



# Project Information Document (PID)

Appraisal Stage | Date Prepared/Updated: 14-Oct-2021 | Report No: PIDA32483

**BASIC INFORMATION****A. Basic Project Data**

Country Lebanon	Project ID P176622	Project Name Support for Social Recovery Needs of Vulnerable Groups in Beirut	Parent Project ID (if any)
Region MIDDLE EAST AND NORTH AFRICA	Estimated Appraisal Date 15-Oct-2021	Estimated Board Date 02-Nov-2021	Practice Area (Lead) Social Sustainability and Inclusion
Financing Instrument Investment Project Financing	Borrower(s) International Rescue Committee	Implementing Agency International Rescue Committee Lebanon	

## Proposed Development Objective(s)

To support the immediate social recovery needs of vulnerable groups following the port of Beirut explosion.

## Components

Component 1: Support for social services for vulnerable groups affected by the explosion

Component 2: Capacity Building and Project Management

**PROJECT FINANCING DATA (US\$, Millions)****SUMMARY**

<b>Total Project Cost</b>	7.80
<b>Total Financing</b>	7.80
<b>of which IBRD/IDA</b>	0.00
<b>Financing Gap</b>	0.00

**DETAILS****Non-World Bank Group Financing**

Trust Funds	7.80
Lebanon Trust Fund	5.00



State and Peace Building Fund	2.80
Environmental and Social Risk Classification	
Moderate	
Decision	
The review did authorize the team to appraise and negotiate	

Other Decision (as needed)

## B. Introduction and Context

### Country Context

1. **On August 4, 2020, a massive explosion in the Port of Beirut (POB) resulted in over 200 deaths, wounded over 6,000 and displaced 300,000 people.** Beyond the severe loss of life, due to the blast’s scale and location, the impact on public infrastructure and on economic activity was and continues to be significant. Beirut’s population density, the concentration of economic activity in the affected areas, especially commerce, real estate and tourism, and the damage to the port itself, meant that the blast was particularly damaging to prospects of economic recovery. A Rapid Damage and Needs Assessment (RDNA) estimated damages of US\$3.8–4.6 billion, economic losses of US\$2.9–3.5 billion, and a priority recovery and reconstruction need of US\$1.8–2.0 billion.<sup>1</sup>
2. **The explosion came at a time when Lebanon faced a multitude of compounding challenges that include economic and banking crises, a severe balance-of-payments deficit, and recurring social unrest, and the onset of COVID-19, which exposed and exacerbated pre-existing vulnerabilities.**<sup>2</sup> In 2019-2020, a shortage of US dollars in the market resulted in parallel exchange rates, as well as capital controls – an unprecedented situation for Lebanon’s historically free capital account. A survey administered before COVID-19 found that 220,000 jobs had been temporarily or permanently lost between October 2019 and February 2020, one-third of companies reduced their workforce by 60% on average and 12% ceased or suspended their operations.<sup>3</sup> On March 7, 2020, the Government of Lebanon (GoL) defaulted on US\$1.2 billion Eurobond debt. Much of Lebanon’s current economic and social crisis is attributable to a system of elite capture that has failed to deliver adequate services to its people. The impact of the COVID-19 pandemic further exacerbated the precarious situation in the country. The pandemic overloaded a crippled public health infrastructure, exposing decades of underinvestment for public services. As of October 4, 2021, 625,974 cases have been reported, with over 8,348 deaths due to the pandemic.<sup>4</sup> According to the World Bank’s Spring 2021 *Lebanon Economic Monitor* (LEM), the 12-month inflation rate “has risen steadily and sharply from 10% in January 2020, to 89.7% in June 2020, 120% in August 2020,

<sup>1</sup> World Bank Group; European Union; United Nations. 2020. Beirut Rapid Damage and Needs Assessment. World Bank, Washington, DC. © World Bank. <https://openknowledge.worldbank.org/handle/10986/34401>

<sup>2</sup> World Bank Group; European Union; United Nations. 2020. Beirut Rapid Damage and Needs Assessment. World Bank, Washington, DC. © World Bank. <https://openknowledge.worldbank.org/handle/10986/34401>

<sup>3</sup> Conducted by InfoPro: <http://www.businessnews.com.lb/cms/Story/StoryDetails/7423/220,000-jobs-lost-estimated-by-InfoPro>.

<sup>4</sup> World Meter Coronavirus <https://www.worldometers.info/coronavirus/country/lebanon/>, dd June 21, 2021



and most recently, to 157.9% in March 2021.<sup>5</sup> Importantly, inflation is a highly regressive tax, affecting the poor and vulnerable disproportionately, as well as people on fixed income, such as pensioners.<sup>6</sup>

3. **Compounded by the global economic shock presented by COVID-19, disruptions in international food supply chains and trade networks exacerbate Lebanon's food security vulnerabilities.** Lebanon's remittances dropped by 20%, from 3.9 billion U.S. dollars in the first half of 2019 to 3.1 billion dollars in the first half of 2020, according to Bank Byblos' Lebanon This Week report released on Tuesday February 9, 2021.<sup>7</sup> Furthermore, the restrictions on movement to combat the pandemic have hindered food-related logistic services, disrupting food supply chains and jeopardizing food security for millions of people. The higher levels of export restrictions particularly leave food-importing countries vulnerable to commodity price fluctuations. The World Bank's Spring 2021 LEM found average food inflation to have grown by a record 254 percent over 2020.<sup>8</sup> Meanwhile, the World Food Program (WFP) reported that the Consumer Price Index (CPI) experienced annual inflation of 133% between October 2019 and November 2020, representing an all-time high since it began monthly price monitoring in 2007.<sup>9</sup> This is particularly relevant as Lebanon imports at least 80% of its food supplies (ESCWA 2016). Real GDP growth is estimated to have contracted by 20.3 % in 2020, on the back of a 6.7 % contraction in 2019.
4. **The pandemic and ensuing lockdowns have affected the poor, refugees, and other vulnerable populations disproportionately, on a global scale as well as on a national scale.** In Lebanon, a wide range of vulnerable groups have been negatively impacted by the pandemic ranging from the loss of livelihoods of informal workers and micro-entrepreneurs, additional economic insecurity for refugees and migrants, to the overlook of the health needs of the elderly and the disabled.<sup>10</sup> Lockdown measures to fight the pandemic, topped by the global recession, have resulted in permanent and temporary lay-offs with particularly detrimental effects on informal workers. Syrian refugees have experienced economic hardship in 2020: there was a 44% increase in refugees under the Survival Minimum Expenditure Basket (SMEB), meaning that 89% now cannot meet their basic needs and are prone to a deprivation of a series of rights.<sup>11</sup> In addition, 83% of migrants surveyed in May 2020 reported that they struggled to make payments for food in the last 30 days.<sup>12</sup> Older people suffer from a lack of health and protection systems. Persons with disabilities have also been disproportionately affected by interrupted health services and social support at home, including personal assistance.<sup>13</sup>
5. **The blast further exacerbated socioeconomic hardship, undermined trust in governmental institutions and increased existing pressures for emigration.** Even before the explosion, the fallout of the economic crisis and the pandemic had led to a significant increase in poverty and a shrinking middle class. The Fall 2021 LEM estimated that poverty rates have surged from 28% in 2019 to 55.3% in 2020.<sup>14</sup> As of Spring 2021, projections using older data suggest that well over half of Lebanon's population was under the

<sup>5</sup> Lebanon Economic Monitor, Spring 2021. World Bank.

<sup>6</sup> Lebanon Economic Monitor, Fall 2020. World Bank.

<sup>7</sup> Bank Byblos (February 2020) Lebanon This Week 'Lebanon's expats' remittances drop by 20% in H1 of 2020 in Xinhuanet.

<sup>8</sup> Lebanon Economic Monitor, Spring 2021. World Bank.

<sup>9</sup> World Food Program (December 2020) Lebanon, VAM Update of Food Price and Market Trends.

<sup>10</sup> <https://reliefweb.int/sites/reliefweb.int/files/resources/WFP-0000122981.pdf>

<sup>11</sup> <https://www.unicef.org/lebanon/media/5616/file>

<sup>12</sup> <https://reliefweb.int/report/lebanon/vasyr-2020-key-findings-2020-vulnerability-assessment-syrian-refugees-lebanon>

<sup>13</sup> <https://migration.iom.int/reports/lebanon%E2%80%94migrant-worker-vulnerability-baseline-assessment-report-may-july-2020>

<sup>14</sup> Lebanon: People with Disabilities Overlooked in Covid-19. Human Rights Watch

<sup>15</sup> Lebanon Economic Monitor, Fall 2020. World Bank.



national poverty line.<sup>15</sup> These developments increase pressures for emigration, especially among the middle class. Such deprivations have further degraded the relationship between people and the state. Grievances with the political system and dissatisfaction with the state's mismanagement of the economy and its entrenched corruption resulted in nationwide protests in late 2019. Since, intermittent social unrest highlights the needs for a new social contract between citizens and the government. In a survey conducted by the World Bank among victims of the blast, the overwhelming majority of respondents report having “no trust at all” in political parties, the Council for Development and Reconstruction, or municipalities.<sup>16</sup>

6. **The formation of a new government of “determination and hope” in September 2021, and the subsequent vote of parliamentary confidence this received, lays an important potential foundation for solving these challenges.** However, even in a political best case scenario, the deep socio-economic impacts of the above crises upon the people of Lebanon will take considerable time and investment in public sector service delivery reform to address sustainably. As such, stop-gap measures to meet the immediate socio-economic needs of vulnerable groups remains important for both alleviating emergency hardship and setting the stage for longer-term recovery.

#### Sectoral and Institutional Context

7. **The World Bank Group (WBG), United Nations (UN), and European Union (EU), in cooperation with civil society, the Government of Lebanon (GoL) and the international community, developed the Reform, Recovery and Reconstruction Framework (3RF) to respond to the acute situation in Lebanon.** The 3RF provides a roadmap to operationalize the findings of the RDNA and other assessments and responds to the devastating explosion in the POB. It presents a set of sequenced, specific, and targeted interventions in the immediate and short term that will help Lebanon achieve three central goals in response to the Beirut port explosion: (a) people-centred recovery; (b) reconstruction of critical assets; and (c) implementation of reforms. The 3RF is structured around four strategic pillars: (a) improving governance and accountability; (b) jobs and opportunities; (c) social protection, inclusion, and culture; and (d) improving services and infrastructure.
8. **The WBG, the UN and EU, with support from key donors, established a pooled financing mechanism, the Lebanon Financing Facility (LFF) that will be one of the instruments to channel support to selected priorities under the 3RF.** Its objective is to support the immediate socio-economic recovery of vulnerable people and businesses affected by the Beirut port explosion and to build the foundation for medium-term recovery and the sustainable reconstruction of the POB and affected neighbourhoods. The LFF provides an important means for mobilizing support in a transparent, inclusive, timely and well-coordinated manner, especially in a context of high uncertainty. It proposes innovative and flexible implementation modalities as it seeks to provide direct support to capable non-government organizations (NGOs) and civil society organizations (CSOs), as well as to private sector intermediaries to reach affected micro, small and medium-sized enterprises.
9. **Several assessments conducted after the POB explosion highlight the priority areas for recovery and**

<sup>15</sup> Lebanon Economic Monitor, Spring 2021. World Bank

<sup>16</sup> Ranking on a 5-point scale, where 1 = “no trust at all” and 5= “complete trust.” Average score was 1.2 for political parties, 1.5 for CDR, and 1.7 for municipalities. Survey not strictly representative due to its design. Source: <http://documents1.worldbank.org/curated/en/899121600677984471/pdf/Beirut-Residents-Perspectives-on-August-4-Blast-Findings-from-a-Needs-andPerception-Survey.pdf>



**reconstruction, as well as the main weaknesses in the social safety net system in Lebanon.** Consultations with local CSOs and NGOs in December 2020 revealed heightened vulnerabilities amongst the following three population groups affected by the blast in Beirut: (i) survivors of Gender-Based Violence (GBV); (ii) those suffering from deteriorated psycho-social wellbeing; (iii) and persons with disabilities and Older Persons (OPs).

## Survivors of GBV

10. **The legal framework for GBV in Lebanon presents shortcomings, inadequate remedies, and a narrow definition of gender-based violence.**<sup>17</sup> In December 2020, the Lebanese Parliament passed a law that further protects women and household members from domestic abuse. While the passing of the law criminalizes sexual harassment and approved amendments intended to strengthen the country's existing law on domestic violence, advocates say gaps remain both in the law and in how it is applied.<sup>18</sup> Additionally, the difficult economic conditions and fiscal challenges, along with the impact of the COVID-19 pandemic, have increased the demand for GBV response and prevention services. The capacity of the multiple NGOs and CSOs involved in this response has been stretched, with minimal support from the government.
11. **Prior to the POB blast, women in Lebanon had been under a range of economic and social pressures due to the ongoing crises and have been facing different societal inequalities.** Civil society organizations have highlighted both the lack of sufficient safe spaces and resources, and the dire need to scale up service provision of integrated GBV and sexual and reproductive health services to reach the most vulnerable and marginalized in Beirut and the rest of Lebanon.<sup>19</sup> Civil society organizations also reported that increasing levels of poverty were intensifying drivers of GBV, forcing women to resort to risky measures for survival that are shaped by the inequalities they regularly face, including girls working in the streets or sex industry.<sup>20</sup> In losing their livelihoods, women are among the most vulnerable for food insecurity, with many becoming increasingly reliant on negative coping strategies such as skipping meals and incurring debt.<sup>21</sup> Compounding matters, survivors of GBV experience difficulties in reporting incidents or accessing services due to the limited access to communication devices, lack of privacy, stigma, or the presence of perpetrators within the same household. Additionally, a recent survey revealed that the second most common form of GBV in the country was forced and early marriage of girls.<sup>22</sup> This risk may increase given ongoing economic pressures on many household incomes.
12. **GBV also affects men and boys, including within the refugee and migrant communities.** In conflict situations, men, and boys, just as women and girls, are raped or subjected to other forms of sexual violence. In a 2013 rapid assessment of male refugees from Syria (aged 12-24), 10.8% had experienced an incident of sexual harm or harassment in the previous three months, of which none had accessed support services.<sup>23</sup> Data in Beirut/Mount Lebanon indicates that in 2020, 21% of child sexual abuse survivors are

<sup>17</sup> <https://www.ici.org/wp-content/uploads/2019/07/Lebanon-Gender-Violence-Publications.pdf>

<sup>18</sup> <https://today.lorientlejour.com/article/1249052/despite-major-steps-forward-in-domestic-violence-law-coronavirus-lockdowns-expose-the-many-shortcomings-that-remain.html>

<sup>19</sup> United Nations Population Fund, Gender Based Violence Annual Report 2020, UNFPA, Lebanon.

<sup>20</sup> <https://aiw.lau.edu.lb/news-events/aiw-updates/the-aiw-statement-of-lebanon-tra.php> (ABAAD)

<sup>21</sup> Socio-Economic Impact Assessment Lebanon – UN (PDF)

<sup>22</sup> IRC, (August 2020), <https://www.rescue.org/press-release/beirut-150000-women-and-girls-displaced-following-blast>

<sup>23</sup> UNHCR, (Oct 2017), Sexual Violence Against Men and Boys.



boys under the age of 18.<sup>24</sup>

13. **The COVID-19 outbreak increased the risk of GBV, particularly after the first strict lockdown that had been put in place to prevent the spread of the virus.** This trend has been recorded worldwide in countries which enforced strict lockdowns.<sup>25</sup> Lebanese authorities reported a marked increase of 51% in the number of incoming calls to the GBV hotline related to domestic violence from February 2020 to October 2020.<sup>26</sup> During strict lockdowns, household tensions can spiral as families are confined to their homes with poor job security, causing stress, anxiety, and an environment where the likelihood of intimate partner violence can be heightened, compounded by pre-existing inequalities, the different waves of political uprisings and the devaluation of the Lebanese pound which have triggered one of the worst socio-economic crisis since the civil war. GBV case managers have reported an increase of survivors reaching out to their hotlines particularly due to the restrictions on face-to-face services, with physical assault and psychological/emotional abuse as the most prominent type of incidents reported<sup>27</sup>. The pandemic and ensuing lockdowns have restricted freedom of movements and survivors' ability to seek help or support from the survivor's social network. Care Lebanon reports that the GBV response and prevention services have slowed down since the pandemic, while access to legal protection for survivors has been delayed due to the courts closure.<sup>28</sup>
14. **The POB blast exposed women, girls, men, and boys to displacement, precarity, further vulnerability to GBV and mental health issues.** An estimated 150,000 women and girls affected by the blast have been displaced, relocating to temporary accommodation or shared shelters where they are at greater risk of GBV.<sup>29</sup> A survey found that 84.5% of the women affected by the blast were female-headed households (FHH) and that these households were more likely (52%) than male-headed households (48%) to have at least one member with a physical or mental disability resulting from the blast.<sup>30</sup> Moreover, FHH were more likely than their male counterparts to report medical care and hygiene kits as their primary needs.<sup>31</sup>
15. **Migrant domestic workers (the vast majority of them being women) and the refugee populations experience compounded vulnerabilities from heightened risks of GBV, food insecurity, and lack of safe housing in Lebanon.** Findings from the International Organization for Migration (IOM) indicated the need for shelter is now more prevalent among migrant workers, with 21% of migrant workers reporting a lack of shelter as the main problem they are facing due to the explosion,<sup>32</sup> compared to only 1% prior to the explosion. In addition, it is estimated that between 51% and 54% of the Syrian refugee population in Lebanon is under the age of 18.<sup>33</sup> While many of these children face risks related to poverty, food insecurity, lack of access to healthcare, and forced labor, girls are also vulnerable to additional gendered

<sup>24</sup> Gender-Based Violence Information Management System (Feb 2021), Annual Overview of Incidents of GBV in Relation to Lebanon's Situation 2020, Lebanon.

<sup>25</sup> Relief Web (May 2020) Impact of COVID-19 on the GBV Situation in Lebanon, Inter-Agency GBV Task Force Lebanon - May

2020, <https://reliefweb.int/report/lebanon/impact-covid-19-GBV-situation-lebanon-inter-agency-GBV-task-force-lebanon-may-2020>

<sup>26</sup> <https://executive-bulletin.com/ngo/monitoring-a-marked-increase-in-the-number-of-violence-cases-the-national-commission-for-lebanese-women-nciw-calls-upon-mps-to-adopt-amendments-to-domestic-violence-law>

<sup>27</sup> Gender-Based Violence Information Management System, Annual Overview of Incidents of GBV in Relation to Lebanon's Situation 2020, March 4<sup>th</sup>, 2021

<sup>28</sup> [http://www.careevaluations.org/wp-content/uploads/CIL\\_RapidGenderAnalysis\\_COVID-19\\_FINAL-2007022.pdf](http://www.careevaluations.org/wp-content/uploads/CIL_RapidGenderAnalysis_COVID-19_FINAL-2007022.pdf)

<sup>29</sup> IRC (August 2020) <https://www.rescue.org/press-release/beirut-150000-women-and-girls-displaced-following-blast>

<sup>30</sup> UN Women, OCHA, ACTED, 'Emerging Gender Analysis: Gender findings from a multi-partner multi-sectoral needs assessment of the Beirut Explosion', (August 2020)

<sup>31</sup> Ibid.

<sup>32</sup> <https://migration.iom.int/reports/lebanon%E2%80%94migrant-worker-vulnerability-baseline-assessment-follow-report-september-2020>

<sup>33</sup> UNHCR (2019) 101 Facts & Figures on the Syrian Refugee Crisis", Vol II, Beirut, Lebanon.



risks including child marriage, domestic violence and intimate partner violence, sexual exploitation and assault, as well as intimidation and fear of violence within their communities.<sup>34</sup> Among Syrian refugees, the most reported forms of violence against women and girls include physical assault, domestic and sexual violence, emotional abuse, denial of resources, and forced and child marriage.

## Psycho-social wellbeing

16. **The amalgam of the different crises affecting Lebanon have had a dire effect on the psycho-social wellbeing of its population, where levels of stress, worry, and pain soared to record levels in 2019, even before the shocks of the COVID-19 pandemic and the POB explosion.** In 2019, Gallup data showed that Lebanese adults have experienced the most emotional blow between 2018 and 2019 worldwide. Their Negative Experience Index rose 18 points, while their Positive Experience Index score dropped 12 points.<sup>35</sup> The percentage of Lebanese who experienced sadness more than doubled, from 19% to 40%, and nearly twice as many were angry in 2019 (43%) compared to 2018 (23%). A national representative survey in Lebanon conducted prior to the Syrian conflict showed that one in six people met criteria for at least one mental disorder, with 27% of these classified as “serious”.<sup>36</sup> Embrace, an NGO running a national suicide prevention hotline (1564), reported its call volume to have tripled between 2019 and 2020, with 18-to-34-year-olds consistently accounting for more than half of this number but the share of other age brackets growing.<sup>37</sup> The call volume continued to increase in the first half of 2021, with 565 calls received in January, 602 in February, 760 in March, and more than 1000 in April and May.<sup>38</sup>
17. **An exacerbating economic and political crisis, COVID-19 and the POB blast have further heightened negative feelings and experiences for many, particularly vulnerable people in Beirut.** Traumatizing events, loss, separation, GBV, financial struggles or drastic changes in social and living conditions are likely to lead to people experiencing several distressing psychological reactions, which might have short or long-term impacts on people’s mental health and psychosocial wellbeing. The explosion as well as its political and economic shockwaves have affected most families, their community structures, schools and workplaces, increased risks and exacerbated pre-existing vulnerabilities and inequalities, particularly around gender. The results of several surveys undertaken since the blast have shown that a significant number of respondents have experienced and continue to experience mental health issues.<sup>39</sup> Many refer to this as negatively impacting on their personal well-being and their sense of social inclusion and connection to their families and communities.
18. **The mental health sector in Lebanon has been undergoing a major reform, initiated by the National Mental Health Programme in 2015.** Progress has been made as shown by the external mid-term evaluation conducted in 2018,<sup>40</sup> for the implementation of the National Mental Health and Substance Use

<sup>34</sup> BMC Women’s Health Continuum of sexual and gender-based violence risks among Syrian refugee women and girls in Lebanon, <https://bmcwomenshealth.biomedcentral.com/articles/10.1186/s12905-020-01009-2#ref-CR9>

<sup>35</sup> Ray, J. (Nov 2019), Gallup, Political, Economic Strife Takes Emotional Toll on Lebanese, <https://news.gallup.com/poll/325715/political-economic-strife-takes-emotional-toll-lebanese.aspx>

<sup>36</sup> Karam, Elie G et al. (2006) Prevalence and treatment of mental disorders in Lebanon: a national epidemiological survey. The Lancet, 367, 1000 – 1006.

<sup>37</sup> Embrace 2020 Annual Report. <https://www.embracelebanon.org//Media/publications/pdfs/2504d9b2-17d2-4242-b815-385d48374e16.pdf>

<sup>38</sup> Embrace 2021 Monthly Hotline Reports. Note: no monthly reports are publicly available beyond May 2021.

<https://embracelebanon.org/ourimpact?id=4>

<sup>39</sup> World Bank (Aug 2020) Rapid Damage and Needs Assessment that took place in Beirut, Lebanon, between August 5 and 31, 2020.

<sup>40</sup> <https://www.moph.gov.lb/userfiles/files/Report-Mid-term%20evaluation%20of%20the%20Lebanon%20Mental%20Health%20Strategy%202015-2020.pdf>





Prevention, Promotion, and Treatment Strategy (2015-2020).<sup>41</sup> That being said, the COVID-19 pandemic as well as the severe economic crisis and the POB blast significantly increased the toll on the mental health of the population and highlighted even more the need for scalable evidence-based mental health interventions. The inter-sectoral Mental Health and Psychosocial Support (MHPSS) action plan developed for COVID-19<sup>42</sup> and for the POB explosion,<sup>43</sup> combined with ongoing reform of the national Mental Health System, provide an opportunity to effectively scale-up low intensity interventions.<sup>44</sup> Such efforts can benefit considerably from low cost, rapidly scalable digital tools, particularly e-self-help platforms such as Step-by-Step (SbS) and Self-Help Plus (SH+).

19. **The GoL and the UN primarily channel activities on mental health and psychosocial support to both vulnerable Lebanese and displaced Syrians through the LCRP's Protection Sector.** Currently, services are targeted to 53,231 Persons with Specific Needs (further explained in the section below), to benefit, through case management, from individual counselling and psychosocial support. This support is also made available for survivors of GBV and, through coordination with the Child Protection Sector, for children identified as vulnerable in the GoL's RACE II Strategy, which falls under the regional No Lost Generation strategy.<sup>45</sup> The work also aligns with the national Child Protection Policy, developed by the Ministry of Education and Higher Education, in the form of its education personnel and psychosocial support counsellors. A combination of United Nations High Commissioner for Refugees (UNHCR), World Health Organization (WHO), United Nations Children's Emergency Fund (UNICEF) and others provide these services to both refugees from Syrian and vulnerable Lebanese, while United Nations Relief and Works Agency for Palestine Refugees United Nations Relief and Works Agency for Palestine Refugees (UNRWA) provides these services to Palestinian refugees.

### Persons with Disabilities and Older Persons

20. **Conditions for persons with disabilities and Older Persons (OPs) had been deteriorating since 2019 as the compound crises affected these groups disproportionately.**<sup>46</sup> The POB explosion only exacerbated these vulnerabilities further. In fact, at the end of 2019, the Ministry of Social Affairs – which had previously delivered services to persons with disabilities – rescinded its support services due to budgetary shortages. In turn, civil society partners providing services to persons with disabilities and OPs recorded a significant increase in their Lebanese caseload over the course of 2020.<sup>47</sup> In late May 2020, a Rapid Needs Assessment conducted by HelpAge International in Beirut identified that 68% of people aged 50 and above had at least one disability or impairment.<sup>48</sup> While reliable data quantifying the impact of the blast on these numbers does not exist, an August 2021 Human Rights Watch investigation estimated that 150 people

<sup>41</sup>[https://www.moph.gov.lb/userfiles/files/Mental%20Health%20and%20Substance%20Use%20Strategy%20for%20Lebanon%202015-2020-V1\\_1-English.pdf](https://www.moph.gov.lb/userfiles/files/Mental%20Health%20and%20Substance%20Use%20Strategy%20for%20Lebanon%202015-2020-V1_1-English.pdf)

<sup>42</sup>[https://www.moph.gov.lb/userfiles/files/National%20Action%20Plan-MHPSS%20response%20to%20the%20COVID-19%20outbreak%20in%20Lebanon-V1\\_0.pdf](https://www.moph.gov.lb/userfiles/files/National%20Action%20Plan-MHPSS%20response%20to%20the%20COVID-19%20outbreak%20in%20Lebanon-V1_0.pdf)

<sup>43</sup><https://www.moph.gov.lb/userfiles/files/National%20Action%20Plan%20for%20the%20MHPSS%20Response%20To%20Beirut%20Explosion%20Disaster.pdf>

<sup>44</sup> <https://pubmed.ncbi.nlm.nih.gov/30225240/>

<sup>45</sup> Government of Lebanon and United Nations, 'Lebanon Crisis Response Plan' (LCRP)

<sup>46</sup> See IASC Key Messages on Applying IASC Guidelines on Disability in the Covid-19 Response.

here: <https://interagencystandingcommittee.org/iasc-task-team-inclusion-persons-disabilities-humanitarian-action/iasc-key-messages-applying-iasc-guidelines-disability-covid-19-response>.

<sup>47</sup> Interview with Protection partner on 11/12/2020.

<sup>48</sup><https://www.helpage.org/newsroom/latest-news/beirut-blast-rapid-needs-assessment-highlights-long-term-healthcare-amongst-priorities-for-recovery/>



were left with a physical disability.<sup>49</sup> However, with the total number of injuries reported in the thousands, this figure could in fact be considerably larger.

21. **The heightened needs of persons with disabilities and OPs during and after crises has been well-documented with strong evidence showing that these needs are often overlooked.**<sup>50</sup> In the immediate aftermath of the blast, cash assistance and shelter support were identified as key areas for emergency support, while access to medical supplies and services were identified as top priorities for Persons with Disabilities and older persons in the medium to longer term. In a survey of a sample of residents of the POB area from all age groups, 34% reported that their family had difficulties accessing health services and 45% reported difficulties accessing medicines.<sup>51</sup> This was a particular concern for 65% of older person-headed households who have a chronic disease that require medicine and are at a heightened risk of contracting COVID-19. Elderly women who live alone are particularly vulnerable, given their greater likelihood of not having access to savings, pensions, and other social protection instruments.<sup>52</sup>
22. **To support the elderly and disabled Syrian refugees and vulnerable Lebanese, the GoL and the UN LCRP strategy guided programming for 2020,** specifically by the Persons with Specific Needs sub-committee under the Protection Sector. The sub-committee identified that in 2020, gaps in support to persons with disabilities were particularly at risk of emerging. Activities conducted by sector partners include: (i) support Primary Health Care Centres (PHC); (ii) support to Mobile Medical Units (MMUs); (iii) development of local service mappings to increase awareness of, and access to, services; (iv) provision of cash vouchers to subsidize transportation costs; (v) procurement and delivery of assistive devices; and (vi) improvements to at-home physiotherapy services. In addition, the Shelter sector strategy targets people with specific needs, particularly those with physical disabilities impacting on mobility which often includes the elderly. The UN's Strategic Framework also mentions UN-led support to elderly and persons with disabilities in the form of access to services from Social Development Centres.<sup>53</sup>
23. **In 2000, Lebanon adopted Law 220 on the Rights of Disabled Persons (Law 220/2000).** The law articulates a set of rights integrating citizens with disabilities into social and economic life, through employment, transport, and housing quotas, and guarantees of health and educational services. However, many of these commitments have not been fulfilled due to inadequate access to information for Persons with Disabilities about their rights and services, and no coordinated national response from relevant ministries and civil society. The Ministry of Social Affairs in collaboration with the United Nations Economic and Social Affairs (UN-ESCWA) and United Nations Population Fund (UNFPA) is currently developing Lebanon's first national strategy for persons with disabilities.

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<sup>49</sup> Human Rights Watch. August 2021. Investigation into the POB Blast. <https://www.hrw.org/video-photos/interactive/2021/08/02/lebanon-evidence-implicates-officials-beirut-blast-targeted>

<sup>50</sup> See, for instance, Kett M et al., for International Disability and Development Consortium. Disability in conflict and emergency situations: focus on tsunami-affected areas. 2005 ([www.iddconsortium.net/joomla/index.php/conflict-and-emergencies/key-resources](http://www.iddconsortium.net/joomla/index.php/conflict-and-emergencies/key-resources))

<sup>51</sup> <https://www.helpage.org/newsroom/latest-news/beirut-blast-rapid-needs-assessment-highlights-long-term-healthcare-amongst-priorities-for-recovery/>

<sup>52</sup> UN Women, Salti and Mezher. Women on the verge of an economic breakdown (Lebanon)

<sup>53</sup> United Nations Strategic Framework (UNSF) Lebanon (2017-2020)



### C. Proposed Development Objective(s)

#### Development Objective(s) (From PAD)

24. The PDO is to support the immediate social recovery<sup>54</sup> needs of vulnerable groups<sup>55</sup> following the port of Beirut explosion.
25. This will be done by supporting non-government stakeholders that are engaged and have a track record in social recovery services by improving their capacity to participate in the broader social recovery and reconstruction processes. While the project's two components strive to meet immediate emergency needs in Beirut and include capacity building activities, there is still an overarching need for a broader public sector reform agenda to address the extensive needs of vulnerable groups, which is beyond the scope of the current projects.

#### Key Results

26. The objective will be measured through the following indicators:
  - Increased access to social and health services for survivors of GBV (including women, accompanied children and male youth), people with mental health challenges, and persons with disabilities and Older Persons.
  - Improved quality of social and health services for survivors of GBV (including women, accompanied children and male youth), people with mental health challenges, and persons with disabilities and Older Persons.

### D. Project Description

27. The project includes the following two components:
  - (i) Support for Social Services for Vulnerable Groups affected by the Explosion, and
  - (ii) Capacity Building and Project Management
28. Vulnerable groups specifically supported by the project include women, men and children survivors and at risk of GBV, people with mental health challenges, persons with disabilities and OPs, as well as migrants and refugees working as domestic workers in Beirut. However, there will be no individual targeting of potential beneficiaries beyond public awareness campaigns to raise awareness on key issues and the availability of services to specific groups. Whomever requests services from the beneficiary NGOs, will, if appropriate and applicable, be provided with services financed by the project.

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<sup>54</sup> "Immediate social recovery" refers to meeting the short-term needs directly associated with the reasons for vulnerability of groups, who, due to pre-existing exclusion, stigma and service delivery gaps have been less resilient to shocks and more prone to harm following them. The project therefore conceives of an "immediate social recovery" as a necessary emergency intervention that precedes later reform efforts, which in turn will address the systemic social drivers of vulnerability.

<sup>55</sup> For the purposes of this project, vulnerable groups include women, men and children survivors and at risk of GBV, people with mental health challenges, persons with disabilities and older persons. These groups may also include migrants and refugees working as domestic in Beirut, and who cut across the previously described groups.



**Component 1. Support for Social Services for Vulnerable Groups Affected by the Explosion (US\$7,305,000)**

29. This component will finance NGOs to provide social services to vulnerable groups affected by the crises including: (i) survivors of GBV; (ii) those suffering from deteriorated psycho-social wellbeing; (iii) and persons with disabilities and OPs facing limitations related to their disabled or elderly status. Given the cross-cutting nature of their vulnerability, refugees and migrant domestic workers will be targeted across these beneficiary groups. The component includes the following three sub-components: (i) Enhanced Support for Survivors of GBV in Beirut; (ii) Enhanced Support for psycho-social wellbeing in Beirut; and (iii) Enhanced Support for persons with disabilities and OPs. To undertake these activities, grants and service agreements will be entered into with local NGOs. In addition, the project will enhance capacity of NGOs providing services to beneficiaries across the three intervention areas.

**Sub-Component 1.1 Enhanced Support for Survivors of GBV in Beirut (US\$3,960,000)**

30. This component will provide support for a small-scale effective, inclusive, and sustainable model for non-government support for social services for survivors of GBV. The project will finance holistic services for survivors of GBV by NGOs in line with international good practices. Support will be provided for: (i) emergency shelters; (ii) case management; (iii) psycho-social support; (iv) life skills; (v) referrals for tailored services, including medical services and psychosocial and legal assistance; and (vi) provision of education for children in shelters.

31. In addition, this sub-component will also finance:

- Capacity-building, training, and ongoing mentoring with full range of adapted tools, materials, training and coaching for service providers in the non-government and public sectors.
- Adoption of Standard Operating Procedures (SOP) and protocols for supporting different categories of GBV cases, especially in the context of the COVID-19 pandemic, including on safe and integrated digital case management systems and protocols. This will include supporting the implementation of GBV case management, including technical support and supervision for GBV response staff/case workers.<sup>56</sup> Moreover, the support will include a comprehensive integrated package of primary and secondary health care referral services through the available Ministry of Public Health (MoPH) networks and responding to specialized needs of boys and girls survivors of GBV, as well as children from survivors. Additionally, discussions would be convened with all stakeholders to consider adopting the SOP as a permanent component of case management, thus ensuring sustainability of services during any emergency or period of constraint.
- Offer support towards improving GBV Information Management Systems (GBVIMS), including: efforts aimed at upgrading the GBVIMS to a more user-friendly and easy-to-access version; providing further training to enhance skills related to preserving the security and confidentiality of data shared by

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<sup>56</sup> For example, through improving the ability to provide support to suicidal and self-harming survivors in line with the International Rescue Committee's MHPSS in Emergencies COVID-19 Learning Series and the WHO Mental Health Gap Action Program (mhGAP) Humanitarian Intervention Guide, as well as by promoting the integration of Women's Protection and Empowerment (WPE) program tools and case management supervision.



survivors; and operating and maintaining safe and integrated digital case management systems, as well as public information sharing and complaint management mechanisms.

- Training for staff/volunteers responding to the national hotline as well as other front liners on GBV Core Concepts and Safe Referrals.

32. Further, the project will seek to raise awareness of GBV and available support services, by utilizing community communication channels and developing a social media communication strategy to ensure information is disseminated to women and girls and other vulnerable and at-risk groups. Social norms surrounding GBV and gender inequalities are structural factors that cannot be ignored in any serious medium to long-term strategy to address these vulnerabilities. Accordingly, the findings of pre-existing research and analytics conducted by stakeholders in Lebanon, as well as the extensive experience of partners on the ground, will be integrated in the implementation approach of this sub-component.

33. The proposed activities are in alignment with existing but limited country systems for survivors of GBV and build upon extensive consultations with government agencies, national and international NGOs, UN agencies and bilateral donors. The activities are aligned with the National Women Strategy endorsed by National Commission for Lebanese Women (NCLW) and in line with the National Women and Children Safeguarding Strategy endorsed by MoSA. In addition, they will contribute to operationalizing the National GBV SOPs under the leadership of MoSA and the ownership/endorsement of the Ministry of Justice (MoJ), Ministry of Interior and Municipalities (MoIM), MoPH and NCLW. The project will also work closely with and through the network of the MoPH's SDCs to ensure building upon existing initiatives.

### **Sub-Component 1.2 Enhanced Support for Psycho-Social Wellbeing in Beirut (US\$ 1,770,000)**

34. This sub-component supports vulnerable individuals and households in the Greater Beirut area to improve their psycho-social wellbeing. Support will be provided mainly for the following two psychosocial interventions:

- Fine tuning/adaptation of SbS program and roll-out of the program to support provision to a range of target groups including youth, persons who have lost livelihoods, persons with disabilities and migrants in Lebanon. SbS is a guided e-self help intervention that delivers psychoeducation and behavioural activation alongside therapeutic practices for the benefit of communities affected by adversity.<sup>57</sup> It was developed and piloted during a previous collaboration between WHO and the National Mental Health Programme, more than four years ago, but has been delayed in transitioning to a phase of implementation research due to enduring resource challenges.
- Adaptation of Self Help Plus (SH+)<sup>58</sup> to the local context and roll-out of the program to target groups including health workers and NGO workers, as well as the development of a protocol for online delivery in English and Arabic. SH+ is a self-help intervention involving pre-recorded audio and illustrated content and non-specialist, briefly trained facilitators. It enables the delivery of

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<sup>57</sup> Carswell, Harper-Shehadeh, Watts, Hof, Ramia, Heim, Wenger, and van Ommeren. 2018. "Step-by-Step: a new WHO digital mental health intervention for depression." National Library of Medicine. Accessed online: <https://pubmed.ncbi.nlm.nih.gov/30225240/>

<sup>58</sup> SbS and SH+ are previous collaborations between the World Health Organization (WHO) and the National Mental Health Programme.



psychological stress management services to groups of adversely affected populations in hard-conflict and crisis- affected contexts.<sup>59</sup>

35. The selected specialized NGOs will work closely with the National Mental Health Programme (NMHP) in the MoPH and WHO to assist with:

- Recruiting and training master and counsellor e-helpers and facilitators, and resourcing NGOs to deliver services training using the existing WHO training tools for delivery of the programs, adapted for local context.
- Monitoring the delivery of interventions to target beneficiaries.
- Conduct technical debriefing sessions with stakeholders to support future adaptation to make necessary adjustments to the program after implementation and provide refresher trainings.
- Identifying cases and referring them to different levels of specialized services – i.e., case management, psychotherapy, management through mhGAP protocols and advanced psychiatric services.
- All products and materials developed will be subject to NMHP-MoPH review.

36. In addition, this sub-component will include:

- Development and piloting a program for Training for Managers and Small Business Owners on how to support the mental health of their staff.
- Development of a new and improved software platform for delivery of the SbS program suited for implementation in Lebanon and building on results from findings of recent research trials of the intervention.<sup>60</sup>
- Development and implementation of sensitization and awareness programs on mental health awareness in general and specifically for participation in SbS and SH+ interventions. This activity supports the operationalization of the community component of the NMHP strategy.

### **Sub-Component 1.3 Enhanced Support for to Persons with Disabilities and OPs (US\$1,575,000)**

37. The project will provide support for the implementation of services through specialized NGOs and CSOs to improve access to quality healthcare for persons with disabilities and OPs, through outreach, at-home health and physiotherapy services and other interventions.<sup>61</sup> Specifically, the project will support: (a) undertaking of a pilot local participatory needs assessment; (b) training of caregivers to deliver at-home therapies including physiotherapies; and (c) development of peer-to-peer activities and self-help groups. In addition, the project will develop and pilot an Identification, Counselling and Referral portal for persons with disabilities and OPs in order to match potential beneficiaries to existing services.

38. Furthermore, the project will support:

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<sup>59</sup> WHO. 2020. <https://www.who.int/news/item/23-01-2020-guided-self-help-intervention-reduces-refugees-psychological-distress-and-improves-wellbeing-in-humanitarian-crises>

<sup>60</sup> This will be built as an open-source product for other countries to be able to use the Application.

<sup>61</sup> While Children with Disabilities represent a critical sub-group of the most vulnerable populations, the project cannot directly address their needs considering that they have a unique set of needs which requires further expertise and specialization that cannot be covered due to the project's limited finances.



- MMUs and their outreach teams in identifying persons with disabilities and OPs in remote and hard-to-reach parts of Beirut who are at risk of being excluded due to: a) lack of assistive devices; b) inaccessible physical environments; and c) unaffordability and lack of accessible transport. These MMUs can then provide transport and referrals to NGO teams.
- Capacity building and financing for NGO-run PHCs, to enable the procurement and delivery of assistive devices (e.g., crutches, hearing aids and visual aids) along with the provision of promotive, preventive, therapeutic (including Non-Communicable Diseases, essential and life-saving medications), rehabilitative and palliative services. This activity will be aligned to existing MoPH-approved service plans, whereby distribution is done in a coordinated manner with leading local stakeholders. The principles underpinning the distribution will be derived from the WHO's "Guidelines on the provision of assisted devices in less-resourced settings,"<sup>62</sup> which outlines how devices should be resourced and distributed.

39. Finally, support will also be provided for the development of NGO-led social media communication strategy and dissemination of information aimed at reducing stigma related to persons with disabilities and OPs and inform potential beneficiaries of available services.

40. All activities for this sub-component will, wherever possible, be synchronized and aligned with existing services and plans approved by the MoPH and MoSA and current initiatives from CSOs targeting persons with disabilities. The IA, together with local NGOs will work with MoPH and MoSA to ensure that there is synergy and in doing so develop a set of protocols.

#### **Cross-Cutting Component Support to migrant domestic workers and refugees working as domestic workers**

41. It is estimated that at least 24,500 migrants were directly affected by the blast – having lost their livelihoods<sup>63</sup>. The situation for many has deteriorated since then. The support provided under Component 1 will be available to migrants and refugees. In addition, within each of the sub-components, targeted awareness raising and sensitization activities for migrant (domestic) workers and refugees will be carried out. However, due to the limited financial resources and the complexities of the challenges faced by the refugee and migrant population in Lebanon, the services delivered through this project will only target them indirectly.

#### **Component 2. Capacity Building and Project Management (US\$490,000)**

42. This component will finance project management costs over the project life, including the Implementing Agency's (IA) incremental operating costs incurred while managing and supervising project activities. Project management activities performed by the IA will include: (i) overall project management, fiduciary, and safeguards management; (ii) providing technical assistance (TA) and institutional strengthening

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<sup>62</sup> For full guidance see here: <https://www.who.int/publications/i/item/guidelines-on-the-provision-of-manual-wheelchairs-in-less-resourced-settings>

<sup>63</sup> IOM; Well-Being and Security of Migrant Workers in Lebanon Deteriorate Since Beirut Blast, <https://www.iom.int/news/well-being-and-security-migrant-workers-lebanon-deteriorate-beirut-blast>, dd 10.16.20



measures; (iii) developing and implementing a monitoring and reporting plan to provide visibility of the results and a transparent model for the development and implementation of all activities.

- 43. Support to beneficiary NGOs shall include but is not limited to: guiding and mentoring of staff; targeted support to enhance NGO beneficiary work planning, enhanced accountability and transparency mechanisms, and bolstering capacity; support to the upgrading of beneficiary M&E systems, and just-in-time technical assistance. All capacity building support to beneficiary NGOs will be gender sensitive and will be made accessible and without segregation to persons with disabilities. Specific solutions will be developed to tackle common challenges such as physical inaccessibility and barriers to full inclusion in social services or stigmatization.

Legal Operational Policies

	Triggered?
Projects on International Waterways OP 7.50	No
Projects in Disputed Areas OP 7.60	No

Summary of Assessment of Environmental and Social Risks and Impacts

**Environmental and Social**

- 44. The Environmental risk rating of the project is Moderate. Overall, the project will have positive impacts in supporting immediate social recovery needs of vulnerable groups impacted by the POB explosion of August 2020. Although there are no civil works interventions, for the support of MMUs and PHCs and their outreach to the elderly and persons with disabilities (under Component 1.3), there are risks associated with the handling of medical waste. While mitigations measures may already exist, the Medical Waste Management Plan (MWMP) was prepared by the IA to address potential risks associated with medical waste and disposal and to recommend mitigation measures prior to the project appraisal. The MWMP was disclosed by the IA in September 2021. The IA will also ensure proper mitigation measures are in place to address potential road safety issues as well as health and safety issues related to community exposure (including on infectious diseases) in regard to the moving MMUs. All these risks and impacts are predictable and could be mitigated and reversed with available means while following the WHO and National Guidelines, WBG Environmental, Health and Safety guidelines and good international industry practices. In addition, the IA will prepare, adopt, and implement an Occupational Health and Safety (OHS) action plan that includes measures specified in the labor management procedures (LMP) in line with ESS2. The IA will ensure that the general workplace OHS, COVID-19-related and OHS due to waste handling and other services are properly managed.

- 45. The project is rated as having 'moderate' social risks. The overall project interventions are expected to have predominantly positive social impacts as they aim to provide support to survivors of GBV through: (i) emergency shelter; (ii) case management; (iii) psycho-social support; (iv) life skills; (v) referrals for





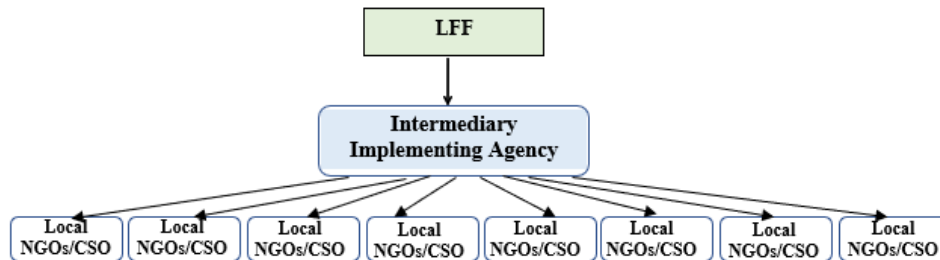
tailored services, including medical services and psychosocial and legal assistance; and (vi) provision of education for children in shelters. It will also provide enhanced support to people with psychosocial, and mental health problems including youth, persons who have lost livelihoods, persons with disabilities and migrants in Lebanon. In addition, it will provide enhanced support to persons with disabilities and OPs by improving access to quality healthcare for these vulnerable groups through outreach, at-home health, physiotherapy services and other interventions. The project interventions are aimed to support all identified vulnerable groups regardless of their nationalities. In order to get a better understanding of the profiles of the vulnerable groups being targeted under this project, and the challenges they face, the IA has prepared a Socio-economic Assessment (SEA) report. Amongst the social risks and impacts identified in this report are those of perceived exclusion by intended beneficiaries, the perception of inadequate prioritization or delays in addressing stakeholders’ needs leading to potential alienation on the part of targeted populations, and the potential for Sexual Exploitation and Abuse/Sexual Harassment (SEA/SH) related risks. To mitigate these concerns, a robust GM with SEA/SH referral pathways and a clear communication plan for reaching all vulnerable groups affected by the POB will be upheld throughout the project life cycle.

### E. Implementation

#### Institutional and Implementation Arrangements

- 46. **Due to the current political context in Lebanon, the central involvement of non-governmental and civil society actors in recovery and small-scale reconstruction efforts is crucial for restoring trust in existing institutions and avoiding raising perceptions of elite capture and corruption.** Accordingly, the LFF prioritizes engagement of national NGOs/CSOs as one avenue for support for the response to the POB explosion.
- 47. **The architecture of the NGO-implementation arrangements (Figure 1) is designed to ensure that there is transparency, legitimacy, and oversight,** particularly in terms of citizens’ recognition and acceptance of interventions. These implementation arrangements aim to ensure that reconstruction and reform efforts are underpinned by inclusive and meaningful citizen engagement efforts.

Figure 1 - NGO Implementation Arrangements



- 48. **Governance arrangements for the LFF is included under the broader 3RF institutional architecture.** Broad strategic direction, oversight of implementation and coordination across stakeholders and financing will be provided by the 3RF Consultative Group. The LFF trust fund management for the NGO financing window will be entrusted to the care of a trust fund manager and team that will be part of the



3RF Secretariat. The Secretariat's Program Management Team (PMT) would be responsible for administration and regular progress and financial reporting, preparing a program level results framework, and developing program level work plans and budgets that will be endorsed by the 3RF Steering Committee. An Independent Oversight Body, to be established as part of the 3RF, will monitor the use of LFF funds and implementation of all interventions.

49. **Due to the lack of local NGOs that meets the World Bank's fiduciary requirements and standards to receive and manage grants, an IA was selected as the "Grant Recipient"**. This was done via a competitive process. Technically, the IA demonstrates extensive expertise in supporting interventions focused on GBV survivors, psychosocial wellbeing and persons with disabilities and the elderly. In Lebanon, the IA is already engaged in these three sectors and well positioned to expand their existing on-the-ground networks to include a greater number of local stakeholders. Further, legal and fiduciary due diligence carried out by the World Bank confirms the IA's eligibility to sign a Grant Agreement (GA).
50. **The IA will form the "Project Management Unit" (PMU) to implement activities through sub-grants to local NGOs, as well as take on the role of fiduciary supervision of the subcontracted NGOs, developing reporting standards for partnering NGOs, and carrying out independent audits.** Both the IA and subcontracted NGOs will be bound to World Bank Environmental and Social Safeguards standards, as applicable to their interventions. In addition to providing sub-grants and sub-contracting projects to achieve project objectives, the IA will support communication and outreach and provide strategic oversight and coordination vis-à-vis the respective sector interventions.
51. **The IA has extensive operational experience in Lebanon, inclusive of successfully managing a multi-million US dollar portfolio and engaging with civil society and government actors.** Furthermore, the IA's in-house systems and policies in provide a comprehensive framework for building effective partnerships with beneficiary NGOs, while also allowing for the identification and management of programmatic, operational, financial, and reputational risks.

## **Citizen Engagement**

52. **Project beneficiaries will be consulted regularly throughout implementation on their satisfaction, suggestions, comments, or concerns.** This will take place through the IA's standing citizen engagement mechanisms, which are strong. The periodicity of the feedback generation will depend on the NGO partners' capacities and systems in place to consult beneficiaries and collect their feedback, through quantitative or qualitative participatory data collection mechanisms (i.e. surveys, focus group discussions, key informant interviews, etc.). To ensure these are sufficient for achieving minimum accountability standards, the IA will undertake supplementary assessments and capacity building as needed. The project will further support inclusive outreach campaigns and mid-term and end of project beneficiary satisfaction surveys. Further, the IA will agree with its partners, depending on their capacities and structures, a frequency and modality to disseminate the results of the grievance mechanism to the public. Data protection principles will be applied by removing identifying information of beneficiaries, and results will be disseminated in a thematic/topic manner. Sensitive and critical complaints will be channelled to the IA's PMU for handling and to agree corrective actions with the partners.
53. **The project will be closely aligned with the 3RF program level citizen engagement and outreach interventions, as outlined in Lebanon: *Strengthening 3RF Oversight, Engagement and Monitoring ASA.***



To the extent possible, this project will avail of the planned Digital Citizen’s Portal to disseminate information and utilise information and communication technology (ICT) enabled tools for consultations and data collection. Complaints and challenges that are related to the LFF program and/or cannot be addressed by the IA’s internal grievance mechanism will be escalated to the 3RF feedback/grievance mechanism for redressal.

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**APPROVAL**

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