



Beirut Blast Response 2020 UNICEF Lebanon Emergency Cash Transfer

Following the Beirut Blast on August 4, 2020, UNICEF Lebanon designed and set up an emergency cash transfer (ECT) programme that supported 80,000 affected individuals with specific vulnerabilities. Coming amid a severe economic recession and COVID-19 outbreak and lockdowns, the blast severely impacted an already difficult situation, particularly for households in vulnerable groups, such as those with children or people with disabilities. The programme came as an urgent and rapid response to alleviate the impact of the shock given the absence of a national social cash assistance programme and a weak national social protection system.

During design and implementation, UNICEF coordinated with other UN agencies, local NGOs, and cash programme actors through the Cash Task Force, as well as the Government, including local authorities and the Ministry of Social Affairs, to ensure complementarity and coherence of cash transfers, that the programme did not cause duplication and that it built on existing systems, such as Social Development Centres, as much as possible. The Blast ECT was a multi-section effort within UNICEF led by the Social Policy team, with key inputs from Youth, Child Protection, Communications and Operations teams among others, and supported by UNICEF Regional and HQ offices.

Targeting

Targeting took a universal approach in priority affected areas, based on lifecycle vulnerabilities, given that households in these groups are disproportionately affected by shocks and commonly have additional costs, barriers, and discrimination or are otherwise deterred from economic participation. The ECT **was provided to all households in priority areas that had at least one member from a vulnerable group, which included households with children, persons with disability, female headed households, pregnant women, persons above the age of 70**, (See table 1). In addition, partners provided additional information on a small number of other groups such as migrant workers, survivors of gender-based violence and LGBTQI individuals. The programme did not impose any other selection criteria, such as nationality – all households within the categories and priority areas were automatically eligible. Around two-thirds of recipients were Lebanese with one-third being Syrian and a small proportion coming from other nationalities such as Ethiopian and Iraqi.

The priority areas of Beirut were selected according to the scale of their poverty levels and the impact of the blast. Areas included were within three kilometers from the blast site and had pre-existing vulnerabilities and higher poverty rates than other affected areas according to the UN Habitat Operational Zone Scoring map.

With an estimated target of 80,000 eligible people, the ECT aimed for the highest possible levels of inclusion through various outreach campaigns and communication material (see communication section). The blanket approach adopted using priority selected areas and predefined vulnerable groups meant that recipients used self-selection simply according to vulnerability and area of residence, foregoing any means-testing that may have resulted in the exclusion of vulnerable individuals and households. However, the urgency of the programme and budget constraint also necessitated some difficult decisions, such as leaving out some vulnerable households living near to the priority areas but not in them, and individuals who worked in but did not reside in the priority areas.

Table: Geographical and Categorical Distribution of Recipients

ECT Target Individuals / Households	# Reached
Children	61,089
Persons with Disability	2,945
Female Head of Household	8,199
Pregnant Women	1,339
Persons Above the Age of 70	13,000

Area	# of Households	# of Recipients
Al Jisr - Karantina	981	1,966
Al Khodr - Karantina	3,363	7,301
Basta El Tahta	4,128	7,909
Bourj Hammoud	19,325	39,024
El Bachoura - Khandak	7,492	14,756
Karm El Zaytoun	2,641	4,921
Qobayat - Rmeil	2,074	3,768
Total	40,0	79,645

Communication, Outreach and Accountability

The Blast ECT was communicated with the relevant communities across the city to ensure targeted households had access to timely, clear, accurate, and relevant information in different languages, formats and via appropriate means and channels that were accessible to different groups. Posters, flyers, UNICEF website and social media posts, as well as Press release, and radio and TV interviews were used to spread awareness about the programme. Communication tools reached a significant number of households in a very short period, particularly kickoff announcements (65k+ views), and registration tutorials (123K+ views). However, given constraints faced by many recipients, **outreach campaigns evolved early on and were also carried out through municipalities, Social Development Centres (SDCs), religious leaders, youth volunteers and other key community actors.** Those actors also played a key role at a later stage in assisting households in the registration processes, and in obtaining and verifying documents.

Registration and Management Information System

Given the COVID-19 context and the urgency to move rapidly, an innovative new online dedicated registration platform was designed in August, emphasizing self-application that people largely completed on their phone. Around 62 percent of all applications came through the online portal. The portal was easy to use and field support was offered through volunteers, municipalities as well as trained SDC workers to complete the registration for those who faced challenges. In addition, for households that preferred to be registered in person, the platform was made available at dedicated onsite locations set-up throughout the relevant neighborhoods.

UNICEF's in-house central Management Information System (MIS) and database online portal was adapted to fit the new programme. The MIS supports and automates registration, as well as all operational processes including data cleanup, validation, complaints and resolutions and payment reconciliation.

Validation

Validation of applicants' information – checked against a range of key documents, with provisions made where documents may have been lost in the blast – was carried out through three approaches:

1. Remote validation for cases applying online via uploading photos of required documents
2. Onsite validation for cases registering in-person
3. Mobile validation involving household visits in cases where challenges were encountered in onsite or remote validation.

Knowing that validation can be a lengthy and complex process, there is often a trade-off involved given the importance of rapidly reaching people in urgent need. In the context when homes and documents may have been destroyed, challenges arose in some cases for validating household geographical residence while other people with disabilities or female heads of household faced a challenge in providing supporting documentation. This was addressed by including additional documents allowed as well as using mobile validation to visit people at home. Some cases of manipulation of these documents arose and had to be addressed directly with each household.

Transfer Value and Payment

The **transfer value was determined according to a range of factors**, including results obtained from an assessment of minimum expenditure needs, previous post monitoring distribution surveys, and inflation levels, as well as considerations of intended coverage and budget constraint. The assistance value that best matched these results and met coverage aspirations given available funding was a **one-off transfer of USD 120 per individual** in any of the identified categories, up to three individuals per household. This amount also factored in the cost of obtaining any needed documentation for validation as well as transportation to the registration site and cash withdrawal point. The transfer was provided in US dollars to preserve the value of the assistance for recipients, given the continued and sharp devaluation of the Lebanese Lira and the macroeconomic context. All transfers were made directly from UNICEF to the recipient household via money transfer agency.

Taking into account the urgency of the programme, and after deliberations over the use of existing payment systems such as LOUISE¹, a direct **payment mechanism** through a money transfer agency was deemed the preferable option. This took into consideration factors including ease of use and rapidity of implementation for a one-off payment as well as accessibility, COVID-19 protocol and protection measures. This payment option provided a quick and reliable method of cash delivery without the process of issuing cash cards to recipients, which would have involved significant time. Following important delays involved in accessing other existing agreements with financial service providers, UNICEF Lebanon contracted OMT to provide the cash assistance. Delivery took into consideration requirements related to sanction-list checks, and was shown to be very smooth, barring limited interruptions incurred during some of the COVID-19 lockdowns.

1. The common cash delivery system implemented in Lebanon jointly by UNHCR, UNICEF and WFP

Collaboration, Integration, Protection and Risks

Throughout the programme, close communication and collaboration was maintained with government partners that facilitated outreach and documentation for recipients, including the Beirut and Bourj Hammoud municipalities, and the SDCs of the Ministry of Social Affairs, in addition to the **large number of community actors and non-governmental organizations that supported** in outreach, registration and validation including particularly World Vision International and Development for People and Nature Association as well as Mouvement Social and Himi Chabab that supported with over 50 youth volunteers in communities, Insan Association, SIDC, Makased, and Anera.

Protection measures were integrated across implementation and included field training for protection against sexual exploitation and abuse (PSEA), and guidance on referral mechanism for gender-based violence and child protection. A key factor was an effort to integrate the cash programme with other services and a direct referral mechanism for households was set-up for child protection services throughout all registration sites. Risks related to USD disbursement were mitigated primarily by providing the transfer not only to one nationality, and also by spreading payments over time as well as across a large number of payment branches to avoid crowding and creating tensions. COVID-19 safety recommendations were also implemented throughout registration as well as withdrawal.

A key component of any cash programme is that of grievance and redress to ensure full access to information, and a clear channel for complaint resolution. A dedicated hotline and call centre were retained throughout. While call levels were very high, the number of complaints was minimal and mostly related to enquiries of payment processing.

Monitoring

While ongoing operational monitoring was carried out during implementation, following completion of the ECT UNICEF carried out a post distribution monitoring, surveying 500 programme recipients and conducting 10 interviews with Key Informants from government bodies, civil society, and NGOs who had supported implementation at different phases, particularly through community outreach, registration, and validation. Some of the main findings included:

- **92 percent of surveyed households with children** said the programme had a direct positive impact on their children, particularly in terms of nutrition (69%).
- Households mostly spent the cash assistance on food (73%), health – both physical and psychological (53%), utilities (53%), rent (44%), debt (38%) and shelter repair (13%).
- Up to 60% of respondents said they heard about the programme from friends, followed by social media (21%) and community volunteers (10.4%)
- 77% responded that a household member completed the registration themselves without support reflecting the ease of the online application (done by 56% of recipients) as well as onsite registration (used by 44%).
- Almost 97% said that it was easy for them to receive the cash assistance, and 96% reported a satisfactory experience with the cash transfer company.
- **98% reported that the communication process and messaging of the programme's purpose and targeting was clear.**
- In terms of the impact of the blast, 30% reported physical harm from the blast, 94% reported some form of damage.



Lessons Learned

Several key lessons were learned from the ECT in terms of design and implementation. Importantly, the experience of categorical targeting was perceived as easy to understand and fair, and this experience is useful in UNICEF's ongoing work with key partners such as the ILO to strengthen national social assistance in Lebanon, particularly the design of the forthcoming National Social Grants programme that are needed to support households with children and people with disabilities.

Other key lessons include the importance of:

- Engaging with youth volunteers and local community individuals early on to benefit from their support in outreach and registration
- Mainstreaming PSEA from the beginning of the processes and training all staff on GBV/ PSEA as well as ensuring the clarity of the referral mechanism.
- Creating tailored messages for key community leaders to broadcast among their communities, to avoid misinterpretation of messages, as well as creating translated versions of all communication messages to cover all targeted communities.
- Reassessing the call center's capacity at different stages during the implementation process.
- Drafting comprehensive validation scenarios and sharing those with validation teams ahead of time to streamline the process and reduce the possibility of exceptional cases.

In summary, the target of 80,000 recipients was reached, using a total budget of approximately 10 million USD.