



International Organization for Migration (IOM)  
The UN Migration Agency

# IOM LEBANON **APPEAL** BEIRUT PORT EXPLOSIONS

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THE EXPLOSION DESTROYED MUCH OF THE PORT AND SEVERELY DAMAGED THE SURROUNDING RESIDENTIAL AND COMMERCIAL AREAS IN BEIRUT, LEBANON. © IOM 2020/G.OSSEPIAN

## SITUATION OVERVIEW

On 4 August 2020, a massive explosion at the Port of Beirut (PoB) destroyed much of the port and severely damaged the dense surrounding residential and commercial areas in Beirut, Lebanon. The explosion caused the deaths of 178 individuals with a further 30 still missing and more than 6,000 injured (as of 13 August 2020)<sup>1</sup>. It is estimated by the Shelter Sector that more 47,000 apartments sustained some level of damage, affecting more than 170,000 residents, whilst the devastating damage and structural effects of the blast have been felt up to 10km away. IOM estimates that 24,600 migrant workers have also been directly affected by the blast.

Beyond the human impact, the economic consequence is predicted to be significant. Preliminary assessments by the World Bank indicate that apart from the significant physical damage to the PoB, and surrounding areas, other associated costs are the loss of economic activity, trade disruptions and loss of fiscal revenue. Specifically, transport infrastructures as well as 50,000 residential and numerous commercial buildings have been severely damaged, three hospitals were destroyed, 16 primary health centres were moderately to extensively damaged, and 34 schools are now not functioning. Electricity and distribution networks have been destroyed.

The explosion further exacerbates Lebanon's economic crisis and rising infection rates from COVID-19. Poverty levels are estimated to reach 50 per cent of the population and extreme poverty is expected to double from 10 per cent to 20 per cent. Political instability as well as the marginalisation of certain groups (including migrant workers), combined with the spill over effects from the war in Syria (where Lebanon continues to host the largest refugee per capita population in the world), means the impact of this latest crisis could have devastating effects, compounding existing challenges and tensions in the country.

### Target Beneficiaries:

43,100 individuals, including 24,600 vulnerable migrants, 16,500 Lebanese host community members, and 2,000 Syrian refugees.

## IOM APPEAL (USD)

(August - December 2020)



Protection (MHPSS,  
Counter Trafficking and  
Assistance to Migrants)

4.15 M



Health

1.2 M



Shelter

3.5 M



Displacement Tracking

0.5 M



Early Recovery

1.02 M

**TOTAL**

**10.37 M**

<sup>1</sup>Lebanon Beirut Port explosions. OCHA Situation Report No.4 13 August



Prior to the explosion, migrant workers in Beirut were an already marginalised population group. Between May and July 2020, IOM initiated a Migrant Worker Vulnerability Assessment to assess the impact of the economic crisis and COVID-19 on the socio-economic and physical needs of migrant workers in Lebanon. This assessment indicated that migrant workers, mainly from Ethiopia, Bangladesh, Philippines represent 8 per cent or 24,600 of the 300,000 people affected in several sectors of Greater Beirut.

The main needs reported to IOM since the explosion by members of the Migrant Workers Coordination Group (MWCG) included food, shelter, cash for rent, medical aid, mental health, psychosocial support, and voluntary returns. IOM has also confirmed that there are over 150 injured migrant workers and 15 deaths since the explosion on 4 August. A large portion of the population living in the damage radius of the explosion (including Achrafieh, Bourj Hammoud, Carantina and Ras El Nabaa) have lost their homes or suffered significant damage to their shelters.

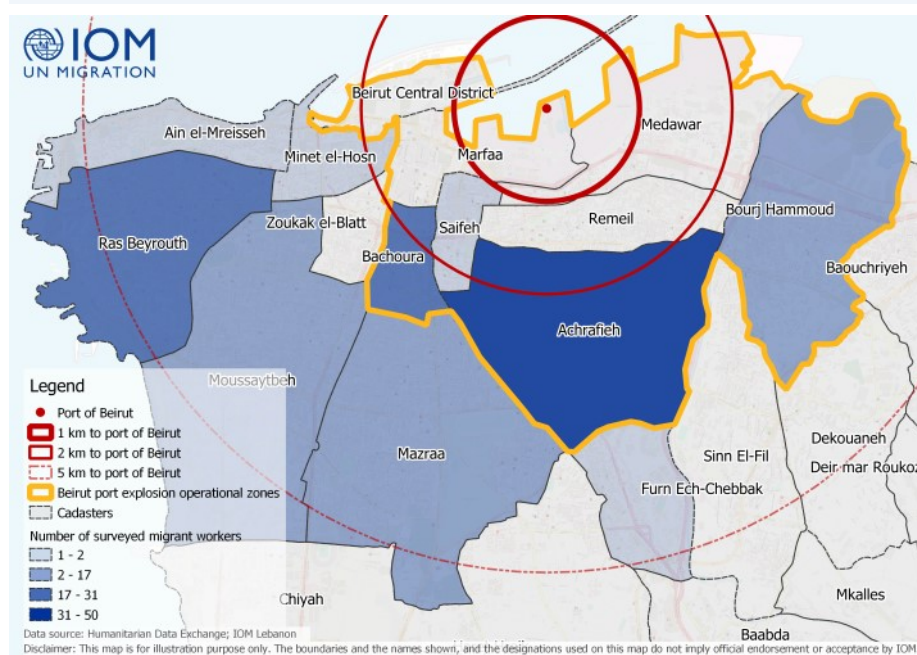
To ensure a comprehensive response, IOM's Appeal for the Beirut Port Explosion is prioritising support in communities hosting large numbers of migrant workers. IOM will do so by addressing the immediate and recovery needs of vulnerable groups in these communities including migrant workers, refugees and Lebanese communities. IOM programming considers gender and cultural differences such as language and specific conditions of vulnerability. The proposed actions will be guided by global best practice, including the [Migrants in Countries in Crisis Guidelines](#) (IOM, 2016) which encompasses the following principles:

- Communicating widely, effectively and often with migrants on the evolving crises and how to access help.
- Facilitating migrant's ability to move to safety.
- Ensuring all humanitarian assistance is provided without discrimination.
- Establishing clear referral procedures, including for migrants vulnerable to exploitation and abuse, including human trafficking.

Based on IOM's existing field presence in Lebanon, including specific expertise responding to needs and vulnerabilities of migrants, IOM's Appeal for the Beirut Port Explosions is aligned with the OCHA Flash Appeal for the Beirut Port Explosion and its Strategic Objectives. IOM's Appeal covers the period August 2020 until December 2020 and addresses the different needs through a two-phased approach defined under Phase 1: Immediate Humanitarian Needs and begins laying the foundations for Phase 2: Recovery and Reconstruction.

The activities proposed in the below plan take into account the operational and logistical implementation modalities rendered necessary by specific public health mitigation measures for COVID-19. Furthermore, activities under this Appeal are aligned with IOM's global COVID-19 Strategic Preparedness and Response Plan and within the framework of Lebanon's National Response to the Pandemic. The Appeal complements existing Syrian Refugee Response programming which is aligned with the Lebanon Crisis Response Plan.

Upholding the human rights and dignity of all affected individuals, including migrants, is at the forefront of IOM's work in crisis contexts. IOM's programming is guided by its Migration Crisis Operational Framework (MCOF), an institutional tool to analyse and plan interventions to address the mobility dimensions of crisis, before, during and after their occurrence. IOM's Humanitarian Policy – embedded in the Principles for Humanitarian Action, ensures that key principles such as protection mainstreaming, Accountability to Affected Population and Prevention of Sexual Exploitation and Abuse are mainstreamed, and retains the principle of humanity as the overarching rationale for interventions. IOM's programming is conflict sensitive and applies do no harm principle, to ensure that the organization avoids contributing to, or exacerbating and contributing further to the challenges in-country.



Map shows the locations of migrant workers as reported by them prior to the explosion. Of the 297 total assessed respondents, 135 were in the Beirut Governorate, and 87 of those whom IOM has collected data on, were reported to be within the "OCHA operational zone." The "OCHA operational zone" boundaries were developed to help coordinate and collaborate relief efforts of the Beirut explosion at the operational level (UNDAC).

For more information regarding IOM's Migrant Worker Vulnerability Baseline Assessment Report, please visit: <https://migration.iom.int/reports/lebanon%E2%80%9494-migrant-worker-vulnerability-baseline-assessment-report-may-july-2020>.

Please note that interviews were conducted at Embassies and therefore, this report may present perspectives of those registered with the Embassies and willing to partake in interviews. As a result, this is a not a representative but an indicative sample.



There are indications that as many as a third may have experiences that relate to one or multiple forms of abuse, exploitation, neglect and deprivation including trafficking. Migrants in an irregular situation or within the employer sponsorship system (Kafala) find it increasingly difficult to access much needed and life-saving humanitarian assistance. The need to respond to the Beirut explosion in addition to existing limitations due to COVID-19 resulted in disruption of referral pathways – such as those for victims of abuse, victims of trafficking (VoT), and vulnerable children, leading to interruptions in case identification, referral, and protection processes. This has led to immediate protection gaps for vulnerable migrants who are often unidentified and/or unassisted. Over time and if not properly addressed this could contribute to the weakening of referral pathways and protection systems for migrant workers. Specialized service providers, such as NGOs providing shelter and case management services for VoT, unaccompanied or separated migrant children, and other migrants in vulnerable situations are facing unprecedented challenges in operations as they have insufficient supplies and staff, facilities are not adequately prepared to accommodate such crisis.

Since the outbreak of COVID-19, a significant number of migrants were prioritised return to their country of origin as one of their main needs. Loss of income and the devaluation of the currency has reduced access to savings for migrant workers, limiting their ability to return on their own. Through this appeal, IOM proposes to assist up to 2,500 individuals with voluntary return ensuring safety and dignity\*.

Proposed actions:

## Phase 1

### Protection

- Map existing social and psychosocial services, and access to shelter, housing, safety kits, care for migrants in coordination with the IOM / ILO led MWCG and the Protection sector.

### Mental Health and Psychosocial Support (MHPSS)

- Provide capacity building and in-kind support to existing MHPSS teams working with NGOs including facilitating counselling services and referrals to specialised mental health services.
- Train informal interpreters in the most recurrent language of migrants in the country including in basic MHPSS, humanitarian principles and listening and translation skills for MHPSS services.
- Translate in the most recurrent languages of migrants and targeted distribution of MHPSS leaflets and social communications developed by other actors, including Ministry of Health (MoH).
- Establish community support systems by training community members in the most recurrent language of migrants in Psychological First Aid (adapted for COVID-19 and the migration context) and mobilize these community members and resources to establish community support systems for people affected by the explosion.

### Migrant Assistance

- Support safe identification and referral of migrant workers at-risk of violence, exploitation, abuse and VoT to specialized services among host, migrant and refugees communities in targeted areas.
- Provide protection and comprehensive assistance, including case management for at-risk migrant workers who are victims of violence, exploitation, abuse and trafficking, and those who have special needs. This support will be provided in cooperation with different NGOs.
- Provide cash assistance to cover immediate needs of the most vulnerable migrants affected by the explosion.
- Provide voluntary return and reintegration support to 2,500 stranded migrants, including associated health assistance prior to departure and support on arrival (including post-arrival cash assistance to cover basic needs during the first few weeks after their return).

## Phase 2

### Migrant assistance

- Provide technical assistance to enhance implementation of national standard operating procedures developed by the counter-trafficking working group to identify, assist and protect VoTs.

## Funding required

**\$4,150,000**

- Migrant Assistance and Counter Trafficking  
\$650,000
- Mental Health and Psychosocial Support  
\$200,000
- Voluntary Return  
\$ 3,300,000

## Target no. of individuals

**43,100** migrant workers, Lebanese host community members, and Syrian refugees

\*The level of returns will be based on countries of origin quarantine/travel rules in response to COVID-19.





With further assessments underway, preliminary information indicates that an estimated 15 hospitals - including three major hospitals - sustained moderate to heavy structural damage from the explosion. A rapid assessment of 55 primary healthcare facilities found that 37 per cent sustained moderate-to-serious damage, while only 47 per cent of surveyed facilities can still provide full routine health services. The remaining functional healthcare facilities are overwhelmed and experiencing significant shortages of critical supplies, staffing issues and high numbers of patients.

The explosion occurred at a time when COVID-19 cases are still rising in Beirut, meanwhile precautionary measures continue to be relaxed since the explosion and more people find themselves in shared temporary shelter arrangements. Cumulatively, Lebanon has registered 7,121 COVID-19 cases (WHO Sit Rep, 12 August), however since 6 August, the country has been registering over 300 cases a day – an alarming sign that the pandemic is fast accelerating in the country.

Prior to the blast, migrants had limited information about, and access to, healthcare facilities in Beirut. According to IOM's vulnerability assessment 14 per cent of surveyed migrant workers reported having existing medical conditions while 26 per cent were unwilling to seek healthcare services in medical emergencies, and only 23 per cent of females, and 31 per cent of males were aware of which clinics/hospitals they could attain services. This illustrates that there are many obstacles in accessing health care at all levels, including service fees, limited information and stigmatization. The acute health impact of the blast has been severe, and wide ranging, including physical injuries, exacerbating respiratory conditions in persons with chronic respiratory illnesses, as well as varying levels of physical and distress.

The medium to longer term affects are worrisome. The significant destruction of the health system overall will likely lead to less effective surveillance and testing for COVID-19, reduced access to preventative care such as vaccination programmes for children to prevent measles and polio, limited mental health and psychosocial support services, a reduction in access to sexual and reproductive health services, as well as interruption of diagnosis and continuity of care for individuals undergoing treatment of diseases such as HIV and Tuberculosis (TB).

Ensuring continuity of care through the rehabilitation of health facilities is critical to re-equip and strengthen the health system after a crisis. Through these efforts, IOM aims to ensure that migrants, refugees, and Lebanese host communities have access to life-saving health care as well as information regarding COVID-19.

Proposed actions:

#### Phase 1

- Support the rehabilitation of damaged primary health care (PHC) centres to resume direct health care, including COVID-19 services, for vulnerable populations including migrants, refugees and Lebanese host communities, as well as covering service fees to ensure access. Rehabilitation efforts include infrastructure reconstruction, provision of medicines, medical supplies and equipment, staffing as well as health promotion efforts, including provision of risk communication and community engagement activities for COVID-19.
- Procure and distribute hygiene and dignity supplies and personal protective equipment for migrants, refugees, and Lebanese host community members in combination with awareness raising.
- Support the continuity of testing and care for people living with HIV and TB through emergency transportation support as well as rehabilitation of clinics in coordination with the National AIDS and TB control programme.

#### Phase 2

- Support the establishment of community events-based surveillance targeting areas with migrant workers and refugees.
- Support the rehabilitation and re-equipping of a COVID-19 quarantine space for pre-departure of migrants as well as isolation spaces, to include provision of appropriate accommodation in line with international standards and physical distancing recommendation, provision of personal protective equipment for staff and provision of food and other consumables.
- Support access to COVID-19 testing for migrant workers by covering the cost of transportation, testing fees and supplies.

Funding required

**\$1,200,000**

Target no. of individuals

**43,100** migrant workers, Lebanese host community members, and Syrian refugees



## SHELTER

Estimates suggest that 300,000 people are currently in need of shelter, mainly in Daoura, Gemmayze, Mar Mikhael, Carantina, Jetawi and Karm El Zeitune. Eighty per cent of residential buildings and infrastructure in these neighbourhoods were damaged.

Prior to the explosion, the majority of migrants surveyed (74%) were paying rent to secure an accommodation, either using their salary (27%), money from their families abroad (25%), their savings (22%) or borrowed money (22%). The explosion has further compounded a situation in which migrants were increasingly facing a deterioration in their income and employment status over the last months. This suggests the important difficulties migrants will face in the short term to secure the cost of their accommodation. The present pressure on safe and accessible housing options is further aggravating migrants exposure to protection risks, in particular eviction, as the vast majority of them do not hold formal tenancy agreements. Refugees and socio-economically disadvantaged Lebanese households living in affected areas face similar challenges.

### Phase 1

- Provide Cash for shelter and NFI assistance to affected migrants for a duration of 3 months to ensure that their immediate domestic, shelter and NFI needs are met, equivalent to LBP 400,000. (1,500 Migrants)
- Rehabilitate Safe Spaces and/or communal shelters hosting migrant workers, especially those with special needs. (2 shelters with the capacity to host 30 migrant workers per month)
- Provide financial support to meet the cost of the accommodation of highly vulnerable migrants, mainly those with special needs, that are referred to safe spaces run by partner organizations (Joint activity with Protection for 200 migrant workers at risks)
- Provide emergency rental assistance to vulnerable Lebanese impacted by the explosion (conditional cash assistance). (1,000 HH)

### Phase 2

- Cash for rehabilitation and / or minor repairs of Shelters for vulnerable Lebanese households that were affected by the explosion. IOM will support with financial assistance directly to the Lebanese families living in apartments that were damaged by the explosion, allowing them to cover the costs of the rehabilitation/reconstruction works. The amount of each grant will be determined by the respective Bill of Quantities (BOQ) prepared by IOM technical staff and the payments will be released following thorough technical assessments. (1,500 Lebanese HH)

Funding required

**\$3,500,000**

Target no. of individuals

**1,790** migrants and

**10,000** Lebanese individuals



## DISPLACEMENT TRACKING

The Secondary Data Review (SDR) conducted on 10 August by the Emergency Operation Cell (EOC) Assessment and Analysis Cell highlighted that current assessment exercises were only able to cover a small proportion of Greater Beirut population. As a result, there is a lack of comprehensive understanding of priority needs of the affected population, which limits the effectiveness of response.

There is a need to establish and maintain regular tracking and monitoring of the evolving situation on population displacement, mobility, and multi-sectoral needs arising from the crisis and during the emergency response. IOM will work with the main actor responding to the crisis the Lebanese Red Cross (LRC) and the Shelter Sector to roll out regular Displacement Tracking Matrix (DTM) multi-sectoral assessments. Assessments will target the estimated 300,000 people who have lost their homes in the most affected areas, including in Beirut and Mount Lebanon governorates.

IOM's DTM is an information system and set of tools developed to gather and analyse data to disseminate critical multi layered information on the mobility, vulnerabilities, and needs of displaced and mobile populations that enables decision makers and responders to provide these populations with better context specific assistance. The DTM is currently active in 63 countries globally.

Funding required

**\$500,000**



The DTM will regularly collect, analyse, and disseminate sex and age-disaggregated data and information to support the response and delivery of humanitarian assistance to the population in need, including information on specialised services for referral mechanisms. This especially includes the priority areas of shelter, health, and livelihood currently highlighted by the SDR.

The data and information will support the emergency response in the immediate term through more effective targeting and delivery of assistance and will inform the process of transition and reconstruction/recovery ahead.

Proposed actions:

#### Phase 1

- Conduct biweekly multi-sectoral needs assessment to collect data at community level in priority locations within the most affected areas. The assessment will focus on multi-sectoral data and information that will inform more effective targeting and delivery of assistance to population in need.
- Conduct monthly baseline area assessments which will collect, analyse, and disseminate data and information on population mobility, vulnerability, and multi-sectoral needs at the Quarter and Sector level in all affected areas within the Beirut and Mount Lebanon Governorates. This will enable better understanding of the changing priority needs of the affected population and support planning and prioritization exercises at the strategic and operational level on regular basis. The time series and multi-sectoral data will also inform the reconstruction and recovery planning and programming process after the immediate life saving phase of the response.



## EARLY RECOVERY

Migrant workers and vulnerable community members suffer from lack of public services, and existing tensions arising from increased insecurity, job competition, perception of humanitarian assistance biases and forced evictions. Key economic sectors that employ migrant workers have been affected by the multiple crises, including domestic workers, employing a high number of migrant workers. As the living conditions of migrant workers continue to deteriorate, they are likely to lead to an increase of tensions over access to already stretched public resources. In addition, there has been growing reports of xenophobic incidents as a result of COVID-19, particularly in overcrowded areas.

IOM will use tension mapping surveys and assessments developed and refined through its Community Stabilisation programming to identify the areas most vulnerable to instability. Over the remainder of 2020, where feasible and appropriate, IOM will begin laying the foundations for longer economic recovery and to ensure that community tensions over access to services and assistance do not spill over into conflict.

The proposed interventions leverage IOM's extensive experience implementing livelihood and stabilization programs in Lebanon since 2015. They complement existing programming responding to the needs of Syrian refugees and affected host communities.

Proposed actions:

#### Phase 1

- Provide short-term income generating opportunities to affected populations refurbishment of community areas, waste collection, rubble removal etc. This will provide vulnerable households with income while also allowing the different communities to work together collaboratively.
- Conduct a rapid needs assessment including rapid labour market assessment and identification of tension sources and areas facing instability within Beirut and Mount Lebanon.

#### Phase 2

- Contribute to economic recovery and private sector development, while supporting sustainable employment opportunities in small and medium enterprises (SMEs). IOM aims to restore essential economic infrastructure by providing financial capital to SMEs with high

Funding required

**\$1,015,000**

Target no. of individuals

**11,450** Lebanese host community members, migrant workers, and Syrian refugees

demand for labour and in key economic sectors or sectors employing migrant workers directly or indirectly.

- Implement Community Support Interventions aimed to enhance local communities' resilience, as well as reinforcing the society's capacity to respond to priority needs, mitigate tensions and avoid the escalation of conflicts mainly among the host communities, migrants, and refugees. The interventions will include small-scale rehabilitation works, socio-cultural and recreational youth-centred interventions.



## CONTACTS

IOM LEBANON - ALISAR BEY  
[balisan@iom.int](mailto:balisan@iom.int)

PREPAREDNESS AND RESPONSE DIVISION  
[prd@iom.int](mailto:prd@iom.int)

DONOR RELATIONS DIVISION  
[drd@iom.int](mailto:drd@iom.int)  
+41 22 717 9111

## INTERNATIONAL ORGANIZATION FOR MIGRATION

17, Route des Morillons  
CH-1211 Geneva 19, Switzerland  
+41 22 717 9111  
[hq@iom.int](mailto:hq@iom.int) | [www.iom.int](http://www.iom.int)



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