q.26)	<input type="checkbox"/>	Legal/ Regulatory (go to Q.27)	<input type="checkbox"/>	Provision related (go to Q.28)	<input type="checkbox"/>	Did not encounter any challenges (go to Q.29)
26. Which of the following financial challenges, if any, have you encountered as you explore, plan for and/or develop a solution to help meet the childcare needs of your employees? (Select all that apply)							
<input type="checkbox"/>	Set up costs (infrastructure) for an on-site daycare center	<input type="checkbox"/>	Childcare center's operating costs	<input type="checkbox"/>	Additional administrative costs to the organization		
<input type="checkbox"/>	Cost of subsidizing the service	<input type="checkbox"/>	Other please specify _____				
27. Which of the following, if any, legal/regulatory challenges have you encountered as you explore, plan for, and/or develop a solution to help meet the childcare needs of your employees? (Select all that apply)							
<input type="checkbox"/>	Lack of clarity on minimum operations standards, including minimum standards of quality childcare	<input type="checkbox"/>	Lack of clarity on the organization's liability related to the care of children in the daycare center	<input type="checkbox"/>	Lack of clarity on license application, processing times and/or costs		
<input type="checkbox"/>	Lack of clarity on Covid-19 related safety and health regulations			<input type="checkbox"/>	Lack of clarity on implications on liability related to supporting care of children in relation to Covid-19 pandemic		
<input type="checkbox"/>	Have not encountered any of these challenges			<input type="checkbox"/>	Other please specify _____		
28. Which of the following provision-related challenges have you encountered as you explore, plan for, and/or develop a solution to help meet the childcare needs of your employees? (Select all that apply)							
<input type="checkbox"/>	Identifying existing quality, affordable and conveniently located daycare centers	<input type="checkbox"/>	Finding a childcare provider to manage/ run your organization's daycare center	<input type="checkbox"/>	Finding an existing daycare center that matches employees' work hours		

<input type="checkbox"/>	Lack of space to build an on-site daycare center	<input type="checkbox"/>	Nature of work at site causes safety concerns for an on-site daycare center	<input type="checkbox"/>	Creating and administering a childcare voucher program
<input type="checkbox"/>	Including all qualifying children	<input type="checkbox"/>	Have not encountered any of these challenges	<input type="checkbox"/>	Other please specify _____

29. What resources have you found to be most helpful while preparing to offer / offering childcare solutions to your employees? (Select all that apply)

<input type="checkbox"/>	Talking to other employers that already offer childcare solutions	<input type="checkbox"/>	Reading case studies and other materials about employer-supported childcare solutions	<input type="checkbox"/>	Talking to childcare providers
<input type="checkbox"/>	Accessing international guidelines and resources to support implementation	Other please specify _____			

Please Go To Section 3

Section 2C: Respondents Not Planning to Provide a Childcare Solution

This section is for respondents who do not have plans to offer a childcare solution. (Q. 20, option 2 and 3)

21. What are the top reasons why your organization is not planning to provide childcare support to your employees? (Select all that apply) Do not read answers

<input type="checkbox"/>	Provision related challenges (go to Q.24)	<input type="checkbox"/>	Case for employee retention is not pressing in light of high unemployment & low labor demand	<input type="checkbox"/>	Number of employees is too small to justify measure to support childcare
<input type="checkbox"/>	Private companies provide employees' children with support stipulated by NSSF laws	<input type="checkbox"/>	Expected financial cost of childcare support is too high (go to Q.22)	<input type="checkbox"/>	The impact of the crises (Economic & Covid-19) has made any new expenditure unaffordable
<input type="checkbox"/>	Lack of support among company's leadership	<input type="checkbox"/>	No demand from employees for childcare support	<input type="checkbox"/>	Feel do not have the administrative and technical competence to do so

<input type="checkbox"/>	Legal and regulatory related challenges (go to Q.23)	<input type="checkbox"/>	The company does not intend to assume responsibility (go to Q.25)	<input type="checkbox"/>	Do not know	<input type="checkbox"/>	Other please specify _____
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22. Which of the following financial challenges, if any, have prevented your organization from offering childcare support to your employees? (Select all that apply)

<input type="checkbox"/>	Set up costs (infrastructure) for an on-site daycare center	<input type="checkbox"/>	Childcare center's operating costs	<input type="checkbox"/>	Additional administrative costs to the organization	
<input type="checkbox"/>	Cost of subsidizing the service	Other please specify _____				

23. Which of the following, if any, legal / regulatory challenges have prevented planning for a daycare? (Select all that apply)

<input type="checkbox"/>	Lack of clarity on minimum operations standards, including minimum standards of quality childcare	<input type="checkbox"/>	Lack of clarity on the organization's liability related to the care of children in the daycare center	<input type="checkbox"/>	Lack of clarity on license application, processing times and/or costs
<input type="checkbox"/>	Lack of clarity on Covid-19 related safety and health regulations			<input type="checkbox"/>	Lack of clarity on implications on liability related to supporting care of children in relation to Covid-19 pandemic
<input type="checkbox"/>	Have not encountered any of these challenges			<input type="checkbox"/>	Other please specify _____

Other please specify _____

24. Which of the following provision-related challenges have prevented planning for a daycare? (Select all that apply)

<input type="checkbox"/>	Identifying existing quality, affordable and conveniently located daycare centers	<input type="checkbox"/>	Finding a childcare provider to manage / run your organization's daycare center	<input type="checkbox"/>	Finding an existing daycare center that matches employees' work hours
<input type="checkbox"/>	Lack of space to build an on-site daycare center	<input type="checkbox"/>	Nature of work at site causes safety concerns for an on-site daycare center	<input type="checkbox"/>	Creating and administering a childcare voucher program
<input type="checkbox"/>	Including all qualifying children	<input type="checkbox"/>	Have not encountered any of these challenges	<input type="checkbox"/>	Other please specify _____

25. Which of the following resources, if any, would help your organization offer a solution to help meet the childcare needs of your employees? (Select all that apply)

<input type="checkbox"/>	Financial support to help offset the cost of planning and setting up a daycare center or another solution	<input type="checkbox"/>	Guidance to help with planning a childcare solution	<input type="checkbox"/>	Guidance to help choose an external daycare service provider
<input type="checkbox"/>	An enabling policy environment specific to childcare facility requirements	<input type="checkbox"/>	Guidance on the characteristics of high-quality care	<input type="checkbox"/>	Guidelines on daycare center standards
<input type="checkbox"/>	A directory of existing daycare centers	<input type="checkbox"/>	Making an accurate estimate of workforce future daycare center demand	<input type="checkbox"/>	Information on liability of providing a daycare center
<input type="checkbox"/>	Higher number of companies providing childcare support would encourage the company to also offer it	<input type="checkbox"/>	Not applicable	<input type="checkbox"/>	Other please specify _____

Please Go To Section 3

Section 3: All Respondents (Feedback). This section is for all respondents regardless of their previous responses.

29. (if 2A) or 30. (if 2B) or 26. (if 2C) Have you solicited or received feedback from employees on their needs and / or preferences for a solution to help meet their childcare needs?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No (End survey)	<input type="checkbox"/>	Solicited but did not receive any feedback (End survey)
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<input type="checkbox"/>	Don't know (End survey)				
30. (if 2A) or 31. (if 2B) or 27. (if 2C) If you answered "Yes" to previous question, how did you receive the feedback? (Select all that apply) Do not read answers					
<input type="checkbox"/>	Employee survey, (go to Q.31)	<input type="checkbox"/>	One-on-one conversations - HR-led (End survey)	<input type="checkbox"/>	Employee focus groups (End survey)
<input type="checkbox"/>	One-on-one conversations during the time parental leave was discussed (End survey)	<input type="checkbox"/>	One-on-one conversations - Manager-led (End survey)	<input type="checkbox"/>	One-on-one conversation during new hire onboarding (End survey)
Other please specify _____					
31. (if 2A) or 32. (if 2B) or 28. (if 2C) If employee survey conducted: Specify when last survey conducted.....(year)					
32. (if 2A) or 33. (if 2B) or 29. (if 2C) Based on feedback from your employee survey, focus groups and / or conversations, what was the preferred childcare arrangement? (Please select up to 3)					
<input type="checkbox"/>	On-site daycare center	<input type="checkbox"/>	Care by a non-family member in their home (e.g., nanny, housekeeper, etc.)	<input type="checkbox"/>	Near-site daycare center
<input type="checkbox"/>	Care by non-family member in the community	<input type="checkbox"/>	Daycare center located near employees' home	<input type="checkbox"/>	Partnering up with an external daycare service provider
<input type="checkbox"/>	Care by family member in their hometown/ village (in cases where employees have left the child with family)	<input type="checkbox"/>	No preference	<input type="checkbox"/>	Not applicable
Other please specify _____					

ANNEX 7.

PROFILES OF SURVEYED BUSINESSES

Worksite Location

The 100 businesses surveyed in this sample were distributed across Mount Lebanon (72 percent), Beirut (24 percent), Nabatiyeh-South (2 percent), Beqaa (1 percent), and North (1 percent). Almost half of the companies in Mount Lebanon are in El Metn caza. The majority of respondents were female (71 percent). Slightly more than half were human resource professionals (53 percent) while 32 percent were in upper management and directorial positions. Out of the surveyed upper management positions (vice president, senior manager, director, and manager), almost half were occupied by female respondents.

Economic sectors

The key industries were the wholesale and retail trade (38 percent) and manufacturing (36 percent) together representing 74 percent of the total sample. The remaining 26 percent were divided across several sectors of economic activity including health and social activities (5 percent), professional, scientific, and technical activities (5 percent), construction (4 percent), accommodation and food service activities (3 percent), financial and insurance activities (3 percent), information and communication (3 percent), transportation and storage (2 percent), and real estate activities (1 percent).

Firm Size (number of employee)

Businesses were categorized by size according to the number of people employed (Table A1). Half of the sample is comprised of small enterprises, 33 percent large, and 17 percent medium sized. Micro sized companies were excluded from the scope of this study as they typically employ a lower number of employees and as such have a lower demand for childcare services. To ensure the experience of at least a few companies that do provide childcare solutions is captured, the sample targeted a higher percentage of medium (17 percent) and large firms (33 percent) than national averages of company sizes across Lebanon (4-6 percent and 5-7 percent respectively).

TABLE A7. 1. THE DISTRIBUTION OF CATI BUSINESS SURVEY EMPLOYERS ACCORDING TO SIZE

Size category	Number of employees	Number of Companies in Sample	Percentage of total sample size	National percentages of company sizes ^[1]
Small	10 to 50	50	50%	34%
Medium	51 to 100	17	17%	4-6 %
Large	101 to 1701	33	33%	5-7 %

^[1] Ministry of Economy and Trade & United Nations Development Programme, 2014. The remaining 53-55% are micro sized companies.

Overall, the surveyed companies employed nearly twice as many men (68 percent) as women (32 percent). Mothers comprised 29.2 percent of working parents with young children aged 0-5 years old (Figure A7.1 and A7.2). The most recent national labor survey showed a relatively comparable rate of female labor force participation of 29.3 percent.¹²³

123 Central Administration for Statistics in Lebanon & International Labor Organization, 2019.

FIGURE A7.1. DISTRIBUTION OF EMPLOYEES BY GENDER



FIGURE A7.2. DISTRIBUTION OF WORKING PARENTS BY GENDER



Overall, it was seen there is little differentiation between male and female employment by size of company and number of working sites (Table A7.2). The majority of women and men worked in large companies at proportionally equivalent levels (84 percent). In a similar vein, the majority of both men (62.2 percent) and women (61.8 percent) worked for companies with multiple sites. It should be borne in mind that large companies comprised a third (33 percent) of the sample. Under 10 percent of both women and men worked for small enterprises as well as for medium sized companies.

TABLE A7.2. MALE AND FEMALE EMPLOYMENT BY COMPANY SIZE AND WORKSITES

Employees by company size (% by column)					Employees by gender and number of firms' worksites (% by column)		
Company size	Males	Females	Males with 0-5 children	Females with 0-5 children	Worksite	Males	Females
Small	9%	6%	16%	14%	Single	38%	38%
Medium	7%	10%	6%	24%	Multiple	62%	62%
Large	84%	84%	78%	62%	Total	100%	100%
Total	100%	100%	100%	100%			

The only notable divergence was that a near quarter of working mothers (23.9 percent) with young children (0-5 years) were employed by medium sized companies compared to just 5.8 percent of fathers with children of a similar age.

On further examination of the workforce distribution of surveyed firms, the highest female to male share was found in medium sized companies operating from multiples worksites (48 percent). However, this was coupled with the lowest share of employees with children aged 0-5 years (3 percent) (Table A7.3).

TABLE A7.3. PERCENTAGES OF EMPLOYEES AND EMPLOYEES WITH CHILDREN 0-5 BY COMPANY SIZE, WORKSITE, AND GENDER

Company size	Company Worksite	Employees (% by row)			Employees with children 0-5 years old		
		Males	Females		Males (% of male employees)	Females (% of female employees)	TOTAL (% of total employees)
Small (n=50)	Multiple	64%	36%		12%	9%	11%
	Single	74%	27%		11%	13%	14%
Medium (n=17)	Multiple	52%	48%		3%	3%	3%
	Single	58%	42%		7%	17%	11%
Large (n=33)	Multiple	63%	37%		6%	2%	4%
	Single	60%	40%		9%	6%	8%
Total	All sites	62%	38%		7%	5%	6%

In comparison, medium sized firms with one single worksite had the highest share of mothers with young children (17 percent), compared with all other size and site combinations. In small and large enterprises, the share of working mothers and fathers with children 0-5 years was more comparable. For example, it can be seen that 2 percent of these mothers and 6 percent of these fathers worked for large companies with multiple sites.

The aggregate number of female employees in the companies of the entire sample is 6,081 and concentrated in wholesale and retail and trade (33 percent) and manufacturing (29 percent) in line with the key industries represented in this sample. Although only 5 percent of businesses in this sample operates in the health and social work activities sector, it disproportionally employs 23 percent (1,373) of the total number of female employees at locations in Beirut, Sidon, and Keserwan. This is followed by the financial and insurance sector and accommodation and food services employing 11 percent (694) and 1.4 percent (84) women, respectively (Table A7.4). Overall, four of the five top employment sectors for women were service oriented economic activities.

TABLE A7.4. TOTAL NUMBER OF FEMALE EMPLOYEES IN ALL OF THE SAMPLED COMPANIES BY ECONOMIC SECTOR AND CAZA

Caza	Number of Female Employees											
	Beirut	El Metn	Keserwan	Sidon	Baabda	Aley	Chouf	Zahle	Jbeil	Batroun	Nabatie	Total
Wholesale and retail trade	1,070	589	55	-	240	-	41	-	-	-	-	1,995
Manufacturing	89	640	756	-	15	120	74	33	-	8	3	1,738
Human health and social work activities	618	300	-	455	-	-	-	-	-	-	-	1,373
Financial and insurance activities	580	114	-	-	-	-	-	-	-	-	-	694
Accommodation and food service activities	60	4	-	-	-	-	-	-	20	-	-	84
Information and communication	74	-	-	-	2	-	-	-	-	-	-	76
Real estate activities	-	45	-	-	-	-	-	-	-	-	-	45
Transportation and storage	20	10	-	-	-	-	-	-	-	-	-	30
Professional, scientific and technical activities	4	21	-	-	-	-	-	-	-	-	-	25
Construction	20	1	-	-	-	-	-	-	-	-	-	21
Total	2,535	1,724	811	455	257	120	115	33	20	8	3	6,081

TABLE A7.5. FEMALE EMPLOYEES IN ALL OF THE SAMPLED COMPANIES BY ECONOMIC SECTOR AND CAZA (%)

Economic sector	Beirut	El Metn	Keserwan	Sidon	Baabda	Aley	Chouf	Zahle	Jbeil	Batroun	Nabatie	Total
Wholesale and retail trade	42.20%	34.20%	6.80%	-	94.20%	-	35.70%	-	-	-	-	32.80%
Manufacturing	3.50%	37.105	93.20%	-	5.805	100%	64.30%	100%	-	100%	100%	28.60%
Human health and social work activities	24.40%	17.40%	-	100%	-	-	-	-	-	-	-	22.60%
Financial and insurance activities	22.90%	6.60%	-	-	-	-	-	-	-	-	-	11.40%
Accommodation and food service activities	2.40%	0.20%	-	-	-	-	-	-	100%	-	-	1.40%
Information and communication	2.90%	-	-	-	-	-	-	-	-	-	-	1.20%
Real estate activities	-	2.60%	-	-	-	-	-	-	-	-	-	0.70%
Transportation and storage	0.80%	0.60%	-	-	-	-	-	-	-	-	-	0.50%
Professional, scientific and technical activities	0.20%	1.20%	-	-	-	-	-	-	-	-	-	0.40%
Construction	0.80%	0.10%	-	-	-	-	-	-	-	-	-	0.30%
Total	100%											

The two-leading female employers were large scale single site medical centers situated in the urban centers of Sidon (455 / 7.5 percent) and Beirut (450 / 7.4 percent) respectively. This was closely followed by the two large multiple sites companies, a food manufacturer (425 / 6.9 percent) and a financial and insurance company (420 / 6.8 percent) employing near equivalent numbers (Figure A7.3). There is a marked, almost 50 percent drop in the number of females employed between the medical center in Beirut and third top single site employers of female employees, a fast-moving consumer goods retail company (FMCG), in El Metn (320 / 5.2 percent). This would seem to confirm that economic activity as well as company size, have a bearing on female employment.

FIGURE A7.3. EMPLOYERS WITH THE HIGHEST NUMBER OF FEMALE EMPLOYEES BY NUMBER OF FIRMS' WORKSITES

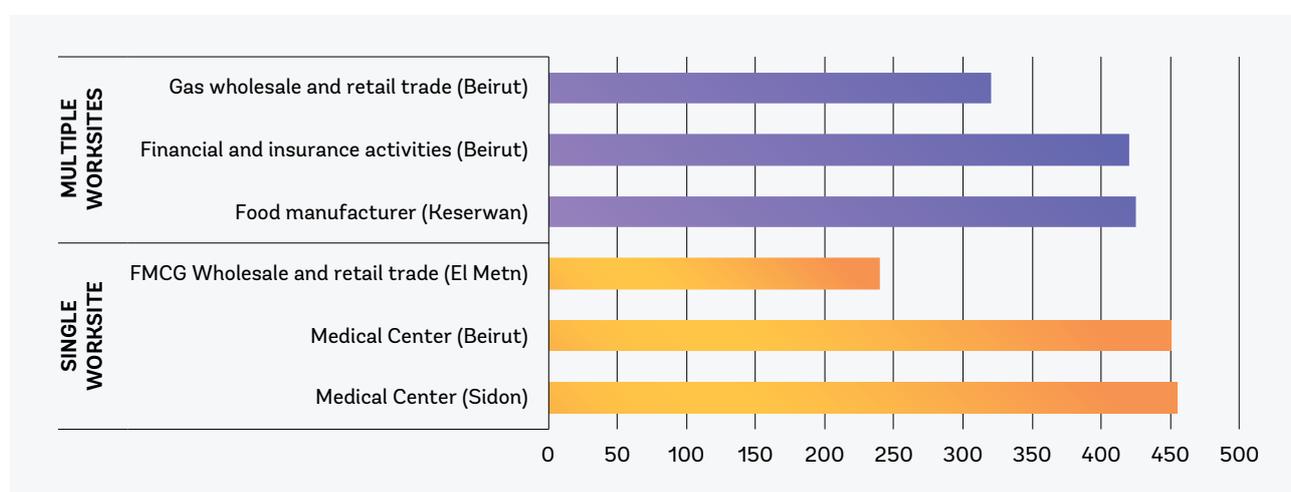


TABLE A7.6. FREQUENCY AND PERCENTAGE OF EMPLOYEES AND EMPLOYEES WITH CHILDREN 0-5 YEARS IN MULTIPLE AND SPECIFIC WORKSITES BY PROVISION OF CHILDCARE SUPPORT STATUS AND GENDER

Childcare Status	Worksite	Employees (% by row)			Employees with children 0-5 years old		
		Males	Females	TOTAL	Males (% of male employees)	Females (% of female employees)	TOTAL (% of total employees)
Not Willing to Provide (n=80)	Multiple	3371 (65%)	1847 (35%)	5218	311 (9%)	42 (2%)	353 (7%)
	Single	3179 (60%)	2113 (40%)	5292	308 (10%)	183 (9%)	491 (9%)
Possibly willing to provide (n=15)	Multiple	2363 (64%)	1353 (36%)	3716	28 (1%)	24 (1%)	52 (1%)
	Single	347 (74%)	123 (26%)	470	49 (14%)	9 (7%)	58 (12%)
In Place (n=5)	Multiple	484 (47%)	556 (53%)	1040	14 (3%)	30 (5%)	44 (4%)
	Single	255 (74%)	89 (26%)	344	11 (4%)	9 (10%)	20 (6%)
Total	All sites	9999 (62%)	6081 (38%)	16080	721 (7%)	297 (5%)	1018 (6%)

Key Informant Interviews (KIs)

- HR Managers of two large private sector companies operating in the manufacturing and health services sector
- Managers of the CCIA-BML and that of Sidon and the South (CCIA-S)
- Heads of the 'Syndicate of Nursery Owners' and the 'Syndicate of Specialized Nurseries' in Lebanon and a large nursery situated in Mount Lebanon
- Heads of departments relevant to early childhood education (ECE) at the Ministry of Education (MEHE), Ministry of Social Affairs (MOSA), and Ministry of Public Health (MOPH)

Female Employment in Lebanon

According to the Labor Force and Household Living Conditions survey (2018-2019), the three economic activity sectors where most women in Lebanon are concentrated are "activities of households as employers" (24 percent), education (21 percent) and wholesale and retail trade (15 percent).

TABLE A7.7. PERCENTAGE OF EMPLOYED (AGED 15 YEARS AND ABOVE) BY ECONOMIC ACTIVITY SECTOR AND SEX, LEBANON, 2018

Economic activity sector	Women	Men	Women & Men
Activities of households as employers; undifferentiated goods-and services-producing activities of households for own use	23.7%	0.8%	7.8%
Education	20.5%	3.4%	8.6%
Wholesale and retail trade; repair of motor vehicles and motorcycles	14.5%	22.2%	19.8%
Human health and social work activities	8.8%	2.4%	4.4%
Manufacturing	5.8%	13.1%	10.9%
Professional, scientific and technical activities	4.2%	3.5%	3.8%
Public administration and defense	4.2%	12.4%	9.9%
Other service activities	4.1%	2.9%	3.2%
Financial and insurance activities	3.6%	1.9%	2.5%
Accommodation and food service activities	2.2%	5.3%	4.4%

Economic activity sector	Women	Men	Women & Men
Administrative and support service activities	1.7%	3.7%	3.1%
Information and communication	1.6%	1.6%	1.6%
Agriculture, forestry and fishing	1.5%	4.4%	3.6%
Activities of extraterritorial organizations and bodies	0.9%	0.5%	0.6%
Construction	0.7%	12.4%	8.9%
Transportation and storage	0.7%	6.8%	4.9%
Arts, entertainment and recreation	0.7%	0.9%	0.8%
Real estate activities	0.2%	0.4%	0.4%
Water supply; sewerage, waste management and remediation activities	0.1%	0.6%	0.4%
No response	0.1%	0.1%	0.1%
Electricity, gas, steam and air conditioning supply	0.0%	0.4%	0.3%
Mining and quarrying	0.0%	0.0%	0.0%
Total	100%	100%	100%

Source: LFHLCs 2018_2019 (<http://www.cas.gov.lb/index.php/demographic-and-social-en/laborforce-en>)

In three sectors, women comprise more than 50 percent of the workforce. These sectors are “activities of household as employers” (93 percent), education (72 percent) and human health and social work (61 percent). In fourth place comes financial and insurance activities (45 percent) and activities of extraterritorial organizations and bodies (45 percent). In the two main sectors sampled for this survey, wholesale and retail trade, and manufacturing, women represent 22 percent and 16 percent of the workforces respectively.

TABLE A7.8. DISTRIBUTION OF EMPLOYED WOMEN AND MEN (AGED 15 YEARS AND ABOVE) ACCORDING TO ECONOMIC ACTIVITY SECTOR AND SEX, LEBANON, 2018 (%)

Economic activity sector	Women	Men
Activities of households as employers; undifferentiated goods-and services-producing activities of households for own use	93%	7%
Education	72%	28%
Human health and social work activities	61%	39%
Financial and insurance activities	45%	55%
Activities of extraterritorial organizations and bodies	45%	55%
Other service activities	39%	61%
Professional, scientific and technical activities	34%	66%
Information and communication	30%	70%
No response	25%	75%
Arts, entertainment and recreation	24%	76%
Wholesale and retail trade; repair of motor vehicles and motorcycles	22%	78%
Real estate activities	20%	80%
Administrative and support service activities	17%	83%
Manufacturing	16%	84%
Accommodation and food service activities	15%	85%

Economic activity sector	Women	Men
Agriculture, forestry and fishing	13%	87%
Public administration and defense; compulsory social security	13%	87%
Mining and quarrying	11%	89%
Water supply; sewerage, waste management and remediation activities	5%	95%
Electricity, gas, steam and air conditioning supply	5%	95%
Transportation and storage	4%	96%
Construction	3%	97%
Total	30%	70%

Source: LFHLCs 2018_2019 (<http://www.cas.gov.lb/index.php/demographic-and-social-en/laborforce-en>)

ANNEX 8.

CONSTRUCTION OF SCORE OF STRUCTURAL QUALITY ELEMENTS

The Checklist of (mostly) structural quality elements comprise a total of 69 questions. The total number of childcare providers used to compute the index is $N = 285$. The checklist score groups five main domains (sub-indexes) as follows:

1. Infrastructure sub-Index (28 questions)
2. Human resources sub-Index (12 questions)
3. Curriculum, materials, and learning sub-Index (9 questions)
4. Opportunities for parental involvement sub-Index (3 questions)
5. Safety and sanitary precautions sub-Index (17 questions)

The first sub-index, infrastructure, includes indicators such as whether the space is in good repair and if there is no malodor in the classrooms. The second sub-index, HR quality, includes four indicators, including caregivers' minimum credentials include higher school or university, and if a small group of children is primarily cared for by one designated staff member. The third sub-index, materials, curriculum, and learning, includes indicators related to whether children are served food and if there are any provisions for children with special needs. The fourth sub-index on parental involvement, checks whether the facility has systems in place for parents to provide/receive feedback as well as lines of center-parents communication. Finally, the sub-index on safety and sanitary protocols assesses availability of cleaning practices (e.g., hand washing, disinfecting surfaces) as well as safety precautions such as childproofing protocols. Most of the items were assessed through direct facility observation conducted by the enumerator, and some other items correspond to direct answers from the provider representative (and as such, may be subject to self-reporting bias).

The proposed checklist of structural quality elements is loosely based on the ECERS-R and ITERS-R family of instruments but adjusted to focus specifically on care (rather than education). This family of instruments collects detailed information on center infrastructure, health and nutrition protocols, safety factors, the availability and accessibility of learning materials, the types of activities carried out during the day, etc. (López, Araujo & Tomé (2016), providing a menu of available tools for the measurement of the quality of childcare centers serving infants and toddlers ages 0 to 3 years). The checklist is also based on previous mixed methods studies on childcare supply conducted by the World Bank in Turkey, the Western Balkans, and the South Caucasus (see World Bank 2019; World Bank 2015).

Since the detailed survey (CAPI) collection took place during a government-imposed closure for public providers, there is complete data to estimate the score for private and semi-private providers, but in the case of public ones some variables had to be excluded from the checklist.

Each of the 5 sub-indexes is comprised of variables (see table below) where each takes a value between 0 and 1. The overall score is calculated using the principal component analysis (PCA) method. PCA is a variable reduction technique and is employed to get a single score out of many correlated variables to ease the interpretation of a number of variables. PCA is performed on each sub-index according to the steps below.

Step 1: Each variable informing a sub-index is given a weight (PCA coefficient). Each principal component is the weighted linear combination of the variables. The first principal component explains the largest amount of variation in the data.

Step 2: Multiply the value of each variable with its associated weight and aggregate the sum products of all variables to generate a sub-index score for each daycare center.

Step 3: Based on the sub-index scores for each of the daycare centers in step 2, compute percentiles to standardize these scores between 0-100.

Step 4: Repeat steps 1-3 for each sub-index and an overall PCA is performed on the five sub-index scores. Percentiles are calculated for the overall quality index and each daycare center will have a score between 0 and 100.

TABLE A8.1. ITEMS INCLUDED IN THE CHECKLIST

Note: Items marked with (*) are mentioned (with explicit regulations or rather general guidelines) in Lebanese Decree No. 4876 which defines the terms of licensing.

Questions included	Infras- structure quality index	Human resource quality index	Curriculum, materials, and learning quality index	Opportunities for parental involvement quality index	Safety and sanitary precautions quality index
1. Total indoor area m2	X				
2. Indoor space per child allowed*	X				
3. There is an outdoor space	X				
4. Sufficient indoor space	X				
5. Indoor space is in good repair/clean/and well maintained*	X				
6. Lighting*	X				
7. Ventilation*	X				
8. No unpleasant odors	X				
9. Temperature control	X				
10. Accessible for disabled	X				
11. Room arranged for staff to view all children at once	x				
12. Sufficient child sized furniture*	X				
13. There are clean, appropriately sized toilets for staff members*	X				
14. Clean and appropriately sized toilets for potty-trained children*	X				
15. Items displayed at children's eye level	X				
16. Facilities comfortable and nurturing	X				
17. Kitchen equipped for food preparation, sterilizing milk & other utensils with large enough fridge*	X				
18. Floors and rugs smooth and skid proof*	X				
19. Ground/1 st floor building	X				
20. Total area not < 200 m2	X				
21. Separate classes for different age groups*	X				
22. 1 movable bed per walking child*	X				
23. There is a separate dining area with child sized Tables & chairs*	X				

Questions included	Infras- tructure quality index	Human resource quality index	Curriculum, materials, and learning quality index	Opportunities for parental involvement quality index	Safety and sanitary precautions quality index
24. Sleeping room for children under 1* X					
25. Play area space*	X				
26. Play area easily accessible to children in groups	X				
27. Play area is generally safe with mats under swings, fenced area, etc.	X				
28. Sufficient materials for physical activity	X				
29. Teacher and assistant to child capacity ratio*		X			
30. Training for caregivers is available		X			
31. Caregiver performance evaluation		X			
32. New caregiver training is available		X			
33. Nursery have at least 1 nurse/nurse assistant*		X			
34. Caregivers or assistants less than 60-year-old		X			
35. Highest education degree: director has at least a bachelor's degree or above in ECE, soc/psych/health sciences/business mgmt/economic sciences'*		X			
36. Caregivers/administrative staff should at least have BT*		X			
37. At least one teacher on staff needs to have a degree in education*		X			
38. % Of caregivers (primary caregivers, assistants) having more than 5 years of experience in the sector		X			
39. % Of caregivers (primary caregivers, assistants) have a contract (regardless of temp, perm, internship)		X			
40. % Of caregivers (primary caregivers, assistants) having more than 2 years of experience in the nursery		X			
41. Are children served food?			X		
42. Is there an educational curriculum?			X		
43. In how many languages is the educational curriculum taught?			X		
44. Program or curriculum developed to ensure children's development			X		
45. Organized and convenient storage for toys			X		
46. Toys clean and in good repair			X		
47. Selection of age-appropriate books/toys/development enrichment materials like puzzles and blocks			X		
48. Age-appropriate materials for children's active play, such riding toys, shovels, and buckets)			X		
49. Child discipline methods/style used in this center?			x		

Questions included	Infra-structure quality index	Human resource quality index	Curriculum, materials, and learning quality index	Opportunities for parental involvement quality index	Safety and sanitary precautions quality index
50. Two-way feedback systems in place to give and receive from parents				X	
51. Communication with parents during COVID-19 closures?				X	
52. Opportunities for parental interaction				X	
53. Healthy hand washing habits encouraged with children					X
54. Clean all surfaces with disinfectants regularly					X
55. Medicines/ cleaning supplies/ other materials labeled "keep out of children's reach" not accessible to children					X
56. Thumbtacks/staples/scissors out of children's reach					X
57. Heavy furniture is anchored					X
58. No drowning hazards					X
59. Childproof doors and windows					X
60. Stairway gates locked when children nearby					X
61. Doorways to unsupervised or unsafe areas are closed and locked unless used for emergency exits					X
62. Emergency exits are clearly marked and identified					X
63. No storing explosive and flammable materials in the same building					X
64. Walls and ceilings have no peeling paint w/o cracked or falling plaster & free of crumbling asbestos					X
65. Safety covers on electric outlets					X
66. Electric cords out of children's reach					X
67. No free-standing heaters in use					X
68. Pipes, radiators, and other hot surfaces out of reach					X
69. Sharp edges covered					X

TABLE A8.2. MEAN SCORE AND CONFIDENCE INTERVALS FOR QUALITY CHECKLIST, PRIVATE PROVIDERS

Dimension	Mean	Std. Deviation	95% Confidence Interval for Mean	
			Lower Bound	Upper Bound
Infrastructure	53.132	28.296	49.439	56.824
Safety and Sanitary precautions	52.604	24.625	49.390	55.817
Opportunities for parental involvement	52.578	28.747	48.826	56.329
Curriculum, materials, and learning	50.356	27.813	46.727	53.986
Human resources	47.738	27.469	44.153	51.322
Overall	49.005	27.951	45.358	52.653

TABLE A8.3. MEAN SCORE IN EACH VARIABLE OF CHECKLIST, PRIVATE PROVIDERS

Variable	Private
1. Total indoor area m2	0.90
2. Indoor space per child allowed	1.00
3. There is an outdoor space	0.79
4. Sufficient indoor space	0.99
5. Indoor space is in good repair/clean/and well maintained	0.98
6. Adequate lighting	0.99
7. Adequate ventilation	1.00
8. No unpleasant odors	0.98
9. Adequate temperature control	0.99
10. Accessible for disabled	0.21
11. Room arranged for staff to view all children at once	0.99
12. Sufficient child sized furniture	1.00
13. There are clean, appropriately sized toilets for staff members	1.00
14. Clean and appropriately sized toilets for potty-trained children	0.99
15. Items displayed at children's eye level	0.95
16. Facilities comfortable and nurturing	1.00
17. Kitchen equipped for food preparation, sterilizing milk & other utensils with large enough fridge	0.92
18. Floors and rugs smooth and skid proof	0.99
19. Ground/1 st floor building	0.97
20. Total area not < 200 m2	0.97
21. Separate classes for different age groups	0.92
22. 1 movable bed per walking child	0.87
23. There is a separate dining area with child sized tables & chairs	0.93
24. Sleeping room for children under 1	0.72
25. Play area space	0.97
26. Play area easily accessible to children in groups	0.96
27. Play area is generally safe with mats under swings, fenced area, etc.	0.96
28. Sufficient materials for physical activity	0.96
29. Teacher and assistant to child capacity ratio	0.56
30. Trained caregivers	0.52
31. Caregiver performance evaluation	0.93
32. New caregiver training	0.73
33. Nursery have at least 1 nurse/nurse assistant	0.72
34. Caregivers or assistants less than 60-year-old	0.99
35. Director has at least a bachelor degree or above in ECE, soc/psych/health sciences/ of business mgmt/ economic sciences	0.13
36. Caregivers/administrative staff should at least have BT	0.98
37. At least one teacher on staff needs to have a degree in education	0.97

Variable	Private
38. % of caregivers (primary caregivers, assistants) having more than 5 years of experience in the sector	0.42
39. % of caregivers (primary caregivers, assistants) have a contract (regardless of temp, perm, internship)	0.71
40. % of caregivers (primary caregivers, assistants) having more than 2 years of experience in the nursery	0.82
41. Are children served food?	0.98
42. Is there an educational curriculum?	0.87
43. In how many languages is the educational curriculum taught?	0.85
44. Program or curriculum developed to ensure children's development	0.64
45. Organized and convenient storage for toys	1.00
46. Toys clean and in good repair	1.00
47. Selection of age-appropriate books/toys/development enrichment materials like puzzles and blocks	1.00
48. Age-appropriate materials for children's active play, such riding toys, shovels, and buckets)	1.00
49. Child discipline methods/style used in this center?	0.61
50. Two-way feedback systems in place to give and receive from parents	0.31
51. Communication with parents during COVID-19 closures?	0.28
52. Opportunities for parental interaction	0.10
53. Healthy hand washing habits encouraged with children	0.90
54. Clean all surfaces with disinfectants regularly	0.96
55. Medicines/ cleaning supplies/ other materials labeled "keep out of children's reach" not accessible to children	1.00
56. Thumbtacks/staples/scissors out of children's reach	1.00
57. Heavy furniture is anchored	1.00
58. No drowning hazards	0.98
59. Childproof doors and windows	1.00
60. Stairway gates locked when children nearby	1.00
61. Doorways to unsupervised or unsafe areas are closed and locked unless used for emergency exits	0.96
62. Emergency exits are clearly marked and identified	0.89
63. No storing explosive and flammable materials in the same building	0.95
64. Walls and ceilings have no peeling paint w/o cracked or falling plaster & free of crumbling asbestos	0.99
65. Safety covers on electric outlets	0.98
66. Electric cords out of children's reach	1.00
67. No free-standing heaters in use	0.97
68. Pipes, radiators, and other hot surfaces out of reach	0.99
69. Sharp edges covered	0.99

