

Winter 2014/15 in Jordan and Lebanon

As the Syrian crisis enters its fifth year with no end in sight, the humanitarian situation of persons with specific needs is appallingⁱ. Already unable to obtain employment in Lebanon and Jordan, most Syrian refugees struggle to earn an income. The few precarious informal income-generating initiatives are highly competitive and require substantial physical labour. This has limited the participation of most refugees with specific needs. The status quo has left most refugees with specific needs utterly dependent on family and humanitarian assistance.



Bar Elias, Bekka Valley, Lebanon ©M. Tataryn

According to the recent Lebanon vulnerability assessment, half of the households visited had a member with specific needs, mainly chronic diseasesⁱⁱ. Over 7% of the vulnerable households were headed by older people (aged 60 years and above)ⁱⁱⁱ. Likewise, the level of vulnerabilities amongst Syrian refugees has significantly increased over the past year. In Lebanon, more than 40% of the refugee households are currently relying on food vouchers, a sharp increase from 24% in 2013^{iv}.

Challenges facing Syrian refugees with specific needs in winter

A survey conducted by HelpAge International (HAI) and Handicap International (HI) showed that older people and people with disabilities, injuries, and chronic illnesses amount to 30% of the total refugee population in Jordan and Lebanon^v. The harsh weather conditions during winter(2014/2015) has hit people with specific needs particularly hard: field assessments conducted by HI and HAI indicate that most refugees with specific needs have had to forgo some basics needs, opting to spend their regular cash assistance on rent^{vi}. Although rent is the major expenditure, most shelters remain inadequate. Therefore, these most vulnerable people had to cope with a lack of heating and warm clothes. This is a major welfare concern amongst the Syrian refugees, especially for people with specific needs.

Who are people with specific needs?

People with disabilities, with injuries, with chronic diseases and older people along with their families have been shown to consistently face multiple barriers in accessing humanitarian assistance.

Barriers include physical inaccessibility, lack of access to information, negative attitudes by community members and service providers, and exclusion from data-gathering and consequent programme planning.

As such the Equal Access Monitor seeks to investigate and profile their concerns.

Invisibility of persons with specific needs in humanitarian reports

Although UN agencies and International NGOs have published several 2014/2015 winter response reports, only a handful of these reports present figures regarding winterization services for older people, people with disabilities, people with injuries and persons with chronic diseases. The needs and experiences of people with specific needs are cross-cutting and should not be left only to those agencies seen as “specialist providers.” Given the accepted commitments of agencies to reach “most vulnerable populations” it is not enough to ask questions about vulnerability during initial assessments; the successes and challenges of delivering assistance need to also be reported on, including data related specific needs, in order to improve coverage in future.

Lack of decent shelter

Dignifying and decent shelter is often singled out as the priority need amongst numerous Syrian refugees with specific needs in Jordan and Lebanon. Despite countless humanitarian interventions, the living conditions of most refugees with specific needs are precarious. UNHCR Home Assessment report¹ established that 47% of refugee households inhabit shelter in bad^{vii} or undignified conditions, while 46% of households have no heating^{viii}. Whilst in Lebanon, the joint UN Vulnerability assessment established that 55% of Syrian refugees live in sub-standard shelters, with approximately 1,435 informal tented sites – 852 of these in Bekaa Valley alone^{ix}. Due to the horrendous shelter situation, most refugees with specific needs had to endure the harsh winter conditions in 2014/2015.

Shelter conditions of Handicap International beneficiaries in Lebanon:

Information from HI's programme database in Lebanon shows that **20% of HI beneficiaries** were found to be living in inadequate shelters between November 2014 and January 2015.

Furthermore, analysis from Handicap International programme database in Lebanon indicated that people with disabilities were much more likely to live in tents (34%) compared to the general Syrian refugee population in Lebanon (15%)^x. In general, Syrian refugees in Lebanon are living in every kind of shelter imaginable: abandoned buildings, sheds and garages, and caravans in addition to shared and private apartments^{xixii}.



Bar Elias, Bekka Valley, Lebanon © B. Achan

¹Data was collected from 41,976 Syrian Refugee Households living out of camps. 84% of the approximately 620,000 Syrian refugees live out of camps.

Access to distribution sites in most affected areas & coordination

Physical barriers during distributions, long distances to distribution sites, the physical inaccessibility and high cost of transport, as well as possible difficulties with leaving dependent relatives at home in order to collect distributed goods (or money) can all contribute to restricted access to winterization services for people with specific needs and their families.

Individuals who have restricted mobility and lack adequate family support, such as older people who have been forced or compelled to leave Syria alone, may also lack access to communication and information channels potentially informing them of services, such as winterization distributions.

HI teams working in rural areas of Jordan and Lebanon between November 2014 and January 2015, during the course of distributions of winter-related support, reported their service users facing significant challenges in accessing distribution points set up by various actors, even though they had qualified for assistance.

Insecurity in Lebanon's Bekaa Valley meant that the provision of assistance was disrupted in certain areas, such as Aarsal. Access to these and other zones was also further restricted in January and February due to **heavy snowfall**.

A sample of specific needs

Here is a snapshot of the prevalence of specific needs of PU-AMI's beneficiaries of winter-related support between Nov 2014 and Jan 2015:

36% of households have one or more person with chronic disease;

11% of households have one or more injured person(s);

10% of Heads of Households are above 60 years of age;

9% of households have one or more disabled person(s) within them.

Age and gender in combination is creating an unprecedented vulnerability in Jordan

An excerpt from UNHCR's 2014 "Living in the shadows" report

80% of Syrians over 60 who are living outside the camps and alone are female, which is high considering that amongst households headed by persons over 60 years, there is a roughly equal split between female- and male-headed households.

Seven out of ten older persons face living conditions assessed as bad or urgent. **These represent a small but highly vulnerable group amongst Syrian refugees.**

Some lack of coordination at field-level was also reported in Lebanon. Significant in-kind assistance is distributed by local actors, often with support from Gulf countries. This is of course well received, but the overall winterization response would benefit from coordination with all actors. **Criteria for accessing winter-related assistance** in Lebanon was tied to available funds and cut-offs for receipt of assistance was largely linked to altitude. The higher up the mountains the village is located, the more likely it was to qualify for the distribution of winter related goods. However, **there was late allocation and approval of funds** which added to difficulties with the roll-out of services as, for certain actors, planning only started in November and distribution was still ongoing in January.



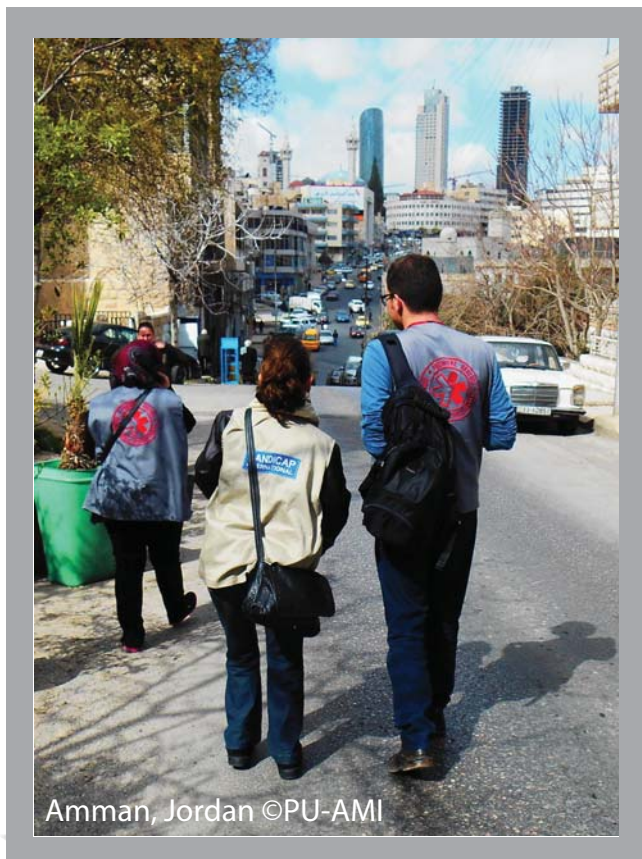
Jordan Valley, Irbid Governorate, Jordan © B. Achan

Sharing a good practice: Referrals between service providers

Many humanitarian organizations are formalizing bilateral referral agreements. The objective is to increase the breadth of services available and to improve quality of humanitarian referral mechanisms. This implies that both “referring organizations” and “recipient organizations”, receive feedback on the assistance provided to a beneficiary with specific needs.

A good practice that should be replicated is the bilateral referral arrangement between Premiere Urgence – Aide Medicale Internationale (PU-AMI) and HI. Although both organizations work with persons with specific needs; one providing shelter (PU-AMI) and the other one undertaking physical rehabilitation (HI), both organizations are complementing each other to deliver an effective response with limited resources.

An important feature of both HI and PU-AMI’s programme is that both organizations conduct household assessments in order to determine the eligibility of beneficiaries for range of services. In order to facilitate smooth referrals, HI staff members were trained by PU-AMI on their winterization assessment criteria. Likewise, HI also provided training to PU-AMI staffs on its target population and selection criteria.



PU-AMI shelter intervention targets extremely vulnerable households. The project activity includes the provision of cash assistance for winterization or a “sealing-off” kit. These “sealing-off” kits contain the materials necessary for households to improve insulate unsuitable shelters. Kits include nylon mesh, plastic sheeting, sealant putty and tape, insulation mats, and related materials that help to reduce drafts and insulate floors and doors. For families that are unable to install the “sealing-off” kit, PU AMI has volunteers (fellow refugees) available to assist with installation. Since HI’s Jordan mission didn’t have a winterization or shelter project in 2014/2015(due to lack of funds) HI and PU AMI agreed on specific quota of referrals through a formal arrangement where HI service users could benefit from PU-AMI’s winter assistance in 2014/2015.

The arrangement between PU-AMI and HI is an illustration of how two organizations can cover a broader range of vulnerability-related needs to enhance access of services for persons with specific needs.

Recommendations

1 Planning for winter response by humanitarian actors should begin early every year. Distribution needs to be done at the very beginning of winter, ideally in October - November. UN coordination mechanisms for non-food items and shelter anticipate starting planning and budgeting for the 2015-16 winter in July, 2015. This should prove to be a substantial improvement in winter preparedness.

2 Sex, age, chronic disease and disability-disaggregated data should be used to inform future distributions. A common, comprehensive vulnerability survey such as Jordan's Vulnerability Assessment Framework (VAF) and common beneficiary database Refugee Assistance Information System (RAIS) are excellent improvements in data collection that can produce necessary, comparable information regarding vulnerable populations, including those with specific needs. It will be important to introduce similar measures in Lebanon and other countries directly affected by the ongoing crisis in Syria in order to improve targeted, equitable distribution of winterization (and other) services. Post-distribution assessments also need to provide sex, age, chronic disease and disability-disaggregated data, in order to properly measure the impact of distribution on people with specific needs.

3 Coordination mechanisms should be inclusive of all actors. It is crucial that every effort be made to ensure that local and non-traditional actors (such as Gulf States) are incorporated in coordination mechanisms in order to have an accurate picture of coverage and remaining gaps in the distribution of winter-related assistance. It is important that these non-traditional actors and their projects be included not only in planning and distribution but in post-distribution monitoring, assessment and analysis.

4 Every effort must be taken to ensure that people with specific needs and/or their families have access to economic assistance or non-exploitative means of gaining a livelihood. Economic vulnerability (which is heavily influenced by other vulnerability factors such as age, disability, injury and disease) also has a direct impact on families' vulnerability to winter. Experience from HI and PU-AMI in 2014-15 suggests that one-off cash assistance has been demonstrated to be an effective and well-received method of assisting particularly vulnerable refugee families.

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The Equal Access Monitor provides an overview of the most pressing protection concerns of the most vulnerable Syrian refugees: specifically people with disabilities, people with injuries, with chronic diseases, and older people. It also highlights inclusive interventions by humanitarian actors, which successfully address specific needs arising from the cross-cutting vulnerabilities. It is published on a quarterly basis, each issue focusing on a different topic of current concern to the humanitarian community responding to the crisis in Syria and the situation of Syrian refugees in neighbouring countries. The next issue will be published in June, 2015.


For further information please contact

Myroslava Tataryn
Handicap International
Regional Inclusion Adviser

 + 962 (0) 7 80555723

 ta.region.inclusion@hi-emergency.org

Becky Achan
HelpAge International
Regional Age Technical Adviser

 +962 (0) 7 86146990

 becky.achan@helpage.org

Handicap International – Emergency Response Division
Regional Office – Syria Crisis
Habaniah St Building Number 7 - UM Uthaina - AMMAN – JORDAN

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ⁱ UNHCR, 2015; *Syrian Regional Refugee Response*, UNHCR (8th March).

ⁱⁱ UNHCR, WFP & UNICEF, 2015; 2014 *Vulnerability Assessment of Syrian Refugees in Lebanon: Summary*.

ⁱⁱⁱ UNHCR, WFP & UNICEF, 2015; 2014 *Vulnerability Assessment of Syrian Refugees in Lebanon: Summary*.

^{iv} UNHCR, WFP & UNICEF, 2015; 2014 *Vulnerability Assessment of Syrian Refugees in Lebanon: Summary*.

^v HelpAge International and Handicap International, 2014, *Hidden Victims of the Syrian Crisis*.

^{vi} Handicap International 2014, *Post Distribution Monitoring Report for Cash Assistance in Jordan*

^{vii} Bad shelter is described by UNHCR (2014) as permanent or transitional shelter with only small space per person. Ventilation, heating, electricity, kitchen and facilities are poor. Whereas, Urgent/Undignified conditions are; tent, scrape house, clay house, warehouse, or cave uninhabitable; with ventilation, heating, electricity, kitchen and facilities below standards.

^{viii} UNHCR, 2014; *Living in the Shadows: Jordan Home Visit Report*, UNHCR (December).

^{ix} UNHCR, WFP & UNICEF, 2015; 2014 *Vulnerability Assessment of Syrian Refugees in Lebanon: Summary*.

^x Handicap International, 2014; DVFP Programme Database – Lebanon.

^{xi} 2015, *Syrian Refugee Response: Interagency Update on Winter Assistance, Lebanon* (January) 2015

^{xii} Programme data analysed from the beneficiary database of HI's emergency programme in Jordan suggests that 17% of a sample of 2,000 current beneficiaries are living in such temporary or incomplete shelters.