









# THE IMPACT OF THE FUEL CRISIS IN LEBANON

ON SERVICE PROVISION
AND ACCOUNTABILITY
TOWARDS AFFECTED
COMMUNITIES

Photo taken by DRC

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### SUMMARY OF KEY FINDINGS AND RECOMMENDATIONS

- Since January 2021 and until May 2021 the number of referrals was slowly increasing reaching an all-time high in June 2021 with 2530 referrals/month. However, this number decreased in August, reaching 1048 referrals/month. This does not reflect a reduced need for humanitarian services, but rather an inability of service providers to access communities due to the fuel/gasoline crisis that began in April/May 2021 and reached its peak during July and August 2021. Continuing on guaranteeing adequate resources to help beneficiaries reach service providers and service providers to have contingency plans in place is essential to make sure service providers can continue reaching communities in need. They need to have mitigation measures in place to make sure persons of concern can contact them remotely if unable to reach services in person due to a lack of fuel or transportation. But also, prevention strategies should be devised/initiated by service providers especially with winter approaching and the importance of fuel in the winter season.
- From June 2021 and until August 2021 humanitarian service providers reverted back their reliance on remote safe identification and referrals using hotlines and phone calls, due to both fuel crisis and COVID-19 restrictions. Supporting frontliners with increased communication allowance is indispensable to maintain remote activities despite internet or network gaps.
- In terms of means of identification of referrals needs, even though phone call identification
  increased, service providers were still having difficulties in getting in touch with persons
  of concern due to frequent internet connection and electricity cuts.
- Staff in charge of Complaints and Feedback Mechanisms (CFM) were able to collect feedback less frequently due to a reduced footprint in field locations and faced delays in tracking and following up on hotline calls due to poor internet network and inability to recharge phones.
- In August, there was a significant decrease in the number of successfully closed cases, with only 2% of referrals being 'Successfully Closed', compared to 19% in January 2021, suggesting that the proportion of service delivery in relation to the number of referrals received deteriorated significantly. Ensuring identification entry points for service deliveries that are geographically closer to communities, ideally walking distance for persons of concern, and the need to contingency plan to avoid interruption of service delivery and the continuity of aid activities is essential. Furthermore, service providers to clearly communicate to communities their operating hours so that persons of concern do not get frustrated travelling to services that are not available and use resources to reach services (money to pay for transportation).

#### INTRODUCTION

For nearly three months, Lebanon has been assailed by a serious fuel/gasoline crisis, affecting several sectors, including the humanitarian sector. The acute fuel crisis led several I/NGO's to cut back on their activities and operations while needs continued to intensify for all communities. Referrals on the Referral Information Management System (RIMS) hit an all-time high in June 2021, which shows the scope of humanitarian needs. Simultaneously, the fuel crisis that hit Lebanon during the preceding three months, starting mid-May 2021, remarkably diminished service providers' capacity to access communities, and in turn communities' access to services.

**Currently service providers** are facing challenges due to poor internet connection and electricity cuts linked to the acute fuel crisis Lebanon is facing. They are finding many challenges in maintaining presence in the field due to reduced operational capacities and the inability to access areas of implementation. Service providers are **changing ways of working to identify, refer and deliver services to vulnerable communities, in spite of the terrible fuel crisis.** 

By exploring referral data from RIMS, this report highlights the barriers in maintaining access to humanitarian services for communities across Lebanon. It issues recommendations on how to overcome identified barriers and ameliorate access to service providers and vulnerable communities.

### OVERVIEW OF REFERRAL TRENDS DURING THE PAST TWO YEARS

Comparing the number of referrals sent in 2020 with the number of referrals sent in 2021 reveals a considerable increase in humanitarian needs but also the fact that there was an increase in the number of partners using RIMS between the two years; where the average number of referrals sent is 1600/month compared to 800 in 2020 (see Figure 1). In addition, there was also a significant increase not only in the number of referrals, with multiple referrals for the same person indicating a wider diversity of needs, but also in the number of persons of concern referred on RIMS altogether; where the number of beneficiaries referred is 11,211 beneficiaries in 2021 compared to 8,206 in 2020 (see Figure 2).

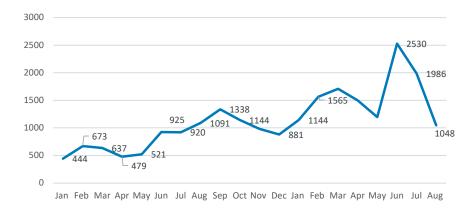
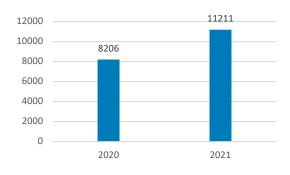


Figure 1 Number of referrals sent from January 2020 to August 2021.



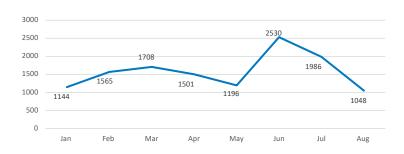


Figure 2 Number of beneficiaries referred in 2020 and from January 2020 to August 2021 on RIMS

Figure 3 Number of referrals sent on RIMS starting January 2021 and until August 2021

From January 2021 until May 2021 the number of referrals was slowly increasing reaching, an all-time high in June 2021 with 2,530 referrals/month. However, this number decreased in August reaching only 1,048 referrals per month (see Figure 3). This does not necessarily reflect reduced need for humanitarian services, but rather an inability of service providers to access communities due to the fuel/gasoline crisis that began in April/May 2021 and reached its peak in June and August 2021...

## CHALLENGES RELATED TO I/NGO'S ACCESS TO COMMUNITIES AND COMMUNITIES' ACCESS TO SERVICE PROVIDERS WITH THE EMERGENCE OF THE FUEL CRISIS

Since the beginning of the fuel crisis, significant challenges were reported by humanitarian actors in being able to continue to identify beneficiaries in need of services. Service providers found many challenges in maintaining their presence in the field due to fuel scarcity and the inability to ensure transportation for staff to areas of implementation. This led aid organizations to increase again their reliance on hotlines and phone calls to identify beneficiaries. However, service providers faced another challenge due to poor internet connection and electricity cuts caused by the lack of fuel to telecommunication providers since both humanitarian service providers and persons of concern were unable to recharge their phones on a regular basis and therefore maintain access to essential services. Furthermore, the fuel crisis and the inability to access transportation has caused the proportion of services provided in relation to the number of referrals received to significantly deteriorate, but also affected the capacity of following up on referrals and reaching individuals in person or via phone due to a lack of electricity and network. Sending referrals on time, and tracking them appropriately, notably on information management systems, has also been difficult with the low-speed internet connection, due to poor networks.

### 1. Service providers increased reliance on remote identification and home visits:

As demonstrated in Figure 4 below, in June 2021 and until August 2021 humanitarian service providers increased their reliance on remote safe identification and referrals methods using hotlines and phone calls, due to both Fuel crisis and COVID-19 restrictions. The proportion of beneficiaries identified using phone calls increased from 37% in January 2021 to reach an all all-time high in June 2021 of 42%, which relates to when the fuel crisis became significantly worst across the country. Furthermore, the increase in hotline and phone calls identification explains the drop in the

number of cases identified via self-referrals and home visits during June 2021. Even though, phone call identification increased, service providers were still having difficulties in getting in touch with the beneficiaries due to frequent internet connection and electricity cuts. Service providers and beneficiaries are unable to recharge their phone on a regular basis which means they are not able to consistently follow up and contact beneficiaries.

Although service providers were facing many challenges in maintaining their presence in the field with all the transportation barriers, the proportion of cases identified via home visits increased from 8% in June 2021 to reach 16% in August 2021, which demonstrated that organizations were making a considerable extra effort when they can to access communities in need and were committed to finding alternative solutions despite the lack of fuel to reach communities. This was critically important as the number of self-referrals decreased from June 2021 to August 2021, indicating that without prioritization of field presence by humanitarian actors the fuel crisis would have left a large portion of people in need without access to services.

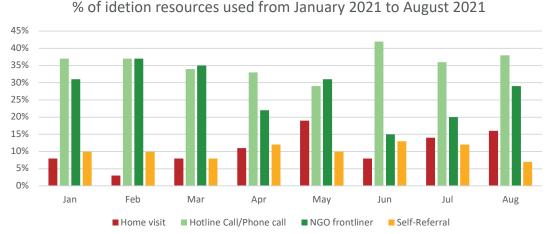


Figure 4 Source of identification NGO's are relying on starting January 2021 to August 2021

Staff in charge of Complaints and Feedback Mechanisms were also able to collect feedback less frequently due to reduced footprint in field locations, and faced delays in tracking and addressing hotline calls due to poor internet and inability to recharge phones, which affects the impact of the work of aid organizations and the quality of the services delivered to beneficiaries.

#### 2. Effectiveness of referrals

#### A. Successfully closed referrals

In terms of service provision following referrals, there was a significant decrease in the number of successfully closed cases, with only 2% of referrals being Successfully Closed during August 2021 compared to 19% in January 2021 (see Figure 5). This suggests that the proportion of service delivery in relation to the number of referrals received deteriorated significantly. This can be attributed to the system being overloaded but also the fuel crisis, and the inability to access transportation services by vulnerable communities in order to receive the services, as well as service providers' inability to maintain the same level of services, whether in person or online, and the interrupted service of public institutions that humanitarian workers rely on (for example, legal ones). This is further demonstrated in the next section when looking at the sectors that suffered the most decrease in the number of successfully closed cases.

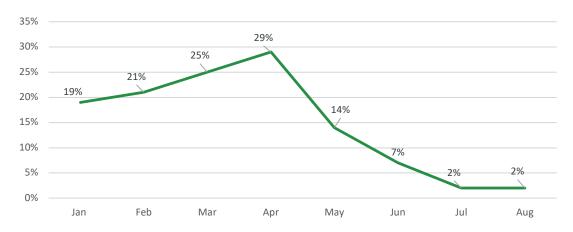


Figure 5 Proportion of Successfully closed cases from January 2021 to August 2021

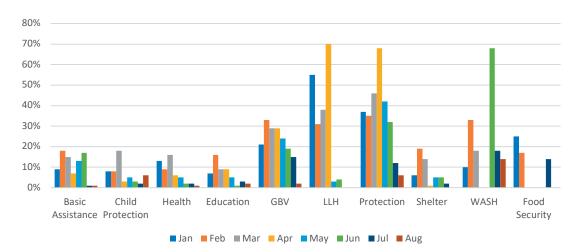


Figure 6 Proportion of Successfully closed cases from January 2021 to August 2021

In the beginning of 2021, Protection and GBV services constantly reported the highest proportion of 'Successfully' closed cases, which demonstrates that although working remotely due to COVID 19, these sectors were still able to function and provide services via in person and remote tools and that transportation was a barrier only for specific sectors such as Health and Livelihood services, where the beneficiary had to be present to receive the service.

However, starting April 2021, RIMS data shows an important decrease in the proportion of successfully closed cases for both Protection and GBV services, with only 6% of Protection cases and 2% of GBV cases being successfully closed compared to 33% and 21% In January 2021. This is most likely due the acute fuel crisis that led to reduced electricity production, causing power rationing of up to 22 hours per day which left many areas in almost-total darkness, meaning service providers were not able to use their phones/laptops or internet connection to conduct online activities, because they were not able to charge them and because internet/communication service providers had to shut down.

Furthermore, the reduced working hours and/or closure of a number of enterprises who had to send their employees home due the scarcity of the fuel and electricity, will likely lead to an increase in the livelihood and cash assistance requests received by humanitarian actors. This will put an even bigger pressure on humanitarian actors and the need to find alternative ways of providing services even in the absence of public transportation or any alternatives to secure fuel to reach services. The importance of addressing the pending livelihood cases, is clearly demonstrated by the proportion of successfully closed cases on RIMS during the last 4 months. Only 4% to 0% of Livelihood cases were closed compared to 50% in January 2021. This is likely due to people's inability to reach centers

where Livelihood activities are organized, with people prioritizing essential travel only due to high costs of travel and scarcity of public transportation, as well as the challenges experienced when providing these activities such as electricity cuts during trainings. It is also worth noting that absence of air conditioning during significant heat leads some individuals to remove their masks which in turn may cause safety concerns for the people in the room. In the medium-term, this could mean people drop out of activities and therefore programming is less effective to meet the needs of people. In addition, due to the catastrophic economic crisis impacting the country people are increasingly likely to rely on humanitarian cash support due to their inability to access livelihoods options. Distribution of cash is also hampered by reduced door-to-door assessments and referrals for this type of service, as well as difficulties from beneficiaries to access the FSP distribution points. This is compounded by the fact that FSP offices are operating on reduced working hours and are not able to produce e-cards.

Finally, the proportion of successfully closed health referrals had decreased noticeably, not only because patients were not able to reach hospitals or other health services providers, but because the fuel crisis had left several hospitals in critical shape. Many hospitals are now forced to reduce their electricity consumption and capacity which means that even if patients are able to reach hospitals, they might not be admitted to receive the service due to limited capacity.

#### **B. Follow up Challenges:**

According to service providers, follow up on referrals is increasingly challenging because of difficulties to reach beneficiaries in person and via phone and difficulties to reach the other agencies, from the lack of electricity and network coverage. It has also been challenging to send referrals on time, and track them appropriately, notably on RIMS and information management systems which require high-speed internet, due to poor networks and challenges in data entry, which is particularly concerning for urgent referrals (which account for 20% of the total number of referrals). Coordination is increasingly complicated, with communication challenges, affecting coordination between agencies which is essential to efficient and accountable referrals and provision of multi-sector services.

Service providers report that agencies receiving referrals are sometimes delayed in their technical assessment of the need of the person, which ultimate affect the timeline of the action plan and ultimate service provision. Delayed referrals, and service provision, also create additional potential risks for the people in need of services.

### RECOMMENDATIONS

- Organizations to dedicate adequate resources to help persons of concern reach service providers (transportation fees, pre-paid taxis, pre-paid internet bundles) as much as possible and continue to prioritize in-person service delivery whenever possible.
- Service providers to identify points for service delivery that are geographically closer to the communities they work with, ideally walking distance for persons of concern, and whenever possible, to set up mobile methods of service delivery.
- Service providers to clearly communicate to communities operating hours so that beneficiaries do not travel long distances for services that are not operational.
- Frontliners to be supported with increased communication allowance to maintain remote activities despite internet/network gaps and adapted transportation allowance to continue essential field activities because fuel prices have increased.
- Conduct and improve effectiveness of remote assessments if needed and where possible to continue referrals to life-saving assistance

- Inter-Agency Coordination structures to review the role of community focal points, recognizing the increasingly vital role they are playing in the new context and to ensure that level of effort does not exceed compensation provided.
- Strengthening the coordination between the organizations working in the same sector so everyone can be aware on the available services in the main areas of implementation.
- Actors to update the service mapping (wither it was on RIMS or on Activity Info) on regularly basis showing the services provided during the crises period
- Prevention strategies should be devised/initiated by service providers especially with winter season approaching and the scarcity of fuel.



This report provides an analysis of national referral data gathered through RIMS over an 8 months period, from January 2021-August 2021, of 80 RIMS partners, up from 55 in the previous reporting period. Findings in this report are based on a quantitative analysis of RIMS data, with findings being triangulated by secondary data sources: 1) quantitative data analysis of RIMS referral data e.g. indicators to assess the effectiveness of referrals are used to analyze the impact of the fuel crisis on access to services more broadly, 2) secondary data resources and 3) Focus Group discussions were conducted by the RIMS Team to contextualize and understand the findings from the quantitative analysis.

**Effectiveness indicators:** The DRC RIMS Team developed four indicators to assess the effectiveness and accountability of service providers:

Figure 1. Effectiveness Indicators

Speed refers to the time that it takes for the receiving agency or internal focal point to acknowledge receipt of the referral. It is measured by the number of days from when the referral was sent, to when it was received

by the receiving agency or internal focal point. Referrals considered on time are referrals responded to within

24 hours for fast track referrals and 48 hours for normal referrals as per Referrals Minimum Standards. .Timeliness refers to the total time that it takes to complete the referral process. It is measured by the number of days from when the referral was sent,

to when it received a final status (Accepted/ Not Accepted). Referrals considered

time are referrals receiving a last status within 24 hours for Fast Track referrals and 14 days for Normal referrals Accuracy refers to the volume of Not Eligible referrals. It is measured by the percentage of referrals with a Not Eligible final status.

Response refers to the level of response and follow up of the receiving agency on the referrals they receive. Response

is measured by the percentage of ''No Feedback Received'' referrals, compared to ''Received'', and ''Not Eligible''/''No Service Delivered''/" Accepted/ Successfully Closed'' referrals.

#### **Key Limitations**

**Data quality:** Despite continuous training on data quality on RIMS, data entry errors continue to be a challenge on RIMS, affecting effective and consistent data entry and information management practices. The RIMS team has observed this challenge across humanitarian organizations, and it was necessary for some data to be discarded. Improvements to data quality are ongoing.

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