



Right to a Future: Threats to Material Safety

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Disclaimer

While the team made all efforts possible to cross-check information and reproduce only accurate facts and events, this does not overrule the possibility of inaccuracies or oversights, for which the Working Group for Persons Affected by the Syrian Displacement Crisis in Lebanon expresses hereby its regrets.

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Acronyms

ICESCR	International Covenant on Economic, Social and Cultural Rights
MEHE	Ministry of Education and Higher Education
MoPH	Ministry of Public Health
NFE	Non-Formal Education
PRS	Palestinian Refugees from Syria
RACE	Reaching All Children with Education
TPA	Third Party Administrator
UN	United Nations
UNHCR	United Nations High Commissioner for Refugees
UNRWA	United Nations Relief and Works Agency for Palestine Refugees in the Near East

Foreword

Currently, Lebanon hosts over 1.5 million Syrians and 500,000 registered Palestinian refugees¹, amounting to the highest number of refugees per capita in the world. Even though the Syrian refugee crisis is in its sixth year and there is an abundant flow of international support, policy-makers fail to respond to the crisis adequately and in line with their international obligations.

Local non-governmental organizations (NGOs) and international organizations have repeatedly stepped in when the government has failed to provide basic assistance and services that ensure the safety of refugee and host communities. This paper presents the positions of ten NGOs working in Lebanon on issues relating to refugees' legal and physical safety. Following extensive collaborative efforts, these organizations have identified the lack of access to legal documentation and legal remedy as the main threats to the dignified living of refugee populations in Lebanon.

By providing insight into the daily realities of Syrian and Palestinian refugees in Lebanon, this paper aims to highlight the gaps in Lebanese policies towards refugees from Syria, and how certain structures - or lack of them – not only deprive refugees of their basic rights, but deny them better prospects for their future.

Finally, this paper seeks to more accurately inform policy-makers and present practical recommendations that can help local and international stakeholders meet the needs of refugees and host communities.

1 UNRWA, "Protection in Lebanon 2016", April 2017, https://www.unrwa.org/sites/default/files/content/resources/protection_in_lebanon_2016.pdf

Background

Since the civil war, the Lebanese public sector has suffered from weak and fractured infrastructures that are under-equipped, and unable to adequately deal with structural shortcomings. The mismanagement of Palestinian and Syrian refugee issues in Lebanon, by Lebanese decision makers and the international community, have deprived many refugees from accessing services such as healthcare and education. Shortages in international funding have prevented aid agencies from providing adequate access to services and limited the number of refugees registered with UNHCR.

These challenges complement already-existing gaps in the Lebanese educational and healthcare systems.

The educational sector continues to suffer from administrative barriers that limit access to education or create violent spaces. A large segment of the Lebanese population lacks access to affordable medical coverage. Due to inefficient public health facilities, private facilities have become the sole accessible venue for health services². Many refugees and impoverished Lebanese families who have limited income are unable to afford private healthcare.

² Nabil M. Kronfol and Rashid Bashshur, "Lebanon's Health Care Policy: A Case Study in the Evolution of a Health System under Stress", 1989, p.377

Access to Education

In 1972, Lebanon signed the International Covenant on Economic, Social and Cultural Rights (ICESCR) stipulates, “primary education shall be compulsory and available free to all,” and secondary education, “shall be made generally available and accessible to all by every appropriate means”³. To fulfil the right to education, the ICESCR committee states that governments must provide quality education that is accessible to all without discrimination, within safe physical reach, in adequate learning facilities and responsive to the changing needs of students⁴. Lebanon’s commitment to provide education to refugee children is expressed in the Reaching All Children with Education (RACE) programme, led by the Lebanese Ministry of Education and Higher Education (MEHE).

The programme states that all children aged 3 to 18, “have a right to and are eligible to access education, irrespective of their status”⁵. As of January 2017, almost 500,000 Syrian children registered with the UNHCR in Lebanon were of school age, of whom half remain out of school, along with 50,000 Lebanese children of primary school age (6-14 years)⁶. This number does not include Syrian children who are not registered with the UNHCR, of whom most are not registered in school.⁷ ⁸The RACE 2 response plan, a recent successor of the initial RACE programme, aims to increase the number of Syrian children enrolled in formal education. To do so, MEHE introduced an open enrolment policy in 2012, instructing all public schools to waive enrolment fees and register Syrians regardless of their residency status⁹. In order to expand schools’ capacities, some public schools have stayed open in the afternoons and evenings for second shifts.

3 ICESCR, Article 13

4 The Committee on the International Covenant on Economic, Social and Cultural Rights, : “General Comment No. 13 on the right to education”, 1999

5 Elizabeth Buckner and Dominique Spencer, Carnegie Endowment for International Peace, “More coordination between international donors, the public sector, and civil society actors could fill gaps in education for Syrian refugees in Lebanon”, May 2016, available at <http://carnegie-mec.org/sada/63513>: (accessed August 1, 2017)

6 The Government of Lebanon and the United Nations, “Lebanon Crisis Response Plan 2017- 2020”, January 2017

7 Meeting with Basmeh & Zeitooneh June 2, 2017

8 Caroline Alsharabati and Carine Lahoud, “Analysis of Child Education Survey”, March 2016; Hana A. El-Ghali, Nadine Ghalayini, and Ghida Ismail “Responding to crisis: Syrian Refugee Education in Lebanon”, March 2016

9 Human Rights Watch, “Growing Up Without an Education”, July 2016, <https://www.hrw.org/report/2016/07/19/growing-without-education/barriers-education-syrian-refugee-children-lebanon>; Ministry of education and Higher Education, “Reaching All Children with Education in Lebanon”, June 2014, <http://www.mehe.gov.lb/uploads/file/2015/Feb2015/Projects/RACEfinalEnglish2.pdf>

The MEHE has also launched an accelerated learning programme that targets students who have missed at least two years of schooling due to violent conflict. For Palestinians, UNRWA is the sole provider of education in Lebanon. It runs 67 schools across the country, and one vocational education centre that is unable to accommodate the growing Palestinian population¹⁰. UNRWA has had severe budget cuts and school facilities are deteriorating. Among Palestinian refugees from Syria (PRS), who do have access to UNRWA primary and secondary education, 30% are estimated to be out of school¹¹ due to the lack of prospects in obtaining official school certificates¹². Still, over 50% of Syrian refugee children, and 35% of Palestinian children from Syria living in Lebanon do not attend school.¹³ Excluding the RACE 2 program and UNRWA, several barriers exist that prevent the success of open enrolment policies. Grassroots NGOs have highlighted the following as key barriers to education for Syrian and Palestinian children.

Security concerns

For Syrian and Palestinian children aged 13 to 17, the difficulty in obtaining valid residency permits complicates, even prevents, their access to public education¹⁴. Refugees are eager to apply for residency permits, however few can pay the \$200 residency renewal fee. Children must typically pass checkpoints to get to school, and if they look older than fourteen, they are likely to be questioned at checkpoints. Children above the age of 15 are typically required to carry their legal residency permits.

Transportation

School transportation is not covered by the RACE 2 plan, and the lack of access to affordable transportation prevents Syrian parents from being able to enrol their students in school.

Child labour

A lack of valid residency and work permits leave Syrian and Palestinian families with few possibilities to secure their livelihoods.¹⁵ Some must resort to pulling their children out of schools to work¹⁶. Children under the age of 14 are easily, and often, exploited since refugee children are less likely to attend school,¹⁷ nor are questioned at checkpoints. In some cases, child labour is even legal. Due to Lebanon's long history of seasonal farming, Lebanese law permits children

10 UNRWA, "UNRWA Schools in Lebanon Open Their Doors to Palestine Refugees", September 1, 2016, <https://www.unrwa.org/news-room/press-releases/unrwa-schools-lebanon-open-their-doors-palestine-refugees>

11 Matteo Benatti, UNRWA, "Double Burden: Palestinian Refugees from Syria, conference at AUB", May 23 2017

12 UNRWA, "UNRWA Response and Services to Palestine Refugees from Syria (PRS) in Lebanon", Issue 43, March - April 2015, <http://bit.ly/1nSI7E>

13 Meeting with Basmeh & Zeitooneh June 2 2017

14 Human Rights watch, "Growing Up Without an Education", July 2016, <https://www.hrw.org/report/2016/07/19/growing-without-education/barriers-education-syrian-refugee-children-lebanon>

15 Human Rights watch, "Growing Up Without an Education", July 2016, <https://www.hrw.org/report/2016/07/19/growing-without-education/barriers-education-syrian-refugee-children-lebanon>

16 Caroline Alsharabati and Carine Lahoud, "Analysis of Child Education Survey", March 2016

17 Caroline Alsharabati and Carine Lahoud, "Analysis of Child Education Survey", March 2016

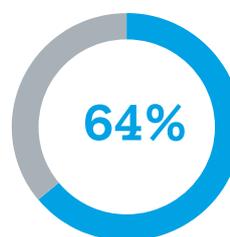
above the age of 10 to work on farms¹⁸. In 2010, Lebanon adopted a national action plan during the Global Child Labour Conference at The Hague, pledging to eliminate child labour by 2016¹⁹. Despite the government and NGOs' continuous efforts to combat the issue, it is estimated that there are over 100,000 children who are victims of child labour and illicit trade, three-fourths of whom are Syrian^{20 21}.

Discrimination and corporal punishment

An ALEF survey from 2016, reported that 21% of children, both Lebanese and refugees, experience violence in schools in Lebanon²². Prevalent discrimination, bullying and corporal punishment by peers and teachers have turned schools into hostile spaces for children in Lebanon. By July 2017, over 64% of Syrian children who were verbally or physically abused at school dropped out²³. Most impoverished Syrian refugees live in vulnerable Lebanese communities that do not receive the government

aid they require. However, the international aid flowing into Lebanon often neglects vulnerable local Lebanese populations, leaving these communities frustrated and upset. This has often resulted in resentful attitudes towards Syrians, in the form of discrimination and bullying in the classroom and bus rides.²⁴

Syrian dropouts due to abuse in schools



“When we meet as we enter [our classes], [the Lebanese students] curse us and insult us with bad words. Some Lebanese teachers treat us violently and punish us severely. Sometimes we complain about them to the administration but nothing changes and sometimes we also try to film them beating a student, but we are also afraid of the consequences”

- Noura*, 13.

18 Paul Cocharne, Executive Magazine, “Child Labor in agriculture on the rise in Lebanon”, June 12, 2016, <http://www.executive-magazine.com/economics-policy/child-labor-in-agriculture-on-the-rise-in-lebanon>

19 Ministry of Labor, “National Action Plan to Eliminate the Worst Forms of Child Labour in Lebanon by 2016”, November 2013

20 ILO, UNICEF, SCI, “Children Living and Working On the Streets in Lebanon: Profile and Magnitude”, February 2015

21 Paul Cocharne, Executive Magazine, “Child Labor in agriculture on the rise in Lebanon”, June 12, 2016. <http://www.executive-magazine.com/economics-policy/child-labor-in-agriculture-on-the-rise-in-lebanon>

22 ALEF, Manara, Naba'a, “Child Led Data Collection”, 2016

23 Figures based on 87 beneficiaries from Himaya

24 Human Rights watch, “Growing Up Without an Education”, July 2016, <https://www.hrw.org/report/2016/07/19/growing-without-education/barriers-education-syrian-refugee-children-lebanon>

*first names have been changed for the safety of those interviewed

Refugee families often avoid filing complaints against bullies, school teachers, and administrators for fear of retribution from their Lebanese counterparts. In 2006, the MEHE tried to implement strategies to ensure that violence in schools was dealt with appropriately, for example, by appointing counsellors in charge of following up on school abuse claims. The MEHE still does so, however, these strategies are often improperly implemented. Several organizations found that counsellors often lack the knowledge and training to carry out such responsibilities²⁵.

Quality of learning

In 2013, public spending on education accounted for only 2.6% of Lebanon's GDP, less than half of what other MENA countries allocate for their educational sector²⁶. This has resulted in an inability to hire educated and professional teachers. Fifty-four percent of teachers in public schools and around thirty percent of elementary school principals do not hold university degrees²⁷, affecting the overall quality of public schools. Parents who can afford private school are forced to send their children to private school instead to ensure a quality education. Those who can't, often prefer to remove their children entirely from the education system instead of sending them to public school.

Second shift in school

Many public schools have recently set-up second shifts in the evenings for Syrian children. However, certain administrations are unwilling to cooperate, claiming there is not enough financial support, demand, or the local community's resistance poses a threat to the children²⁸. The limited capacity of public schools affects the learning opportunities for refugee and Lebanese children who are unable to afford private education. Some accelerated learning programmes and remedial courses that helped refugee children catch up to their Lebanese peers were shut down. There is now a lack of support for students, especially Syrian and Palestinian children who are used to a curriculum in Arabic, as opposed to the Lebanese curriculum taught in English or French.

Enrolment and accreditation

In Lebanon, enrolment in primary school is open to all children, legally residing in Lebanon or not. Schools that are unwilling to teach Syrian children ask for official government documents not required by MEHE, which schools know most families cannot obtain.

Admission into secondary school is nearly impossible for Syrian and Palestinian refugees. To enrol in grades 10 to 12, Syrian students must pass the Lebanese Brevet exam or provide a transcript of grades 7 to 9, which can only be obtained in Syria or from the Syrian embassy in Lebanon. Syrian and Palestinian students are allowed to sit for the grade 9 Brevet official exam, but certificates

25 Meeting with Himaya, June 8, 2017

26 UNDP, "Human Development Report 2016", http://hdr.undp.org/sites/default/files/2016_human_development_report.pdf http://hdr.undp.org/sites/default/files/2016_human_development_report.pdf

27 UNDP in the Parliament, "Fighting against corruption in education, health and water sectors", 2013, p.11

28 Interview with Himaya, June 8, 2017.

can't be issued before they provide documentation of previous education, residency or UNHCR registration.²⁹ The students are also rarely told where to pick up their exam results in time to register for the upcoming school year. Another key issue is the lack of opportunities for Syrians and Palestinians with high school or post-secondary degrees. Most syndicates and unions in Lebanon are only available to Lebanese citizens. Syrian and Palestinian students are presented with severely limited post higher education and work opportunities. Many, therefore, find it useless to pay for an education that can't lead to employment.

The unclear role of non-formal education

As part of the RACE 2 plan, MEHE developed a framework for non-formal education (NFE). It focuses on accelerated learning programs, basic literacy skills and remedial support. Most NFE programs are run by NGOs, but need preapproval from MEHE. The RACE program is the only way for NGOs to be a part of the decision-making process and to coordinate efficiently with MEHE. However, MEHE currently excludes NGOs from the RACE committee, preventing successfully coordination between the government and NGOs.³⁰ Still, NGOs remain important actors in the fight to provide equal, public education to vulnerable Syrian and Lebanese communities.

29 Council of Ministers Decree No. 40, March 17, 2016; NRC, "A Future in the Balance", April 2016

30 Meeting with Amel, June 2, 2017; Hana A. El-Ghali, Nadine Ghalayini, and Ghida Ismail, "Responding to crisis: Syrian refugee education in Lebanon", March 2016

Access to healthcare

The right to health, inscribed in the Universal Declaration of Human Rights, is “the right for everyone to have a standard of living adequate for the health and well-being of themselves and of their family, including food, clothing, housing and medical care and necessary social services³¹.” The committee on the ICESCR emphasizes that healthcare must be accessible to all without discrimination, available in sufficient quantity, affordable and within safe physical reach, especially for vulnerable and marginalized groups³². Unfortunately, due to weak infrastructure and an inefficient and corrupt governance, the right to accessible healthcare is not available to many refugees and Lebanese communities. Previous studies and grassroots NGOs have identified the following main barriers to accessing healthcare³³

Inefficiency of public medical coverage

Public medical coverage is only eligible for employees in the public or private sector. As a result, persons with liberal professions, privately employment, unemployment employed, or employment in the informal sector, are required to obtain private insurance and are ineligible for public coverage. Citizens unable to pay for medical treatment out of pocket are only eligible for health services covered by the Ministry of Public Health (MoPH) in public or government-contracted private hospitals and health centres that lack staff and medical equipment. Around half of the Lebanese population is uninsured and thus has to rely on these services³⁴. As a result, healthcare in Lebanon is not only more expensive than in other countries in the region, but often unaffordable³⁵.

31 The Committee on the International Covenant on Economic, Social and Cultural Rights, “General Comment No. 14 on the right to health”, August 2000

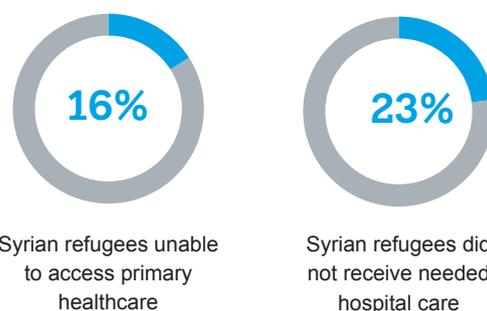
32 The Committee on the International Covenant on Economic, Social and Cultural Rights, “General Comment No. 14 on the right to health”, August 2000

33 Oxfam, “Healthcare: Safe and Dignified Access”, July-October 2016; Lebanon Support, “Access to Healthcare for Syrian Refugees”, November 2016, <http://daleel-madani.org/sites/default/files/accesshealthcaresyrianrefugees-Is2016.pdf>; Karl Blanchet, Fouad M. Fouad and Tejendra Pherali, “Syrian refugees in Lebanon: the search for universal health coverage”, 2016

34 Karl Blanchet, Fouad M. Fouad and Tejendra Pherali, “Syrian refugees in Lebanon: the search for universal health coverage”, 2016

35 Lebanon Support, “Access to Healthcare for Syrian Refugees. The Impact of Fragmented Service Provision on Syrians’ Daily Lives”, November 2016, <http://daleel-madani.org/sites/default/files/accesshealthcaresyrianrefugees-Is2016.pdf>

Syrian refugees living in Lebanon are offered certain healthcare services. Those registered with the UNHCR benefit from 75% coverage in cases of life-threatening hospitalization. However, a World Food Programme study showed that 16% of Syrians registered with the UNHCR are unable to access primary healthcare and 23% do not receive needed hospital care³⁶. The privatized and costly nature of Lebanese healthcare poses additional challenges for Syrian and Palestinian refugees and low-income Lebanese families. By April 2017, only 6% of the required funding for healthcare in 2017 was secured since international donors didn't meet their commitments³⁷. Due to the limited available funds, UNHCR financial support was reduced to primary healthcare and life-saving hospital care only.



Failures of the private healthcare system

The private health sector has failed to provide adequate accountability mechanisms. Doctors are required to administer life-saving measures even for patients who are not insured., Doctors often ignore such requirements and refuse to care for patients if they're unable to provide third-party coverage or cash guarantees³⁸. In August 2016, a four-year-old boy in critical condition was refused admission to the American University Hospital because his father could not pay for the medical procedure up front. The child had to be taken to another hospital following extended deliberations with the hospital's administration, thus delaying his treatment³⁹.

Consequences of restricted freedom of movement and transportation

Refugees' restricted movement around Lebanon poses another barrier to accessing health services. Refugees without valid residency risk arrest and fines if they need to pass checkpoints to get to a hospital. Curfews, which are implemented in various municipalities, that target Syrians creating more obstacles since refugees cannot leave their homes at night. Taxi drivers will often help refugees by circumventing checkpoints or breaching curfew but they charge extra, a price many refugees cannot afford⁴⁰.

36 WFP, "Vulnerability Assessment of Syrian Refugees in Lebanon 2016", December 2016

37 Inter-Agency, "Health quarterly Dashboard", March 2017

38 ALEF, "Annual Report 2016", April 2017, https://alefliban.org/wp-content/uploads/2017/03/ALEF_AnnualReport_2016.pdf

39 Rajana Hamiyye, Lebanon Files, "Private Hospitals Blackmailing Citizens No Money No treatment", August 10, 2016, <http://www.lebanonfiles.com/news/1071785>

40 Oxfam, "Healthcare: Safe and Dignified Access", July-October 2016

Limited scope of UNHCR provision

The cost of treatment is a major hurdle for Syrian refugees due to the high cost of healthcare in Lebanon, and the narrow scope of UNHCR coverage. The UNHCR covers only 75% of the hospitalization cost and most refugees struggle to secure the remaining 25%. Furthermore, the 75% coverage is limited to deliveries, care for new-born babies and life-threatening conditions⁴¹. UNHCR also covers 85% of the cost of laboratory and diagnostic tests at primary healthcare centres for patients with physical or mental disabilities.⁴² Refugees suffering from cancer or kidney diseases do not receive coverage for chemotherapy or renal dialysis⁴³.

Several NGOs, all with different criteria for coverage, offer financial assistance to cover the 25% patient's share or treatments that are not covered by UNHCR. Although NGOs can help a broader range of refugees by having different criteria, it is often unclear to refugees which NGOs offer what.

The UNHCR referral system

The UNHCR referral care system is a major obstacle for refugees in need of hospitalization. UNHCR medical coverage is overseen by a third party administrator (TPA), an insurance company that decides which cases qualify for coverage and which hospitals patients have access to. The Lebanese Center for Human Rights (CLDH), reports that in most cases, refugees do not know how to get in touch with the TPA and if they do, they have difficulty coordinating with the TPA and the hospital's admission office⁴⁴. Often, hospital staff are unaware that their hospital is partnered with UNHCR. As a result, refugees are unable to secure payment from UNHCR required for hospital admission. In absence of payment guarantees, hospitals contracted by the UNHCR have refused to admit patients or have required a deposit before starting treatment and retained ID documents and corpses, if death does occur, until payment is complete.

“I tried to reach out for help from the [UNHCR] when I was pregnant, but they didn't help so I had to go to a private hospital. You can ask for a list of available hospitals but then you have to visit each one and they always refuse to admit you and refer you to another hospital. I was about to deliver my baby and they refused to let me in. I was on the road for 6 hours looking for hospitals. It was hell”.

Houda*, 22

41 UNHCR, "Guidelines for Referral Health Care in Lebanon", December 2016

42 UNHCR, "Health services for Syrian Refugees in Mount Lebanon and Beirut", March 2015

43 Government of Lebanon and the UN, "Lebanon Crisis Response Plan 2015-2016: Year Two," September 2017

44 Meeting with CLDH June 8, 2017

*first names have been changed for the safety of those interviewed

According to UNHCR's standard operating procedures, for patients whose illnesses are not clearly terminal, the decision whether to cover procedural expenses is made by an exceptional care committee consisting of three medical experts. However, according to CLDH, those decisions are made by only two general practitioners without the necessary specialized knowledge. The main reason for denial by the general practitioners is often financial rather than medical⁴⁵.

For Syrian refugees who are not registered with UNHCR, assistance is limited to certain primary healthcare services⁴⁶. If an unregistered refugee needs life-saving treatment, the TPA is required to preapprove treatment and accelerate the application process in order to make a quicker status determination⁴⁷. However, several NGOs working in the field have never heard of, or are aware of, any case in which an unregistered refugee was able to access UNHCR supported hospital care⁴⁸.

PRS are not eligible for UNHCR support, and rely on UNRWA and NGOs such as the Palestinian Red Crescent Society for medical support⁴⁹. Primary healthcare is provided free of charge by UNRWA in different health clinics, as well as financial assistance and cost coverage in other hospitals with contracts⁵⁰. However, clinics, especially UNRWA's⁵¹, are understaffed, overcrowded and lack appropriate equipment. Though primary and secondary services are meant to be fully covered by UNRWA, they only partially cover tertiary care services in other hospitals and refugees are often unable to cover the rest.

With more international financial support directed towards the relatively recent Syrian refugee crisis, fewer resources are sent to help Palestinian communities. There continues to be an increase in the gap between the needs of the Palestinians and the support provided by local and global communities. The healthcare services available to Palestinian refugees are chronically underfunded⁵². In January 2016, following cuts to UNRWA's hospital coverage, two Palestinian women died after being denied access to UNRWA contracted hospitals⁵³.

45 Meeting with CLDH June 8, 2017

46 UNHCR, "Health services for Syrian Refugees in Mount Lebanon and Beirut", March 2015

47 UNHCR, "Guidelines for Referral Health Care in Lebanon", December 2016

48 Meeting with CLDH June 8, 2017; Meeting with Amel June 2, September 2017

49 UNHCR, "The situation of Palestinian Refugees in Lebanon", February 2016

50 UNRWA, "Health in Lebanon", <https://www.unrwa.org/activity/health-lebanon> <http://bit.ly/1oyTosT>

51 UNRWA, "Needs assessment for Palestine refugees from Syria", March 2014

52 UNHCR, "The situation of Palestinian Refugees in Lebanon" February 2016

53 The Palestinian Information Center, "UNRWA Cuts Claim Life of Another Palestinian Women in Lebanon", January 15, 2016, <https://english.palinfo.com/news/2016/1/15/UNRWA-cuts-claim-life-of-another-Palestinian-woman-in-Lebanon> <https://english.palinfo.com/news/2016/1/15/UNRWA-cuts-claim-life-of-another-Palestinian-woman-in-Lebanon>

Recommendations

To the Lebanese Government

- Develop clear equitable standards and policies that enhance accountability and encourage transparent feedback from the government about complaints filed institutions in public institutions.
- Enhance coordination between all public, private, and non- governmental service providers to ensure equal access to services.
- Facilitate access to protection and legal documentation for all Syrians in Lebanon, and broaden the applicability of the \$200 fee waiver to encompass all Syrians who are registered as refugees, or recorded at UNHCR, while ensuring and monitoring the consistent implementation of the waiver.
- The Ministry of Interior should issue a notice instructing municipalities to abolish curfews to ensure Syrian refugees' freedom of movement.
- The Judiciary should monitor and review all municipal decisions to ensure they are in line with Lebanon's constitution and international human rights obligations, and take legal actions against unlawful discriminatory policies.
- Create a framework that allows NGOs to provide the healthcare and education services that are inaccessible to vulnerable communities, including in places of detention.

To UN Agencies

- The UNHCR should strengthen coordination with healthcare providers and insurance companies to ensure that refugees have timely access to proper medical assistance.
- To develop clear standards that ensure that contracted healthcare providers have the capacities to deliver the needed services to their patients.
- To ensure a balanced access to healthcare services among all refugee communities in Lebanon by limiting gaps in funding from local and global communities.

To the Ministry of Education

- The Ministry of Education should provide greater funding for transportation to schools with trained staff on each bus for security purposes.
- The Ministry of Education should improve their coordination with NGOs providing non-formal education to ensure a smooth transition for students moving into the formal education system.
- The Ministry of Education should accept flexible regulations that allow Syrian students to sit for official exams, enrol in secondary school, and access accreditation in a timely manner.
- The Ministry of Education should enhance the capacities of existing complaints mechanisms to respond adequately to abuse and acts of violence perpetrated by administrators and teachers in schools, while providing for a transparent accountability process which also protects complainants from retribution.

To the Ministry of Public Health

- The Ministry of Public Health should establish an independent monitoring unit that monitors the review of complaints and enhances the accountability of the public and private health sector.
- The Ministry of Public Health should use the heightened financial involvement of international actors in the current crisis to invest in developing a universal health coverage plan that includes refugee communities and vulnerable Lebanese populations, thus reducing inequities and ineffectiveness inefficiencies of the Lebanese health care system.

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سوا للتنمية والإغاثة
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