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Emergency Plan of Action Operation Update

Lebanon /MENA: Beirut-Port Explosions

 International Federation
of Red Cross and Red Crescent Societies

Emergency appeal n° MDRLB009	GLIDE n° OT-2020-000177-LBN
Operation update n° 3; date of issue: 3 December 2020	Timeframe covered by this update: August – October 2020
Operation start date: 09/08/2020	Operation timeframe: 24 months and end date: 30/08/2022
Funding requirements (CHF): 20,000,000	DREF amount initially allocated: CHF 750,000
N° of people being assisted: 105,600 people	
Red Cross Red Crescent Movement partners currently actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of the Red Cross (ICRC), 21 Partner National Societies: German RC, Danish RC, Norwegian RC, Icelandic RC, British RC, Swiss RC, Netherlands RC, Finnish RC, French RC, Swedish RC, Austrian RC, Spanish RC, Canadian RC, Japanese RC, Qatari Red Crescent, Kuwait RC, United Emirates RC, Iraqi RC, Iranian RC, and in coordination with PRCS-Lebanon Branch.	
Other partner organizations actively involved in the operation: Lebanese Armed Forces (LAF), Internal Security Forces (ISF), Civil Defence, Ministry of Health (MoH) and all governmental national bodies, local authorities, UN agencies, INGOs and local NGOs.	

Summary of major revisions made to emergency plan of action:

There is no major revision required at this stage; only minor changes from EA are indicated in the EPoA and budget. In the case of modifications, these will be highlighted throughout the document.

A. SITUATION ANALYSIS

Description of the disaster

On Tuesday 4 August 2020 at around 6pm, two explosions occurred at the Port of Beirut. The cause remains unclear, but initial reports claim it started with a fire in a firework storage, which extended to highly-flammable and explosive material stored in one of the many port warehouses causing two explosions, the second being massive. This led to an enormous shock wave that rippled through greater Beirut and surrounding areas, extending up to Bekaa area. The sound of the explosion could be heard as far away as the island of Cyprus, located in the Mediterranean Sea 240 km away. The blast flattened the city's port, surrounding structures and infrastructure have been heavily damaged. Many buildings have collapsed or at risk of collapsing, roads blocked due to fallen debris and open cracks in the ground, mass destruction of vehicles all over the city, shattered glass has been reported miles away from the port. It is reported that around 200 people lost their lives, more than 6,000 people are injured and around 6 people are still missing, it is estimated that around 300,000 people have damaged households.



The impact of the explosions extended 6 kilometers from the epicenter, causing what can be categorized as 'severe damage'; 10 kilometers with 'moderate' damage; and up to 20 kilometers with 'light' damage. According to different UN and government sources, more than 50,000 houses have been impacted with minor, moderate or major damage (OCHA; UNDP, Lebanese Republic Presidency of the Council of Ministers, DRM Unit). Beirut establishments, especially small and medium businesses in the wholesale, retail and hospitality e.g food and beverages, tourism, lodging and recreation sectors have been heavily affected, in the scale of 15,000 units which are closed due to the damages reported. This has a direct effect on the lives and livelihoods of those employed whether residing inside or outside Beirut. Those living in low-income and underserved parts of Beirut are among the most vulnerable as they may have lost both their houses and source of income. The damage extends to health sector, whereby multiple centrally located public and private hospitals reported extensive damage and were not able to welcome patients after the explosion and until today.

The implications of this disaster are further exacerbated by the multiple crises the country is currently witnessing starting with the refugees' crisis since 2011 and most recently the economic crisis, COVID-19 pandemic and civil unrest/security incidents. The most important highlights from these crises are the rising inflation whereby, currency lost 80% of its value with commodity prices consistently increasing. Vulnerable Lebanese and other at-risk groups, such as refugees and migrant workers, are increasingly unable to meet their basic needs. According to recent estimates by the World Bank that include the impact of the COVID-19 crisis, poverty would rise from 30% in 2019 to 45% or more of the population by the end of 2020¹, while extreme (food) poverty would more than double to 22%. This is coupled with political instability and the inability to form a new government since the resignation of the former cabinet after the explosion on August 10. PM-designate Saad Hariri was designated as new prime minister on October 22 and he began consultations with MPs on October 23rd to form a cabinet. Hariri met with all the Lebanese political parties. Post the meeting Prime Minister-designate Saad Hariri described the non-binding consultations he held with parliamentary blocs as "positive," noting that the discussions focused on the reforms that the new government should implement "as soon as possible."

The rate of Covid-19 infection cases has been rising since August 2020 and a significant increase has been observed in October whereby an average of 1,500 cases was reported daily in the last week of October and even higher number of cases in the first week of November (1,800) in various clusters in the country compared to a daily average of 100 cases in July; the highest reported number is 2,142 cases on November 7. According to WHO, the occupancy rate of ICU beds in Lebanon across all hospitals is 87.6% (as reported on Nov. 4), therefore capacity of hospitals to treat severe cases is at critical stage. The government has issued several memorandums isolating villages and cities with high caseload; however, these measures were not adhered to due to the growing mistrust in the government and the deteriorating economic situation in the country.

Summary of current response

Overview of Lebanese Red Cross

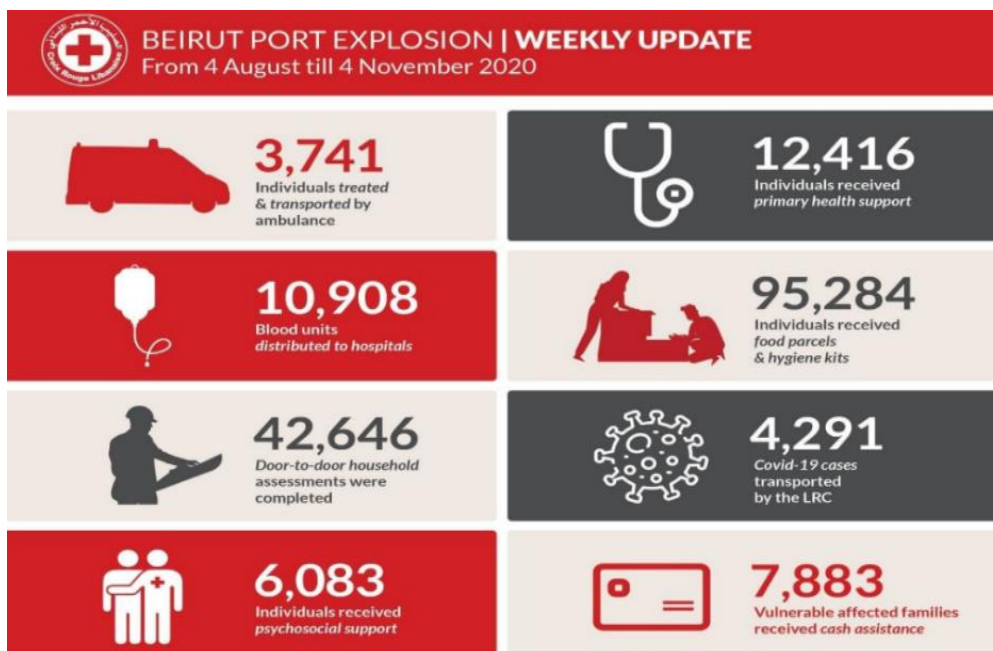
The Lebanese Red Cross (LRC) was established in 1945 as auxiliary to the government and is the primary provider for ambulance care and blood transfusion services in Lebanon (free of charge services). LRC is also known for providing other deliveries like medico-social and disaster management services. The number of individuals supported is around 1 million annually through the existing network of over 12,000 employees and volunteers.

After the massive explosion, LRC was immediately mobilized, and 75 ambulance teams were active on the ground in the rescue operation and supported by 50 teams from EMS centers outside Beirut. Several triage and treatment centers were set up as it was difficult for ambulances to access all areas; LRC also led the evacuation of two major hospitals that were destroyed by the explosion. In addition, LRC called for blood donations; blood centers were opened, and 450 blood units were collected between the moment of the blast and the second morning at 10:00 a.m. Provision of primary healthcare needs to those affected by the blast was also among the priorities in the direct response; this was done through 4 Health Centers (HCs) and up to 5 Medical Mobile Units (MMUs) in Beirut area. This included medical services (treatment of wounds and so on), as well as primary health services such as distribution of paramedical items and

¹ World Bank "Updated Poverty Numbers in Lebanon," March 15, 2020

medication based on need. In addition, psycho-social support services were provided to those affected by the blast to address the traumatic psychological effects (grief, panic attacks or even suicidal ideation).

In terms of basic assistance, LRC provided temporary shelter for 1,000 families and organized distributions of hygiene kits, personal protective equipment, ready meals, and food parcels and initiated emergency cash assistance in September. A summary of the services provided by LRC made in the past 3 months is presented below:



LRC has initially launched its emergency appeal and a 3-month plan on August 5 with a funding requirement of 19,142,842 USD. Following that, LRC has prepared a longer-term plan for 1 year incorporating the blast recovery phase, COVID-19, and the economic crisis in the country with a budget of 125 million USD. The plan is considered as One Plan for the Movement as it is comprehensive, integrates all the support from the Movement partners mainly IFRC, ICRC, and Partner National Societies. The One-year plan of the NS is an operational plan that encompasses all of its current responses and seeks support to existing service provision such as EMS, BTS and MSS. The critical nature of these services and the expected time-frame for the blast implications are taken into consideration in IFRC planning, balanced with its technical inputs into CVA, Shelter, Livelihoods and Logistics where we are also aligning to the longer-term strategies of the LRC, hence the 2-year planning in this appeal and the EPoA.

Overview of Red Cross Red Crescent Movement in country

The Red Cross Red Crescent Movement coordination in Lebanon is anchored in the Movement Cooperation Agreement (MCA) outlining the functional co-ordination mechanisms in Lebanon with regular meetings at leadership, operational and technical level. The functional Movement coordination mechanisms and practical application of the Strengthening Movement Coordination and Cooperation (SMCC) process in Lebanon continue to reinforce a coordinated and complementary Movement response.

The LRC jointly with IFRC, ICRC, and Partner National Societies have regular meetings to ensure coordination and to keep the Movement partners updated and informed about the situation and on LRC operations. At this moment Movement partners are mobilizing funds to provide multilaterally funding through this Emergency Appeal, as well as to channel bilateral funding in support of the LRC One Response Plan.

More specifically on IFRC support, on 5th of August the IFRC immediately released 750,000 CHF allocated from the IFRC's Disaster Relief Emergency Fund (DREF) to support LRC's response. Later, on the 9th of August a [Emergency Appeal](#) was launched for 20 million CHF. This appeal is in support of the LRC appeal first issued on the 5th of August. The IFRC appeal provides an alternative funding channel for partners and donors who want to use the multilateral channel to support LRC response efforts. It is important to note that to date, LRC has been receiving strong bilateral support and contributions from national and international donors, governments and Movement and non-Movement partners.

Overview of non-RCRC actors in country

Multiple international and national actors are working in country and are actively involved in the response. These actors are mainly governmental disaster management bodies, the Lebanese military, UN agencies, INGOs and local NGOs. The latter were significantly active on the ground with youth groups and volunteers who were mobilized for clean-up and relief efforts.

The humanitarian sector has activated existing sector specific working groups (clusters) and inter-agency coordination mechanisms for coordinated assessments, effective management, and standardization of approaches. LRC has taken up a central role in the assessment phase (Damage and Needs Assessment – DANA and Multi Sectoral Needs Assessment - MSNA). The MSNA is ongoing and LRC is leading on the rollout through their volunteers trained in door-to-door survey data collection. The MSNA is performed in coordination with UNHCR and OCHA, and with the participation of other shelter sector partners.

LRC and IFRC are also actively engaging in inter-agency coordination mechanisms (like OCHA coordination and cluster working groups such as Basic Assistance working group, WASH, Shelter, Logistics, CASH etc.). Specifically, for shelter, which is one of the pressing priorities, LRC is part of the Inter-Agency Shelter Working Group (SWG) co-led by UNHCR and UN-Habitat, where a sectoral emergency and recovery strategy has been drafted and Temporary Technical Committees have been set up to develop technical guidance for prioritized early recovery shelter interventions (Cash for Rent; Repairs and Rehabilitation of residential shelters; Housing, land and Property rights). Also, noteworthy, UN agencies particularly UNHCR and UNOCHA can be found working daily in the LRC operations centre in IM, other agencies are also regular visitors to LRC as they are the lead agency in assessment (MSNA).

Needs analysis and scenario planning

Needs analysis

After the explosion, several humanitarian agencies among which the Lebanese Red Cross initiated rapid assessments to identify the key priorities and quantify the needs and existing vulnerabilities. One secondary review published by ACAPS² (Assessment Capacities Project) on August 12, highlights the profiles of the affected areas in Greater Beirut where there is a mix of poor underserved and densely populated neighbourhoods (e.g., Karantina, Karm el Zeitoun), other higher-class modern areas (e.g., Saifi, Down Town) in addition to residential and commercial hubs with restaurants, cafes, art galleries etc. (e.g., Mar Mkhayel, Gemmayzeh). The affected area includes people from all socio-economic backgrounds who were affected in the same way and lost their properties, households, and source of income in many cases. The emerging needs according to ACAPS which triangulates data from different NGOs, UN agencies and Lebanese Red Cross, are shelter (rehabilitation), capacity and access to health services and livelihoods (including access to food). These prioritized needs are also confirmed by the results of the Multi-sectoral assessment³ conducted by the Lebanese Red Cross where 80% of the assessed households prioritized Shelter Repairs, Medical Care, Medication, Cash and Food.

LRC has initiated since August 5, a Multi-Sectoral Needs Assessment (MSNA) covering 42,646 households in total as of November 4. Results of the assessment will be compiled and presented in one report, expected in December. It is important to note that the Multi-Sectoral Needs assessment tool has been updated to include a more detailed assessment capturing the exact vulnerabilities and socio-economic status of households needed for targeting purposes in the next phase of cash distributions. The tool has been piloted in the last week of October and is now used in assessments. As of 9 November 2020, the detailed MSNA tool is being used to collect the detailed information about the affected households. Since the COVID19 cases are increasing in Lebanon thus the surveys are carried out over the phone.

Main results based on analysis of 29,560 assessments (up to Oct. 27) are presented below:

Vulnerabilities identified through this assessment are the following (as per the most updated results covering 29,560 assessments till Oct.27):

- 4.4% of the assessed households have pregnant or lactating women
- 11% of the assessed households have physical or mental disability
- 10% of the assessed households have disaster-caused disability
- 54% were reported as female-headed household

As for prevalence of chronic illness, 58% of households reported having at least one member with chronic illness. According to another assessment by HelpAge International, that was conducted in a number of neighborhoods close to the explosion site, major health concerns reported by households included mental health (26%), respiratory problems (11%) and chronic diseases (30%) chronic diseases are a particular concern for older people (36%). Furthermore, 54% head of households self-reported chronic diseases such as diabetes, hypertension, heart disease, etc. 45% also stated

² Assessment Capacity Project (ACAPS), August 12, 2020, Emergency Operations Centre Beirut Assessment & Analysis cell, Analysis of Affected areas in Greater Beirut.

³ The Lebanese Red Cross, August 24, 020, Beirut Explosion Response Assessment Results.

difficulties in accessing medication. Looking ahead, the initial analysis indicates that interrupted access to essential health services and supplies of medicines are and will remain critical needs. Several hospitals are damaged and/or inaccessible and were already stretched due to the ongoing COVID-19 pandemic.

When it comes to the physical damage in the households, results from LRC assessment show that 28% of the assessed households have collapsed or damaged balconies, 48% have minor damage, closable and repairable, and 64% have broken and shattered glass. Moreover, 8% of households so far have reported having unacceptable toilet conditions (un-functional). It is also important to note that household damages especially unsealed windows and doors also constitute protection risks and were concerning for 90% of women and 87% of older people as it affected their sense of safety in their homes, according to HelpAge assessment.

Finally, the socio-economic status of the surveyed households was captured through the questions on income and savings. 37% of the households assessed mentioned that they had no source of income and 80% have exhausted their savings (as stated in OCHA Flash Appeal). This is a snapshot of the reality, noting that after the explosion many people have lost possessions, business premises both large and small, and hence their livelihoods, at a moment when the economic situation for the majority of Lebanese, as well as for Palestine and Syrian refugees in Lebanon, is desperate. Few people have access to an adequate social safety net and as the situation worsens, many will be unable to afford the cost of even basic healthcare and other essentials.

Operation Risk Assessment

*Given the security and economic situation in the country impose **several risks on the operations:***

The devaluation of the Local currency and the inflation of services and goods is one factor affecting the implementation and the purchasing power of affected population. There are 3 different currency conversion rates i.e., official rate, bank rate and unofficial rate. The official rate of LBP against USD is 1,510, while the bank rate is 3,900 however the commodities in market are sold at unofficial rate which fluctuated between 6,500 to 8,800 LBP during last two months. In order to keep cash assistance relevant and to maintain the value of money, the LRC decided to deliver cash assistance in USDs through Banque Libano-Française.

In addition, many organizations as well as the general population have been restricted in accessing their money, present in local bank accounts, allowing only small amounts to be withdrawn. This negatively impacts operations and payments to suppliers and their staff. The general population also suffers because of this challenge. LRC has actively engaged banks, seeking a viable solution for this issue especially after the blast and to ensure the availability of funds (USD) for the successful implementation of cash-based assistance. A thorough risk assessment has been carried out and the appropriate mitigation measures were put in place for the successful implementation of interventions. Strong monitoring mechanisms are put in place for regular monitoring of cash interventions, vendors and the markets.

The ability to sustain services to communities all over Lebanon is also considered a risk especially if the scenario of having multiple crisis takes place (insecurity, covid-19, and economic crisis). This might lead to further expansion of the response with the possibility of fatigue and burn out at the level of staff and volunteers. As a mitigation, IFRC will support LRC to be able to effectively respond to additional disasters by deploying additional surge positions, will support existing services and strengthen coordination mechanisms within the Movement.

Increased protection risks among vulnerable population, especially with the deteriorating economic situation which might increase rates of child labour, gender-based violence, and sexual exploitation in the affected communities. Therefore, there is a need for strong emphasis on Protection, Gender and Inclusion (PGI) in the response to ensure it is mainstreamed across the sectors at LRC in addition to effective coordination mechanism with all humanitarian actors and functioning protection referral pathway. Additional training and sensitization of staff might be required. IFRC Regional Office will follow up with LRC on any needed technical support for PGI training and mainstreaming process.

In October, the Lebanese Army Forces (LAF) announced the launch of their cash assistance in the form of a one-off payment in local currency LBP by the LAF to households, based on the assessed damage (only) by the LAF. This cash assistance is considered compensation for shelter damages according to the degree of damage, the total amount of HH's assisted and the CASH payment is not known at the time writing. We are anticipating some confusion among families as many may prefer receiving one installment from the LAF directly instead of the already planned support of organizations who are offering different modalities of support, such as a staggered payment approach or lesser overall amounts. A risk of duplication is also present, in case of weak coordination at national level, between the LAF and all humanitarian actors. LRC senior management are following up closely on this matter with the LAF and will highlight any potential risk.

B. OPERATIONAL STRATEGY

Proposed strategy

Overall Operational objective: The immediate needs of affected population of the Beirut explosion are addressed and National Society is supported in recovery planning and long-term sustainability of its services.

LRC's response to the explosion has been since the beginning a coordinated response integrating all departments and sectors: Emergency Medical services (EMS), Medico-social services (MSS), Blood Transfusion services (BTS), and Disaster management (DM), each providing the needed relief services: first aid, primary health care and medication, PSS, temporary shelter, and food and non-food items (food parcels, hygiene kits). The planning process for developing the one-year plan follows the same approach and aims at integrating all sectors in one comprehensive response strategy addressing explosion implications, economic crisis and the COVID-19 on-going response. The plan is also developed in coordination with all Movement partners who will provide input and identify specific areas of support.

Overall, IFRC aims to support LRC in the response to Beirut Explosion through two modalities: deployment of specialized staff and Regional Office/Geneva staff complementing and supporting Country Office efforts. The modalities are outlined below.

1. Technical support and deployment of experts in the field of shelter, CVA, Logistics and Livelihoods.

In terms of human resources, LRC requested additional technical support from IFRC and IFRC have deployed a number of technical experts to support the operations. Rapid Response personnel (surge) role profiles are normally deployed for 3 months, however in exceptional circumstances, and due to Covid-19, surge deployments can be for up to 4 months. Technical surge personal (Shelter, CVA, Logistics and FSLH) are embedded into the NS 's DM Services department and Logistics teams working directly with counterparts to assist, support and facilitate planning for the operation, they also have an inherent role to support the strategic longer-term needs of the NS and support external coordination. In this, they will support the strategy of the DMS building capacity to further enhance the DMS's response mechanisms and capacity. These positions are adding response capacity where it was not feasible prior to the response. However, this is not new to LRC, for example Cash and Livelihoods are areas of interest previously, and LRC has been undertaking smaller scale projects with ICRC and partners. This operation seeks to build on that previous experience and harmonise our efforts with those whom are engaged in these areas of focus.

Through recent evolving discussions a request to support the logistics of the operation emerged, and a plan is in development to support the NS to centralise its warehousing capacity, currently this is spread over 8 locations. IFRC will also be looking to support LRC with systems for warehouse management whilst looking to integrate with existing systems and services. IFRC will seek to support a small team of staff and volunteers and provide financial support to the running and management of a facility and its human resources.

Several NS staff positions will also be directly supported, up to 25 persons for up to 20 months of the operation, these positions include PMER, Finance, Call centre staff, Logistics staff and additional DMS capacity. All of the surge team members are now deployed and in country and we are working on surge rotations and the longer-term roles.

Two new Delegate positions will be integrated into the planning, those being a National Society Development delegate to support the NS strengthening activities planned within the EPoA. A Health Delegate is also planned, this position will harmonise the support to the EMS, BTS and MMS whilst also providing technical support to the management of the medical items and equipment needed to be purchased and stored in the central warehouse under development. Both positions are considered for 2021.

2. Logistics and Supply Chain support

IFRC have been requested to support the centralisation of warehousing for the NS. LRC have been looking to centralise their warehousing for some time and this operation brings about that opportunity. The operation has surged a Supply Chain Coordinator to work with a small team (5 persons) to achieve this. The goal of the IFRC support in logistics and supply chain is to Improve, support and grow the capacity of the logistics team with a focus on warehousing services to support the Beirut Port explosion as a first step and future operations later on.

The team is working hard to follow all requests and have been very influential and pragmatic in finding solutions to meet the operation's needs. A Logistics Working Group (LWG) has been set up and here all operational needs and challenges are discussed, including a way forward which is harmonised to past interventions by partners and aligned to the strategies and vision of the NS.

Assessments of all existing warehouses in Beirut is underway using the quality control tool to inform daily outputs and priorities. The areas where the LRC can be supported were broadly identified, and the step ahead is to engage interested

parties (partners mainly) and IFRC surge to engage in a specific area e.g., logic systems, warehouse management, fleet etc. warehouse equipment and vehicle needs is also being assessed. The needs will be prioritized against the availability of vehicles and source for the gaps through the Mobilisation tables of IFRC and LRC.

Future needs (central warehouse) will be justified to inform the concept of operations for a specific design of an LRC warehouse that meets the needs and requirements of an expanding organisation. This should include/encompass quantifying the scope for future needs, centralisation of warehousing, medical cold chain needs, software support using logic, vehicle needs, site layout, staffing etc.

IFRC will support operational running costs, some staff and volunteer costs, partial construction and warehouse tools and equipment costs through a project agreement, against the Emergency Plan of Action (EPoA). Actual support will be dependent on the support to the emergency Appeal (EA) and the outputs of the LWG priorities to the operation. As we better track and understand the needs, we will budget those and utilize the WG to seek support for unmet needs.

In conclusion there is an urgent need to find a warehouse and move items from existing warehouses in order to have all items centralized in one location.

3. Mobilizing donations and funding

Active resource mobilization efforts have been undertaken by IFRC at the Regional Office (RO) and in Geneva. IFRC MENA works in support of the Lebanese Red Cross as presented in the IFRC Preliminary Emergency Appeal, by providing funding received through its multilateral channel and technical expertise according to the priority thematic areas identified by the Lebanese Red Cross. A Movement narrative document was produced within the first 10 days of the incident to clarify the roles and responsibilities of the Movement components.

The IFRC regional office initiated quick connection and coordination with LRC specially on relationship management of donors, with the longer-term aim to support Lebanese Red Cross also in expanding its local network via the global/regional IFRC established partnerships.

Coordination and representation in external fora:

- joint representation of IFRC + LRC in UN briefing of States in NY,
- coordinated participation to the RCRC briefing of Permanent Missions in Geneva,
- LRC representing the Movement in briefing the Australian Parliament.

A funding tracker was also created to track the potential funding, the commitment and the confirmed funding. IFRC MENA is coordinating the donor's communication between the Regional Office, PRD Geneva, Country office and the National Society. Negotiation with the potential donors is ongoing, close communication & coordination with movement partners, governments, corporate, and other potential donors to materialize the commitments and the soft pledges to hard pledges. Active fundraising and support to Gulf Cooperation Council Country cluster Support Team (GCC CCST) to promote the EA by drafting materials to support the GCC country office in marketing the Beirut Explosion appeal. IFRC is also working on creating a one pager marketing document for the IFRC Appeal.

In terms of fundraising, MENA RO and Lebanon CO are working on supporting the IFRC EA & the LRC's response plan. The coverage of the Appeal is: Total hard pledges = 36%, Total hard pledges + soft pledges + interest = 42%.

4. National Society Strengthening

A considerable amount of resources will continue to be dedicated to the National Society strengthening, ensuring that LRC continues to be a well-functioning and strong NS. The IFRC support abides by the Lebanese Red Cross and the Federation's plans of action, in addition to the IFRC's Strategy 2030 and LRC Strategy 2019-2023. After discussion with the LRC and following existing IFRC MENA Operational Plan, the EPoA will focus on the following areas:


- Legal base: Provision of technical support to the National Society in the finalization of the Red Cross Law, Emblem Law, International Disaster Response law and in internal regulations.
- Finance and Audit:
 - Technical support in the review of the fraud and corruption policy and as well training, dissemination and implementation.
 - Technical support for external audit for the Cash Program.
- Shelter, Cash, Livelihood, PMER and Logistic: Providing necessary technical support and operational support resources to strengthen the capacity of the LRC.
- Volunteers: Care of duty of the volunteers is a priority and as well of provision of relevant trainings and capacity building activities.

- National Society Preparedness: In partnership with the RCRC partners in country, the EPoA will invest in resourcing the outcomes of the Preparedness Effective Response (PER) using the Real Time Evaluation/Operational assessment to identify immediate and long-term priorities of the NS.

5. Other support functions

1. **PMER:** The EPoA performance and M&E framework together with the LRC is under development, including baseline and definition of quality and quantitative indicators to allow sound monitoring, tracking and reporting of activities implemented and evaluate effect and impact of programs. Monitoring includes on-site monitoring, post distribution monitoring (PDM), end-line evaluation and pre and post-tests as found relevant. The captured feedback will mainly highlight the satisfaction of assisted households regarding quality of services, identify challenges, and measure outcome level change. LRC has initiated a Real Time Evaluation (RTE) for the response and IFRC Country Office has provided technical support in the development of the Terms of Reference, planning process and template. A launching meeting was organized on October 16 by LRC with all relevant stakeholders participating in this exercise, due to start in December.
2. **Community Engagement and accountability (CEA):** LRC has initiated Multi-Sectoral Needs Assessment (MSNA) targeting 42,646 households so far (until Nov. 4) to inform its interventions and begin the selection process. In parallel, hotlines were set up for the purpose of information provision, requests for assistance and follow up on cases. LRC hotlines received 33,388 calls on Disaster Management hotline and 1,415 calls on hotline dedicated for restoring family links and reporting missing people (up to Nov. 4). These hotlines were considered as an effective communication channel with affected communities as it allows reporting specific cases, acquiring needed information and referrals to specific services as per the need. The number of hotlines increased from 4 to 12 from August to November and there is a plan in place to establish a call center for LRC at national level covering all programmes and not only the blast response. It is important to note that hotline staff and all front-line responders/volunteers are trained on protection standards and Psychological First Aid (PFA); they are trained in the identification and referral of protection concerns to relevant services and agencies, ensuring the application of Do No Harm approach and safeguarding.
3. **Administration & Finance:** The Administration department continues to assist the team by providing effective and timely services and professional advice to the team under the current working modalities and living conditions. The financing needs will continue to ensure an efficient, effective, and timely project financial management support that will contribute to demonstrate value for money in the different activities, operational cash-flows are forecasted adequately and arrive timely for the implementation of the activities, maintain and improve the accounting and financial systems to ensure transparency and accountability to the different stakeholders, as well as the sound financial management and adequate financial performance of the operation. The Finance Department will implement a risk management approach through all the planned activities of the operation to minimize the associated risks.
4. **Security:** Security Officer is already in the country, supported by the MENA security coordinator and the Security unit in Geneva providing permanent information to the colleagues, ensure that security briefings, protocols are in place and up to date and enforces the security rules amongst staff, checks the security of all IFRC facilities, vehicles and assists in security drills.

C. DETAILED OPERATIONAL PLAN

	<p>Shelter</p> <p>People targeted: 1,000 Households (approx. 5,000 people)</p> <p>Male: 2,500</p> <p>Female: 2,500</p>						
<p>Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions</p>							
<p>Indicators:</p>	<table border="1"> <thead> <tr> <th></th> <th>Target</th> <th>Actual</th> </tr> </thead> <tbody> <tr> <td># of people provided with safe, adequate and durable recovery shelter and settlement assistance</td> <td>4,300</td> <td>65</td> </tr> </tbody> </table>		Target	Actual	# of people provided with safe, adequate and durable recovery shelter and settlement assistance	4,300	65
	Target	Actual					
# of people provided with safe, adequate and durable recovery shelter and settlement assistance	4,300	65					
<p>Output 1.1: Shelter and settlements assistance is provided to the affected families.</p>							

Indicators:	Target	Actual
# of households provided with longer-term shelter and settlement assistance	1,000	13
Output 1.2: Technical support, guidance and awareness raising in safe shelter design and settlement planning and improved building techniques are provided to affected households		
Indicators:	Target	Actual
# of households provided with technical support and guidance, appropriate to the type of support they receive	1,000	13

Progress towards outcomes

The ongoing recovery shelter modalities carried out by LRC as part of the EA are the non-structural repairs and rehabilitation works for HHs affected by the blast in zones allocated by the Shelter Working Group (SWG) and FER (i.e., the shelter sector coordination mechanism chaired by UNHCR together with the Forward Emergency Room of the Lebanese Armed Forces).

The LRC shelter team with the support of the IFRC Surge Shelter Coordinator have conducted a pilot phase for house repairs during the month of October, aimed at developing and testing the technical / damage assessment methodology, the identification of categories of construction / repair works needed, BOQ development on a case-by-case basis, contractor works supervision / cash monitoring process and handover of works.

At the time of reporting, the activity status is the following:

- 5 field teams (10 LRC volunteers, 5 engineers) mobilised to 9 zones (6-15-16-41-32-33-52-53-20) conducted 297 door-to-door housing damage assessments;
- 197 Bill of Quantities (BOQs) were developed by shelter staff to be processed for house repair works;
- Pilot phase for contractor-based repair works completed with 13 apartments repaired and 65 individuals reached.

The scope of the LRC housing repair and rehabilitation works may include all or some of the following items:

- Repairing / rebuilding existing internal walls including plastering;
- Repairing / replacing existing windows;
- Repairing / replacing existing internal and external doors;
- Repairing / improving the existing water and sanitation connections at domestic level (water and sewage piping for bathrooms and kitchens);
- Repairing / improving existing water and sanitation facilities (sanitary components and tiling for kitchen and bathroom);
- Replacement / installation of HH water storage tank;
- Repairing / improving existing electrical components (power sockets, light points, circuit breaker, toilet fans).

Roving monitoring teams composed of engineers and LRC volunteers will work in parallel to the technical assessment teams mentioned above, to monitor progress of repair works with house inspections and technical assistance.





Livelihoods and basic needs

People targeted: Basic Needs 1,100 Households (approx. 5,500 people). Livelihoods restoration 200 Households (approx. 1,000 people)
 Male: 2,850
 Female: 2,850

Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods

Indicators:	Target	Actual
% of targeted population whose livelihoods are restored to, improved from pre-disaster level	TBD	N/A (Not applicable for this reporting period)

Output 1.1: Skills development and/or productive assets and/or financial inclusion to improve income sources are provided to target population (off-farm livelihoods).

Indicators:	Target	Actual
# of people trained in vocational skills trainings to increase income sources	TBD	NA
# of people supported with in-kind assets or cash or vouchers for recovering or starting / strengthening economic activities (added indicator)	TBD	NA

Output 1.2: Basic needs assistance for livelihoods security including food is provided to the most affected communities

Indicators:	Target	Actual
# of people reached with food assistance for basic needs (updated indicator)	TBD	11,956

Output 1.5: Households are provided with unconditional/multipurpose cash grants to address their basic needs

Indicators:	Target	Actual
# of households are reached with multipurpose CVA to meet their basic needs	1,100	1,100

Progress towards outcomes

Livelihoods:

At the end of September, a Livelihood delegate was deployed for one month and a half and since mid-October there is a livelihood focal point in the Lebanese Red Cross to carry out the planned activities. Given that livelihoods are a relatively new sector for LRC, the first phase was focused on context analysis, secondary review of existing assessments after the explosion and coordination with different technical focal points under DM to develop the most appropriate approach moving forward.

After the explosion, 15,000 businesses in the services sector were damaged and at least 70,000 people have lost their jobs since then. The ongoing economic crisis and COVID19 outbreak in Lebanon increase the vulnerability of the families and might push even more people below the poverty line. On one hand, business owners have depleted or severely decreased their savings after months of economic crisis. As such, they might be unable to either loan or invest money in repairing and reopening of shops or in employing the same pre-disaster number of people. On another hand, the financial crisis is restricting businesses from accessing their savings and limiting their capacity to fix the damages and get the businesses up and running in a timely manner. Moreover, a significant proportion of businesses in Lebanon are part of the informal economy; not registered with government authorities, not covered or protected by the law or any form of public support structures, and typically low-income generating.

An initial needs assessment was conducted by Mercy Corps and eight partners (ACF, ACTED, CARE, DRC, IRC, Al Majmoua, Oxfam, and Save the Children) assessing micro-, small-, and medium-sized enterprises (MSMEs) across the blast affected areas of Beirut. 1,164 business owners across 21 neighborhoods were assessed. The main recommendations were included in our intervention:

- Consider assisting smaller (less than 10 employees) and/or newer businesses (less than five years old) which are close to the blast. Support is not being linked to the business registration status.
- Cash assistance should be unconditional and in USD will be crucial to ensure more rapid reconstruction and resumption of business operations
- Employee salaries, rent and debt to repair premises should be considered when calculating assistance amounts.

- Business development support and technical assistance (in addition to cash assistance) should be considered for smaller and newer businesses struggle more to re-open

Additional 8,000 Household assessments, is ongoing to analyze the livelihood situation in order to provide a more tailored intervention in terms of employability and self-employment.

Based on the identified needs, the intervention will be divided into two phases; early recovery and long-term resilience phase. The first phase will focus on supporting businesses affected by the blast to recover the pre-blast source of income of business owners, employees, and their families. Whereas the second phase will focus on supporting and building the capacities of people in need to recover their employment and/or self-employment situation.

Target criteria for Early recovery livelihoods intervention: Owners and employees from the affected business.

The selection of beneficiaries will be made considering the following eligibility criteria:

- Enterprise existed prior to the explosion
- Between one to ten employees
- Business is significantly damaged
- Business is the primary source of income for the owner's households
- Essential restoration work to resume business activities would not exceed 8,000 USD
- Annual turnover is between 100,000,000 LBP and 200,000,000 LBP
- Business who not receive a similar assistance package from other actors.

This part of the programme will target MSMEs (Micro, Small and Medium Enterprises) and will support them with financial support up to 8,000\$ and technical assistance over at least 12 months to resume their income generation activities. The financial instalments will be made through distributed ATM cards that will be loaded through a maximum of 3 transfers. The provision of financial and technical assistance will serve as an early recovery step for businesses to restore lost equipment, inventory, or other physical damage. It will also ensure that the business is able to sustain its activities for up to 6 months through covering rent and employees' salaries if needed. All the intervention is being coordinated with the NGOs in the area to avoid duplication and create synergies.

Basic Assistance:

The LRC started its first cash disbursements on 12 September 2020. The LRC has plans to reach out 10,000 HHs with one off cash assistance for emergency phase. Among those, the economically vulnerable families will continue receiving cash assistance (recovery cash) for additional 6 more months. As of now, more than 80% of the target for phase 1 has been achieved. In parallel, the phase 2 started also since the beginning of November. Details of cash distributions are given below.

	Target Phase 1 (one-off payment)	Achieved Phase 1	Target Phase 2 (6 months)	Achieved Phase 2
Caseload (HHs)	10,000	8,278	10,000	1,900
Disbursements (USD)	3,000,000	2,483,400	18,000,000	570,000
Total cash disbursed (USD)				3,053,400

The LRC has secured the financial resources for its cash response with the contributions from different Movement Partners and public funds. The IFRC will contribute to LRC cash response with financial support for 1,100 HHs. In terms of monitoring and evaluation, LRC has completed Post Distribution Monitoring exercise in addition to preparing for market monitoring.

The post distribution monitoring of first batch (206 HHs) for phase 1 was carried out during last week of October. The results were positive showing a high level of satisfaction from the distribution process and modality as a whole. It is also important to note the potential biases affecting the results which are the currency of cash (in dollars vs Lebanese Liras) in addition to the huge needs of the community members who aim at continue to receive services from LRC., therefore are more prone to give high rating. The highlights from PDM are presented below:

% of beneficiaries satisfied with the appropriateness of the cash modality	100%
% of beneficiaries who faced challenge withdrawing the assistance	1%
% of beneficiaries satisfied with the delivery mechanism implemented (reaching their assistance through ATM)	99%
% of beneficiaries mentioning that the assistance received by the LRC is relevant to their most important needs	63%
% of beneficiaries satisfied with the communication done by the LRC	99%
% of beneficiaries satisfied with the delivery mechanism (door to door distributions)	95%

In parallel, the tool for market monitoring has been developed and it aims at monitoring prices in the market. The market monitoring is planned and will be carried out during the week of 09-15 November.

As for the hotline for the cash assistance (highlighted under CEA), there were several challenges faced, First, the huge number of calls received outweighing the resources available and leading to delay in responding to callers' questions and complaints. This was quickly improved by increasing the number of hotlines and operators; however, operators are still receiving more than one call at the same time due to some technical errors. Continuous improvement of the system is required in addition to strengthened coordination between the hotline and the different sectors/operations within LRC to be able to respond accurately to the communities and mitigating any mistrust,

The LRC has observed extreme load on its hotline mainly for the requests for cash assistance. Due to this increased pressure, the LRC has also increased its capacity with 8 additional telephone lines with necessary HR in place. The hotline operates at 24/7 basis with at least 10 operators during peak hours.

In terms of human resources, the LRC has also increased its HR for successful implementation of cash assistance. There are approx. 50 volunteers supporting the data collection, ATM cards distributions and monitoring, Currently, there are 3 temporary positions which are filled while the recruitment is on-going for longer term positions.

IFRC deployed Cash Surge to support LRC in cash distributions on 05th September 2020 for a period of 3 months. The technical support to LRC will be continued for additional 2 months (until end of January 2021) with a replacement arrived in 3rd week of November.



Health

People targeted: 105,600
Male: 39,960
Female: 68,640

Outcome 1: Vulnerable people's health is improved through increased access to quality health services

Indicators:	Target	Actual
# of people reached through LRC emergency health management programmes	105,600	32,467
Output 1.1: Improved access to emergency medical services for the targeted population and communities.		
Indicators:	Target	Actual
# of people receiving emergency medical services.	TBD	3,741
# of blood units collected	TBD	9,151
Output 1.2: Improved access to primary health care for the targeted population and communities.		
Indicators:	Target	Actual
# of people receiving primary healthcare services (through 22 HCs, Beirut MMUs, and 2 Medical Mobile Teams).	TBD	12,416

		(4,534 in MMUs and 7,882 in Health Centers)
Outcome 2: Vulnerable population in affected area have improved community-based disease and health promotion		
Indicators:	Target	Actual
# of LRC volunteers mobilised for health activities	44	1,158
Output 2.1: Communities are provided with health services to identify and reduce health risks		
Indicators:	Target	Actual
# of LRC volunteers trained on ECV	TBD	NA
Outcome 3: The psychosocial impacts of the emergency are lessened		
Indicators:	Target	Actual
% of beneficiaries satisfied with the psychosocial support interventions	75%	NA
Output 3.1: Communities are supported by NS to effectively respond to health and psychosocial needs during an emergency		
Indicators:	Target	Actual
# of unique beneficiaries receiving psychosocial services by the MSS	TBD	16,310
Outcome 4: National Society has increased capacity to manage and respond to health risks		
Indicators:	Target	Actual
% improvement noted in applying the MoPH standards against baseline assessment within the LRC health centers.	30%	NA
Output 4.1: The National Society and its volunteers are able to provide better, more appropriate, and higher quality emergency health services		
Indicators:	Target	Actual
# of SoPs, strategies/guidelines revised/developed and implemented at health centers level	30%	5
Progress towards Outcome		
<p>In addition to EMS and BTS support provided on the ground at the time of the explosion; during the past 3 months, 3,741 patients were treated on spot and transported to hospitals in addition to 23 dead bodies that were moved from port to hospitals too. Nonetheless, LRC, through the EMS sector, still managed to respond to the COVID-19 crisis the country is going through and succeeded in transporting 4,362 COVID-19 patients to and from hospitals. Also, during the past 3 months, the EMS teams responded to the protests; 95 patients were transported to hospitals and 319 were treated on spot.</p> <p>LRC also leveraged its social media channels to call for blood donations, collecting more than 9,150 blood units between the moment of the blast and the 4th of November 2020 and distributing 10,908 to help the hospitals with the treatment of severe cases. In addition, 16 blood drives were conducted in several locations such UN HQ Nakkoura, UN Italy Chamaa, UN Irish Tirri, USA Embassy, and others during which over 490 blood units were donated. When it comes to medical and psychological services, LRC treated 4,534 and 7,882 individuals at the 5 deployed MMUs and 4 HCs respectively and provided them with medical consultations and medications. Psychological services were also provided to support to 16,310 individuals (6,083 directly and 10,227 remotely).</p> <p>Replenishment of damaged LRC EMS and BTS centers and branches in Spears, Gemmayze and Jal el Dib was immediately initiated; damaged ambulances, equipment, blood storage devices, medical consumables, reagents and others were replaced by new ones.</p> <p>Like any other response, major obstacles were faced, yet those did not hinder the LRC teams from responding to the blast and providing the beneficiaries with the needed health services.</p> <p>The economic crisis the country is going through shaped a challenge in buying PPEs with the optimal required quality. Also, the provision of medicines was affected given that the prices were drastically increasing within days and the supply was minimal. However, the RCRC movement, IFRC and all other LRC partners supported the society in this matter and helped in providing Personal Protective Equipment (PPEs) to be used by volunteers and staff, as well as medications to be donated to beneficiaries.</p> <p>At the field level, the number of beneficiaries and affected individuals exceeded LRC's expectations and capacity; as such, LRC has and is still working on supporting the people in need and optimizing the work and donations. In addition, the pressure and emotional stress the LRC volunteers and staff went through had a major role in the scope</p>		

of the National Society's response; accordingly, more volunteers were deployed to support the teams and shifts were divided among them.

As part of the MSS response at LRC, the sector launched a new initiative under the title "Mobile Medical Teams (MMTs)". The MMTs are linked to LRC-HCs, with the aim to target the most vulnerable groups of people at household level, with medical and psycho-social services. Each MMT is composed of at least 3 members: 1 doctor, 1 nurse and 1 social worker. This set-up can be adjusted according to the needs (e.g. midwife, physical therapist and a volunteer will accompany the team or replace other members of the team whenever needed). The teams will be deployed from the HC to the houses of beneficiaries with minimal diagnostic equipment and medicines within the neighborhoods of HCs, providing primary health and psychosocial services at the household level. The first team was deployed on the 4th of November, and a total of 9 beneficiaries were served in Achrafieh.



Water, sanitation and hygiene

People reached: 10,000

Male: 5,000

Female: 5,000

Outcome 1: Reduction in risk of waterborne and water related diseases in addition to COVID-19 in targeted communities

Indicators:	Target	Actual
% of communities who are satisfied with improved living conditions	TBD	NA

Output 1.1:

Indicators:	Target	Actual
# of volunteers involved in hygiene promotion activities	TBD	30
# of hygiene promotion sessions	TBD	0
# of people reached by hygiene promotion activities	10,000	0

Output 1.2: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population

Indicators:	Target	Actual
# of households provided with a set of essential hygiene	1,000	11,986
# of quarantine centres supplied with essential hygiene items	TBD	4

Progress towards outcomes

During the past 3 months, WASH activities (hygiene promotion) took place only in Informal Tented Settlements (ITS) hosting Syrian refugees. DM centers conducted soft WASH activities "PHAST" in Informal Tented Settlements and started looking for potential ITSs to conduct exit strategy. WASH activities related to Beirut response were at the level of distribution of hygiene items and PPEs.

The Staff of LRC IFRC and partners have all been impacted by the transmission of Covid-19, several positive cases were identified in LRC national office and branches. As such, the protocols were followed and individuals who were identified as contacts were quarantined and many of those who tested negative.

LRC Staff and volunteers were quarantined in the following centers: Grand Hills Broumana, Lancaster, Mansourieh, and Dmeet. Individuals were supplied with personal hygiene kits. In October 142 individuals were quarantined in August and in September 184 individuals were quarantined (almost 60% quarantined in September) so the total number of personal hygiene kits provided for individuals quarantined is almost 326 kit.



Protection, Gender and Inclusion

People reached: 105,600

Male:

Female:

Outcome 1: Communities become safer and more inclusive through meeting the needs and rights of the most vulnerable.

Indicators:	Target	Actual
<i>PGI standards are included in all stages of NS operations</i>	Yes	Yes

Output 1.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors.

Indicators:	Target	Actual
<i># of assessments including PGI standards</i>	TBD	1 (on-going)
<i>Sex, age and disability disaggregated data is collected.</i>	Yes	Yes

Output 1.2: Programmes and operations prevent and respond to sexual- and gender-based violence and other forms of violence especially against children.

Indicators:	Target	Actual
<i># of staff and volunteers trained on minimum standards</i>	TBD	0
<i># of referral made to specialized psychological services</i>	TBD	6

Progress towards outcomes

During this reporting period, PGI was mainstreamed across the response stages starting with the integration of protection questions in the MSNA. Moreover, to ensure the integration of PSS in the response, 188 front-liners have been trained on PSS (refresher trainings).

There was no other training completed in this time specifically on PGI, as these are already integrated in the different sectors.

Strengthen National Society

S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform

Indicators:	Target	Actual
<i>% volunteers well trained and insured</i>	100%	No available information

Output S1.1.4: National Societies have effective and motivated volunteers who are protected

Indicators:	Target	Actual
<i># of volunteers who are adequately trained and insured</i>	1,000	5,000

Output S1.1.6: National Societies have the necessary corporate infrastructure and systems in place

Indicators:	Target	Actual
<i># laws prepared</i>	3	NA
<i># internal regulations approved</i>	3	NA

Output S1.1.7: NS capacity to support community-based disaster risk reduction, response and preparedness is strengthened

Indicators:	Target	Actual
<i>Plan of Action is developed</i>	1	1
<i>Contingency Plan is updated</i>	TBD	NA

Progress towards outcomes

First, the legal infrastructure and systems, these plans will be implemented throughout the year 2021 in alignment with the country office operational plan for 2021.

Technical support to LRC remains a high priority in this phase of the operation and we have been actively aligning the surge needs with those of the NS to ensure we are supporting the needs within the operation. Surge team was actively involved in the development of the plan of action for the relevant technical sectors contributing to the one plan published by LRC.

International Disaster Response

Outcome S2.1: Effective and coordinated international disaster response is ensured

Indicators:	Target	Actual
# of NS coordinated international disaster response effectively	yes	Yes

Output S2.1.1: Effective and respected surge capacity mechanism is maintained.

Indicators:	Target	Actual
# of surge capacity deployed	8	8

Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved

Indicators:	Target	Actual
# staff and volunteer trained	25	0
% of target population who agree their priority needs are being met	85%	NA

Output S2.1.4: Supply chain and fleet services meet recognized quality and accountability standards

Indicators:	Target	Actual
Standardized warehousing system is in place	TBD	

Output S2.1.6: Coordinating role of the IFRC within the international humanitarian system is enhanced

Indicators:	Target	Actual
Active participation in the cluster and coordination mechanism	100%	100%

Outcome S2.2: The complementarity and strengths of the Movement are enhanced

Indicators:	Target	Actual
% of RC/RC actors reporting improved Movement coordination	85%	NA

Output S2.2.1: In the context of large-scale emergencies, the IFRC, ICRC and NS enhance their operational reach and effectiveness through new means of coordination.

Indicators:	Target	Actual
# of Movement coordination meetings.	TBD	3

Progress towards outcomes

The coordination in this response is on-going within the movement and externally with government, LAF and humanitarian actors through traditional coordination mechanisms. LRC leads movement meetings (Partners) whereby plans and updates are regularly shared each meeting has a technical theme added to compliment the meeting and provide insight to all. These meetings are becoming less frequent, from fortnightly to now monthly or as and when requested to deal with a certain element or priority.

Sector working group meetings are continuously held for standardization of aid and processes. Upon coordination between LRC and relevant agencies- and according to the quarterly report published by LRC covering August till October- a recovery strategy has been drafted and Temporary Technical Committees have been set up to develop technical guidance for prioritized early recovery shelter interventions (Cash for Rent; Repairs and Rehabilitation of residential shelters; Housing, land and Property rights). In addition to that, UN agencies particularly UNHCR and UNOCHA are working daily in the LRC operations center in information management. Other agencies are also regular visitors to LRC as LRC is the lead agency in the Multi Sectoral Needs Assessment (MSNA).

The Logistics team have undertaken Logic training for the warehouse management and are currently implementing the transition from Excel to this system. Warehouse training, Medical Logistics and Fleet wave training are also being planned.

4 meetings (biweekly) conducted by CVA RCRCM taskforce with participation of LRC, IFRC, ICRC and PNS to discuss technical aspects of the cash assistance. One of the highlights of interagency cash task force is deciding on transfer value and transfer currency. Moreover, a non-sectoral Survival Minimum Expenditure Basket (SMEB) was defined followed by setting the grant value for emergency cash. Currently, LRC is working on alignment of SMEB for longer term cash assistance with Cash Task Force.

Influence others as leading strategic partner

Outcome S3.1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.

Indicators:	Target	Actual
<i>IFRC and National Societies participate in local, national and international dialogues/meetings.</i>	Yes	Yes

Output S3.1.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues

Indicators:	Target	Actual
<i># of advocacy and fundraising events</i>	TBD	1
<i># of communications materials produced/published</i>	TBD	5

Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.

Indicators:	Target	Actual
<i># of published research/evaluation supported by IFRC</i>	1	0
<i># of Lessons learned workshops conducted</i>	1	0

Progress towards outcomes

Communication was critical to highlight the impact of the explosion and to promote the appeal for fundraising purposes. Therefore, the regional office produced several communications material:

- Press releases and talking points shared with the movement and channeled all media calls to Lebanese RC as the NS requested.
- Online musical concert: Goodwill Ambassador Maestro Naseer Shamma held a virtual concert with a group of prominent artists to express solidarity with the Lebanese people after Beirut Explosion.
- Five videos were produced describing the impact of the explosion and LRC's response. One example is: https://twitter.com/IFRC_MENA/status/1301829745278152704?s=20
- Red Talks hosted Under Secretary Nabih Jaber, one month after the explosion to further explore the situation and the response plans.

On research and evaluation, preparatory work has been undertaken by LRC and IFRC to determine the RTE (internally led) working modalities and it is ready to roll out, pending a start date.

Another external evaluation is planned for the cash component separately, Through the process of tender, LRC was able to identify a suitable consultant to start the work in the Real Time Review (RTR) of the Cash component (phase 1) and expect to commence this work in mid-November. The review will focus on relevance, speed and scale of cash response of LRC.

Effective, credible and accountable IFRC

Outcome S4.1: The IFRC enhances its effectiveness, credibility and accountability

Indicators:	Target	Actual
<i>Staff is recruited at time</i>	Yes	No (due to a need for second round of recruitment)

Output 4.1.2: IFRC staff shows good level of engagement and performance

Indicators:	Target	Actual
<i># staff recruited</i>	3	0
<i># performance appraisals conducted</i>	3	0

Output 4.1.3: Financial resources are safeguarded; quality financial and administrative support is provided contributing to efficient operations and ensuring effective use of assets; timely quality financial reporting to stakeholders

Indicators:	Target	Actual
<i># of audits implemented</i>	4	0
<i># people trained in fraud and corruption policy</i>	200	0

Output 4.1.4: Staff security is prioritised in all IFRC activities

Indicators:	Target	Actual
<i>% of security assessments carried out and updated.</i>	100% (number=4)	50% (Number=2)
<i>% security Plans updated in all operational areas</i>	100%	100%

Progress towards outcomes

Security plans since August:

- Beirut security assessment conducted every month since August (including Health, Security, politics, economy and services).
- Updating the MSR twice since August.
- Improving the security plans and equipment available at IFRC RO/country Office.
- Building the capacity of the staff and drivers (VHF training, First Aid training...)
- Conducting drills and simulations to identify IFRC weakness and strengths.

D. Financial Report

Please see the interim financial report showing expenditure to date.

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Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2020/08-10	Operation	MDRLB009
Budget Timeframe	2020/08-10	Budget	APPROVED

Prepared on 01 Dec 2020

All figures are in Swiss Francs (CHF)

MDRLB009 - Lebanon - Beirut-Port Explosions

Operating Timeframe: 05 Aug 2020 to 30 Aug 2022; appeal launch date: 09 Aug 2020

I. Emergency Appeal Funding Requirements

Thematic Area Code	Requirements CHF
AOF1 - Disaster risk reduction	0
AOF2 - Shelter	3,247,000
AOF3 - Livelihoods and basic needs	2,489,000
AOF4 - Health	7,864,000
AOF5 - Water, sanitation and hygiene	751,000
AOF6 - Protection, Gender & Inclusion	0
AOF7 - Migration	0
SFI1 - Strengthen National Societies	4,830,000
SFI2 - Effective international disaster management	63,000
SFI3 - Influence others as leading strategic partners	20,000
SFI4 - Ensure a strong IFRC	736,000
Total Funding Requirements	20,000,000
Donor Response* as per 01 Dec 2020	8,127,997
Appeal Coverage	40.64%

II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	0	10	-10
AOF2 - Shelter	749,980	749,980	0
AOF3 - Livelihoods and basic needs	0	0	0
AOF4 - Health	1,052	18,244	-17,192
AOF5 - Water, sanitation and hygiene	0	0	0
AOF6 - Protection, Gender & Inclusion	0	0	0
AOF7 - Migration	0	0	0
SFI1 - Strengthen National Societies	1,754	1,797	-43
SFI2 - Effective international disaster management	27	32,061	-32,034
SFI3 - Influence others as leading strategic partners	1,624	1,791	-168
SFI4 - Ensure a strong IFRC	0	360	-360
Grand Total	754,437	804,243	-49,806

III. Operating Movement & Closing Balance per 2020/10

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	7,366,353
Expenditure	-804,243
Closing Balance	6,562,109
Deferred Income	0
Funds Available	6,562,109

IV. DREF Loan

* not included in Donor Response	Loan :	750,000	Reimbursed :	750,000	Outstanding :	0
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Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2020/08-10	Operation	MDRLB009
Budget Timeframe	2020/08-10	Budget	APPROVED

Prepared on 01 Dec 2020

All figures are in Swiss Francs (CHF)

MDRLB009 - Lebanon - Beirut-Port Explosions

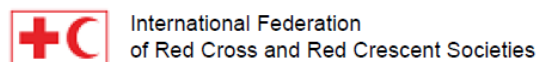
Operating Timeframe: 05 Aug 2020 to 30 Aug 2022; appeal launch date: 09 Aug 2020

V. Contributions by Donor and Other Income

Opening Balance						0	
Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income	
American Red Cross	692,437				692,437		
Australian Red Cross	318,811				318,811		
Australian Red Cross (from Australian Government*)	1,282,608				1,282,608		
Austrian Red Cross (from Austrian Government*)	522,040				522,040		
Bahrain Red Crescent Society	45,128				45,128		
Bloomberg	7,738				7,738		
Boston Scientific	17,124				17,124		
China Red Cross, Hong Kong branch	23,487				23,487		
Croatian Red Cross	5,000				5,000		
Electrolux Food Foundation	2,115				2,115		
Ericsson	73,087				73,087		
Estonia Government	53,789				53,789		

European Commission - DG ECHO	213,803				213,803	
Finnish Red Cross	108,171				108,171	
Japanese Red Cross Society	43,788				43,788	
KPMG Disaster Relief Fund	131,714				131,714	
Lithuania Government	54,086				54,086	
Luxembourg Government	107,441				107,441	
Mexican Government	90,919				90,919	
Monaco Government	53,848				53,848	
Nestle	100,100				100,100	
Norwegian Red Cross	899,029				899,029	
Norwegian Red Cross (from Norwegian Government*)	391,336				391,336	
On Line donations	9,434				9,434	
OPEC Fund For International Development-OFID	182,037				182,037	
Red Cross of Monaco	53,876				53,876	
Republic of Korea Government	455,582				455,582	
Slovenia Government	107,577				107,577	
Spanish Government	53,890				53,890	
Swedish Red Cross	642,759				642,759	
Swiss Government	500,000				500,000	
Taiwan Red Cross Organisation	16,200				16,200	
The Bloomberg Family Foundation Inc	212				212	
The Netherlands Red Cross	38,953				38,953	
Triatlum Advisors	25,000				25,000	
Turkish Red Crescent Society	25,000				25,000	
United States - Private Donors	27				27	
UPS foundation	9,115				9,115	
White and Case, LLP	9,092				9,092	
Total Contributions and Other Income	7,366,353	0	0	0	7,366,353	0
Total Income and Deferred Income					7,366,353	0

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Saving lives, changing minds



Reference documents



Click here for:

- [Previous Appeals and updates](#)
- [Emergency Plan of Action \(EPoA\)](#)

For further information, specifically related to this operation please contact:

In the Lebanese Red Cross

- **Secretary General:** George Kettaneh, Secretary General; email: georgekettaneh@redcross.org.lb, georgeskettaneh@yahoo.com

In the IFRC

- **IFRC Lebanon Country Office:** Cristhian Cortez, Head of Country Office, Lebanon; phone: +961 71 802 926; email: cristhian.cortez@ifrc.org
- **IFRC MENA Regional Office:** Dr Hosam Faysal, Head of Disaster and Crisis (Prevention, Response and Recovery); phone +961 71 802 916; email: hosam.faysal@ifrc.org
- **IFRC Geneva: Programme and Operations focal point:** Rena Igarashi, Senior officer, Operations coordination, email: rena.igarashi@ifrc.org

For IFRC Resource Mobilization and Pledges support:

- **IFRC MENA Regional Office:** Anca Zaharia, Regional Head of Partnerships and Resource Development; phone: +961 81311918; e-mail: anca.zaharia@ifrc.org

For In-Kind donations and Mobilization table support:

- **IFRC MENA Regional Office:** Dharmin Thacker, Acting Head of Logistics, Procurement and Supply Chain Management, phone: +961 5 428 505, email: dharmin.thacker@ifrc.org

For Performance and Accountability support (planning, monitoring, evaluation and reporting enquiries)

- **IFRC MENA Regional Office:** Nadine Haddad, Regional PMER manager, phone: +961 71 802 775; e-mail: nadine.haddad@ifrc.org
- **IFRC Lebanon Country Office:** Yara Shamlati, Surge PMER Coordinator, phone: +961 79 307 820; e-mail: RRPMERCO.Beirut@ifrc.org

How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote **social inclusion**
and a culture of
non-violence and **peace.**