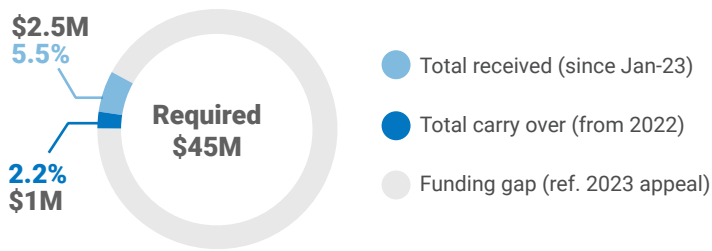




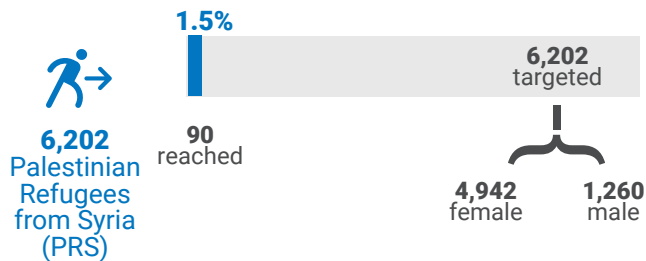
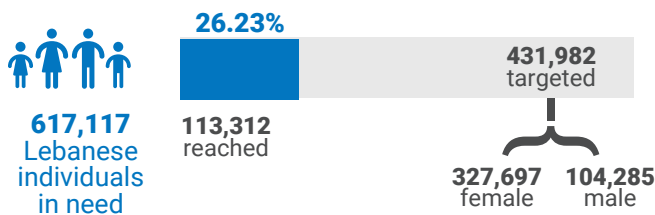
Upon the endorsement of the LCRP steering committee on Dec 13th 2022, the Nutrition sector has been activated as a standalone sector under LCRP. Nutrition sector has identified four main outcomes for the sector strategy in 2023. These outcomes are defined based on the sector's analysis of the context and the nutritional vulnerabilities across the life cycle. They are informed by the guideline principles that the prevention comes first and that multiple delivery platforms must be held accountable and utilized to deliver essential nutrition interventions to prevent all forms of malnutrition. The four outcomes are as listed below: **Outcome 1:** Young children and their caregivers have access to and demand for services aiming at prevention of all forms of malnutrition and the associated developmental risks (0-5 years of age). **Outcome 2:** School-age children and adolescents have access to and demand for services aiming at prevention of all forms of malnutrition – particularly among girls. **Outcome 3:** Women have enhanced access to and demand for services aiming at the prevention of all forms of malnutrition – particularly during pregnancy and lactation. **Outcome 4:** Children have access to growth monitoring, screening, early detection and treatment of wasting in early childhood.

2023 Sector Funding Status

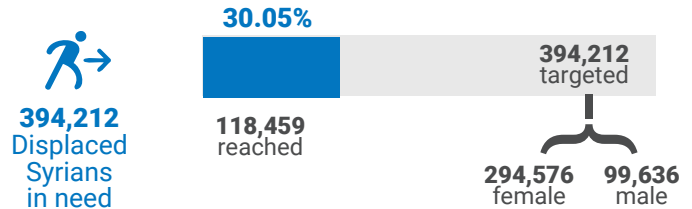
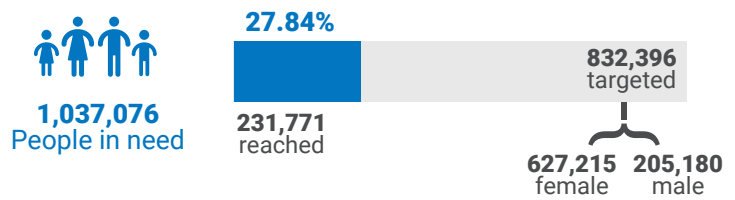
As of 31 June 2023



2023 population figures by cohort

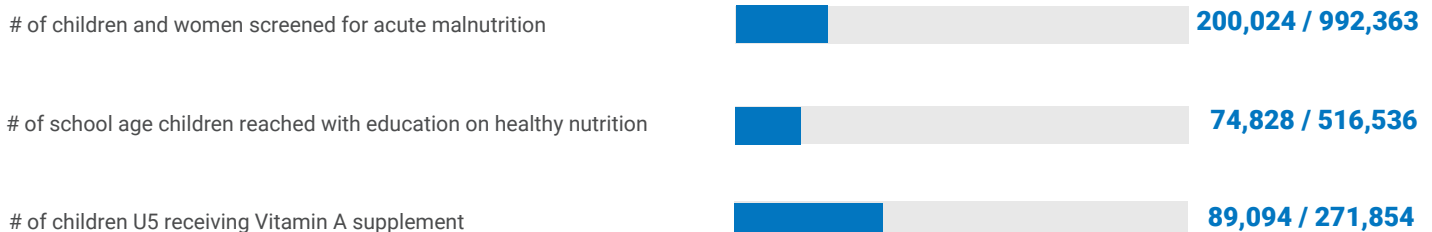


2023 population reached



Progress against targets

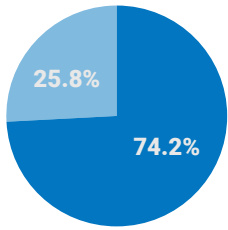
Key Achievements



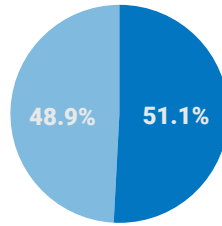


Gender Breakdown by different age groups

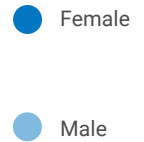
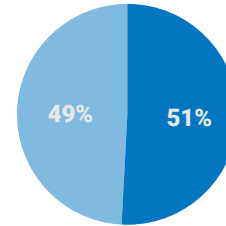
Caregivers of children under 5



Children under 5



School Age Children



1. Multi-sectoral situation update

The economic situation in Lebanon continued to deteriorate during the second quarter of 2023, leading to a significant decline in purchasing power for families. In June 2023, the annual inflation rate reached a record high of 260 per cent compared to June 2022, the highest level since comparable records began in 2018. The cost of living, as measured by the Survival Minimum Expenditure Basket (SMEB) covering food, essential goods and services, reached LBP 24,925,064 in May 2023 (down slightly from LBP 27,214,894 in April, but an overall increase from earlier in the year). The food SMEB increased by 94 per cent between January and May 2023. The average price of bottled water in Lebanon during the first six months of 2023 amounts to a 1,400 per cent increase in Lebanese pound and 135 per cent increase in USD value when compared to the price in January 2021. The price of trucked water increased by over 1,500 per cent (15-fold) in Lebanese pounds and over 350 per cent in USD value during the same period.

In April and May 2023, a series of raids and arrests were conducted by the Lebanese Armed Forces (LAF) leading to the deportation of displaced Syrians. These events created anxiety amongst the displaced community, coinciding with the implementation of restrictive measures by various municipalities, leading to families reducing their movements and access to services. This represented an overall reduction in the protection space in Lebanon. Disturbingly, gender-based violence is on the rise across all areas

of Lebanon. Reports indicate an increase in sexual violence and harassment, particularly in workplaces such as farms, agricultural sites, and domestic housework employment. Additionally, child marriage, a continuous violation of child rights, has seen a concerning shift in the age of forced marriages, with girls as young as 12-13 being subjected to early marriages. Gender disparities persist in the labour market, with women and girls being underrepresented in cash-for-work opportunities and facing limited employment opportunities overall. Inter-communal relations in Lebanon have reached their lowest point since 2017. The latest UNDP-ARK perception survey from March 2023 reveals that 46 per cent of respondents reported negative inter-communal relations, compared to 34 per cent in April 2022 and 21 per cent in July 2018. The main drivers of tension include competition for lower-skilled jobs and access to vital services such as electricity, healthcare, and waste management.

2. Key achievements of the sector at the output level



Figure 1. Essential Nutrition and Child Development Actions

To respond to the deteriorating nutrition situation in Lebanon, the nutrition sector has advocated and supported the integration of nutrition and child development through multiple delivery platforms. This has resulted in the activation of an integrated nutrition and child development initiative "Rising". Rising utilizes common multiple platforms (Primary Health Care Centers, nurseries/day cares, community Initiatives on health and education), to simultaneously address immediate and underlying causes of malnutrition and early childhood developmental deprivations and impairments among the most vulnerable children. This is to prevent stunting, other forms of malnutrition, and associated cognitive deprivations to help all children reach their growth and development potential. The Rising Initiative relies on key essential nutrition and developmental interventions that aim to enhance adequate diets, promote nurturing and responsive care practices, and provide nutrition and child development services to prevent all forms of malnutrition and developmental deprivations and delays.

Outcome 1: Nutrition and child development during early years. During the reporting period, 213,461 children (126,085 girls, 87,376 boys, 103,532 Lebanese, 109,740 Syrians, 189 Others) under the age of five years and their caregivers have received essential interventions for the prevention and management of different forms of malnutrition and developmental deprivations; over 13,437 caregivers (9,332 women, 4,105 Men, 4,192 Lebanese, 9,086 Syrians, 159 Others) of children under the age of five with messages on breastfeeding, Infant and Young Child Feeding (IYCF), responsive care and feeding, healthy diets, and maternal nutrition. Compared to last year's progress on numbers reached with Social Behaviour Change and counseling an increase of 20 per cent is observed during the same quarter. To address the micronutrient deficiencies among children, 22,049 children (11,194 girls, 10,855 boys, 12,869 Lebanese, 9,168 Syrians, 12 Others) under the age of five were provided with multiple micronutrient powders for point-of-use food fortification at home, while over 89,094 (45,438 girls,



43,656 boys, 43,656 Lebanese, 40,092 Syrians, 5,346 Others) under the age of five have received vitamin A supplementation.

Lastly, to measure the nutritional and developmental status of young children in Lebanon and to identify the drivers of children's nutrition and developmental vulnerabilities across Nurturing Care domains, the Lebanon Nutrition Sector under the leadership of MOPH and in collaboration of UNICEF, MERCY USA, WFP, WB and other partners and with the support of Groundwork, and Harvard University School of Public Health, has designed the first ever national integrated micronutrient, anthropometric and child development survey. The data collection will be launched in July 2023, and the results will inform decision making for future multi-sectoral actions promoting children's nutrition, and development in Lebanon.

Outcome 2: Nutrition of school-age children and adolescents. In coordination with WFP, and the Food and Agriculture Sector (FSA), the Nutrition Sector is supporting the Ministry of Education and High Education (MEHE) to revise or upgrade existing national guidance for a nutritious and safe school food environment. In addition, an agreement was signed between UNICEF as the sector lead with MEHE to support the Ministry to upgrade the school health and nutrition program. This agreement is focusing on three four main pillars, 1) revitalizing an upgraded integrated school health, nutrition, and child development screening and referral during the next scholastic year, 2) support harmonized social behavior change communication to promote the knowledge and practices of students in all cycle on healthy life style, wellbeing and nutrition, 3) provision of micronutrient supplements for the adolescent girls at high risk of Anemia, and 4) support to revise the national school nutrition standards. This pillar is new to the nutrition response in, hence significant time has been spent on the inception and preparatory phase. Having said this so far, during the first six months of 2023, 74,828 school-age children and adolescents (38,162 Girls, 36,666 Boys) were reached in a total of 132 schools. 22 new schools have benefited from activities aiming at improving the food and nutrition environment and diverse meals/snacks were provided to students during 74 school days. On the other hand, the sector is closely coordinating with the FSA to enhance nutrition-sensitive interventions by providing technical support in developing standard operating procedures and guidelines for the composition of food baskets, provision of healthy snacks to school-age children, and enhancing the referral mechanism to nutrition actors when needed.

Outcome 3: Nutrition of women. The Nutrition sector has supported gender-responsive plans and projects to prevent malnutrition in women during pregnancy and breastfeeding. These projects support interventions to improve women's nutritional status before and during pregnancy and while breastfeeding. During this reporting period, the nutrition sector's Social Behaviour Change strategies have reached over 2,584 women (123 Lebanese, 2,460 Syrians, 1 Other) to promote nutritious, safe, affordable, and sustainable diets during pregnancy and lactation. In addition, about 43,959 pregnant and lactating women (PLW) (16,453 Lebanese, 27,483 Syrians, 23 Others) are reached with essential nutrition interventions including screening for acute malnutrition, provision of Micronutrient Supplements, provision of specialized nutrition counseling, and treatment of acute malnutrition.

3. Key challenges of the sector

Despite the activation of the nutrition sector, policymakers, donors, and development partners are facing inertia to secure resources and respond to the growing triple burden of malnutrition in Lebanon. Consequently, the nutrition response remains underfunded. Despite significant resources allocated to food assistance in response to food insecurity in Lebanon, families face impossible choices to offer optimum nutrition and feeding for their children. Lack of funding for nutrition programmes might disproportionately affect pregnant and lactating women due to their increased nutritional needs. Lack of nutrition can also expose women and girls to risks of gender-based violence and hamper their mobility including lifesaving services.

Donors' decisions to secure resources to respond to the nutritional crisis in Lebanon is still informed by the classical narrative of nutrition, while the hazards of the hidden forms of malnutrition on the growth, development, and well-being

Outcome 4: Prevention and management of acute malnutrition. The Nutrition sector has aimed to enhance the quality and coverage of the community-based management of acute malnutrition (CMAM) by taking the stoke of the progress and supporting the Ministry of Public Health and key partners including international NGOs supporting the acute malnutrition program to address the bottlenecks. So far 170,567 children under the age of five (87,296 Girls, 83,271 Boys, 88,029 Lebanese, 82,522 Syrians, 16 Others) have been screened for malnutrition (this has increased by almost 10 folds compared to the same period in 2023), among which 3,852 (951 Lebanese, 2,902 Syrians) are identified with stunting and referred for counseling services and 1,080 children (300 Lebanese, 780 Syrians) with identified acute malnutrition are admitted to CMAM program. The recovery rate of CMAM program for the first quarter of 2023 is 80 per cent.

When looking at trends, the admission to CMAM programme has tripled in June compared to March 2023, the same trend is observed for PLW. Over 60 per cent of children with acute malnutrition admitted to malnutrition program are non-Lebanese (mainly Syrians). And over 65 per cent of PLW admitted to the acute malnutrition program are non-Lebanese. North and Akkar followed by BML, and Bekka, Baalbek and Hermel regions have the highest rates of admission to malnutrition programs.

Referral trends. Between April and June 2023, the nutrition sector received an increased number of referrals: 630 referrals in Q2 when compared to the number of referrals in Q1 which was 12. Among the number of referrals in Q2 of 2023, 94 per cent were accepted. At the geographical level, numbers of referrals are the mostly in Bekaa with low referral rates in other governates. To enhance and diversify the referrals to the nutrition sector will work closely with relevant sectors to improve the referral system and follow-up, specifically given the importance of several sectors in the nutritional well-being of the target population such as food, WASH, Health, and Education. The nutrition sector partners will work to improve the referral mechanism from other sectors though highlighting the nutrition services provided at field level and elevate efforts to disseminate IYCF hotline within multisectoral activities.

Mainstreaming activities. As part of the nutrition sector work plan aiming to build partners capacity to implement and promote approaches to strengthen Accountability to Affected Populations (AAP), the sector organized a training on AAP, on Monday June 12th. The AAP training session was provided by AAP and community Engagement specialist of UNICEF and aimed to enhance the knowledge and skills of partners on the principles of the AAP and its integration to the nutrition sector response illustrating how to apply AAP key principles into the sector activities. As a result, the technical capacity of 35 program managers, MEAL officers, cross cutting focal points, nutrition staff front liners from wide range of nutrition sector partners (including INGOs, NGOs, academia and MOPH focal points) were raised in AAP principles and its integration into the nutrition sector response. The nutrition sector has assigned a gender and GBV focal point to support the sector in incorporating gender equality measures into programming. The sector is planning for a gender and GBV mainstreaming training for sector members to ensure that the sector response does not perpetuate gender inequalities.

of children and women is underestimated. To address this, the nutrition sector has developed and put in place an advocacy strategy which mobilizes more donors, partners, and resources for nutrition action. As part of this systematic advocacy, the sector has developed and published an advocacy report on Child Food Poverty to unpack the impacts of the food security crisis on the deist and the nutrition of young children in Lebanon and to highlight the importance of investment and scaled up actions on nutrition interventions aiming at improving the diets of young children. <https://uni.cf/42BaDNO>

To further enrich this narrative, the forementioned national nutrition and child development survey will provide fresh evidence to better understand the overall nutritional status of the population including the most hidden forms of malnutrition and their potential impacts on the wellbeing, growth and thriving of the children, adolescents, and women living in Lebanon.



4. Key priorities for the following quarter

During the third quarter of 2023, the nutrition sector will prioritize outcomes two (nutrition of school age) and outcome three (women's nutrition) given their slower progress compared to the other two outcomes. Specially the upcoming scholastic year will be utilized to operationalize the integrated health and nutrition response for over 300,000 students from most vulnerable communities. In addition, the sector will accelerate efforts on the expansion of the Rising Initiative (integrated nutrition and child development service provision) through PHCCs, Nurseries, schools and community platforms. This will be done by establishing scaled-up partnerships, and capacity building of partners to serve the most deprived localities with integrated nutrition and child development interventions. In addition, a network of unsupported Primary Healthcare Centers (PHCCs) will be equipped with resources and skills to deliver scaled-up nutrition and child development services through facility-based and community-based and outreach strategies through standardized practices for community health workers. In addition, following the release of the new global guideline on management of wasting, nutrition sector will lead organization of a national consultation to discuss the implication of the new guideline on Lebanon CMAM program and to start the process of revising the national CMAM guideline in Lebanon led by UNICEF in collaboration with other partners

including WHO, WFP, IOCC and other members of the nutrition task force. Lastly the sector will support the start and completion of the data collection for the first-ever Lebanon Integrated Micronutrient and Anthropometric Survey (LIMA) and the sector will also closely monitor the implementation of the advocacy strategy to mobilize more resources and to improve utilization of the referral system and follow up among all concerned sectors.

Voices from the field. Six months old displaced syrian infant was severely dehydrated and malnourished when her parents took her to the Primary Healthcare Center in the Bekaa, in Q1 2023, where she was diagnosed and referred for hospitalization and admitted to the in-patient treatment of acute malnutrition supported by UNICEF. After 17 days in the in-patient malnutrition treatment program, once Touka was stabilized, she got referred to out-patient treatment at the treatment healthcare center in Taanayel, and she has recovered from malnutrition. "Since birth, she has been weak and smaller than her peers. However, at nine months of age, she has shown remarkable progress after the malnutrition treatment she received. She has now increased in weight and enjoys enhanced mobility," her mother Batoul expressed.



Figure 2. A 6-month-old displaced syrian infant diagnosed with severe acute malnutrition and referred for treatment



Figure 3. Infant after receiving the treatment for malnutrition

January 2023, Khadija a 17 months-old, displaced Syrian, was screened for malnutrition by the outreach team in Kouwaykhat, Akkar. According to Khadija's Mid-Upper Arm Circumference measurement, she was diagnosed with Severe Acute Malnutrition. Khadija began her treatment at Ataa El Jazil

Primary Healthcare Center El Bireh, Akkar, and took approximately two months to be treated fully. She was discharged as a cured case in March 2023.



Figure 4. Khadija, a 17-month-old girl, screened for acute malnutrition by Mercy USA outreach team in Akkar.



Figure 5. Khadija after completion of SAM Treatment after 2 months

Unfortunately, more severe cases of acute malnutrition are emerging. A 6-month-old girl weighing 2 Kg was diagnosed with complicated severe acute malnutrition. She was referred and admitted to a stabilization center for treatment of severe wasting.

Miriam additional support and education. "The lactation specialist provided me with all the tools and advice to treat my condition, and I managed to continue breastfeeding as I believe it is the ideal choice", Aya said.

Aya, age 26, is a Lebanese mother of one-year-old Miriam, from Tyre, South Lebanon. Miriam suffered from a fungal infection in the tongue and throat and transmitted the infection to Aya, who experienced crackled nipples and severe pain during breastfeeding. Seeking help, Aya called the IYCF national hotline, as she was anxious about her ability to continue breastfeeding.

After the lactation specialist provided support for Aya, Miriam is growing well. "I am very happy with my daughter's health and development. I plan to continue breastfeeding her as long as possible. It is the most natural choice and decreases the risk of diseases and is the most affordable and always available", Aya said.

Upon contact, a lactation specialist guided Miriam on the remedies to heal the infection and continue breastfeeding. The lactation specialist also gave

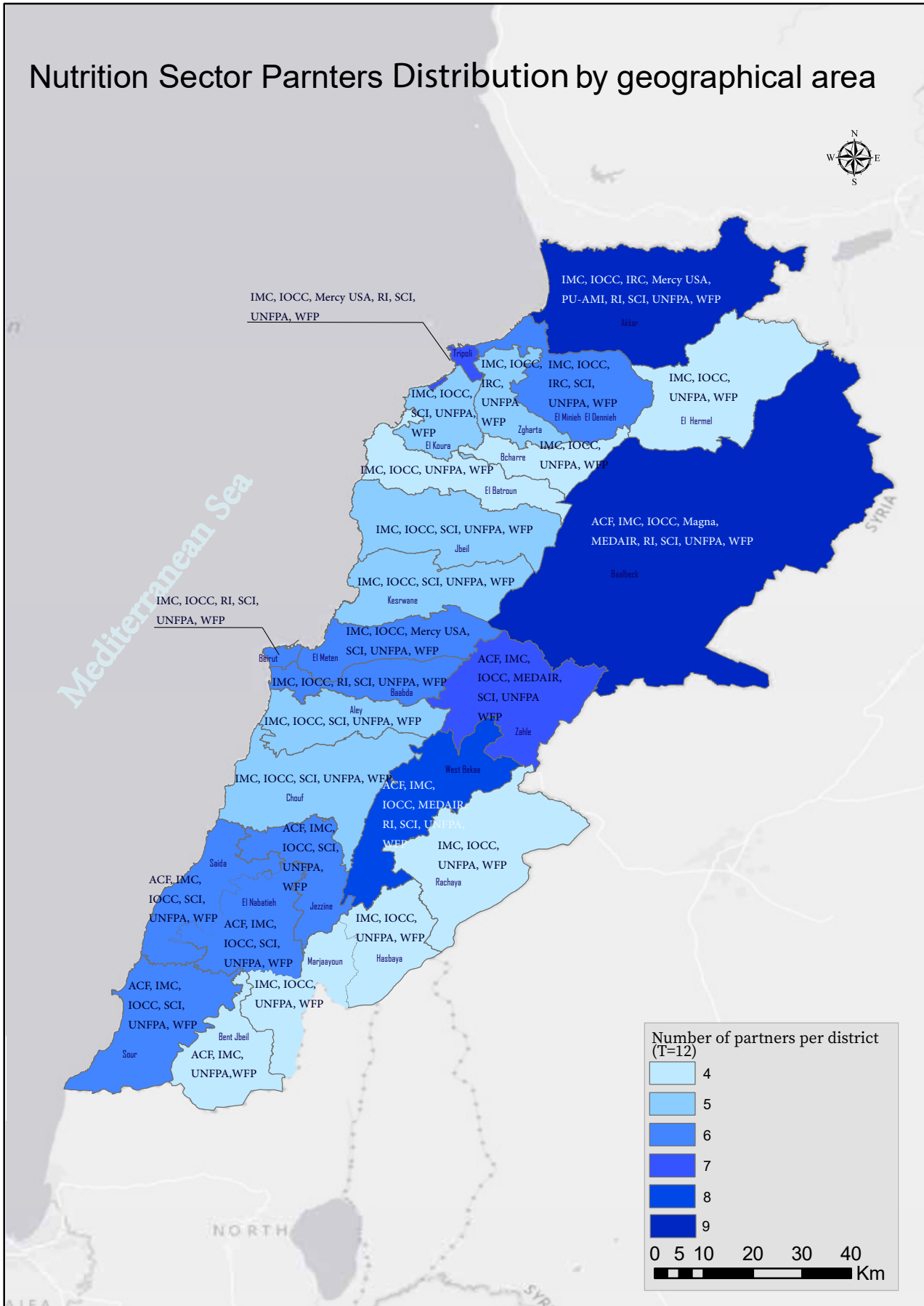


Partners per district

12 NGO Partners have reported their activities up to Quarter 2:

ACF, IMC, IOCC, IRC, MAGNA, MEDAIR, Mercy-USA, PU-AMI, Relief International, SCI, UNFPA, WFP

Nutrition Sector Parnters Distribution by geographical area



For more information, please contact:

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