



## **STRATEGY FOR THE MINISTRY OF SOCIAL AFFAIRS AND SOCIAL SECTOR DEVELOPMENT 2016-2020**

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## **STRATEGY 2016 - 2020**

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### Disclaimer:

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## Preface

The Strategy for the Ministry of Social Affairs (MoSA) and Social Sector Development 2016-2020 has been prepared by the Ministry of Social Affairs within the framework of the project “Technical Assistance to Strengthening Strategic Planning Capacities” (Strategic Planning or SP), carried out under the patronage of the Office of the Minister of State for Administrative Reforms (OMSAR).

It follows the key directions of the 2010 National Social Pact and 2011 National Socio Economic Development Strategy by addressing the priorities for the social sector development aiming for improving the quality of life of all marginalized, disadvantaged and vulnerable citizens.

This Strategy is a result of social policy and institutional analysis of the current social care system provided and funded by the Ministry of Social Affairs.

It is underpinned by principles and values, serving as national pillars for the overall multi-confessional social environment of the Republic of Lebanon.

All actions proposed are time-framed, prioritized and resourced against set targets and performance measurement indicators, as well as grouped within specific objectives all contributing individually and jointly for achievement of the Strategic Goals and ultimately of the Strategy Vision.

The leading role for elaboration and implementation of this Strategy is dedicated to the Ministry of Social Affairs, mandated by the Government to achieve a National Agenda for a social inclusive Lebanese society.

The Ministry of Social Affairs will work in partnership with all stakeholders active in the social sector. Therefore, this Strategy pays significant attention to public consultation and underlines the importance of all stakeholders, which contribution, support and active role, are critical for successful implementation of the proposed actions and achievement of the Strategy's Goals and the Vision.

In this context, this Strategy is meant to make a real difference in the lives of disadvantaged, vulnerable and other groups of people in need, youth, families, elderly, disabled persons, and for their social inclusion in the life of the their communities.

And last but not least, this Strategy does not attempt to be a final stage of development. It shall be considered as a living document open for regular revisions and adjustments during the implementation by taking into the account the changes evolving within the dynamic Lebanese society. Mechanisms for regular tracking, monitoring and reporting, as well as risks mitigation mechanisms, are set up to ensure smooth implementation.





## List of Abbreviations

CBR	Client Beneficiary Register
CEDAW	Convention on the Elimination of all forms of Discrimination Against Women
CRS	Convention on the Rights of the Child
CSR	Corporate Social Responsibility
DDA	Division of Disabled Affairs
DFA	Division of Family Affairs
DG	Director General
DNAO	Division of Non-Governmental Associations and Organisations
DSD	Directorate of Social Development
DSS	Directorate of Social Services
DSW	Division of Social Welfare
EU	European Union
GoL	Government of Lebanon
HRDS	Human Resources Development Strategy
IMC	Inter- Ministerial Committee
IT	Information Technology
LBP	Lebanese Pound
MEHE	Ministry of Education and Higher Education
MIG	Minimum Income Guarantee
MIS	Management Information System
MoF	Ministry of Finance
MoIM	Ministry of Interior and Municipalities
MoJ	Ministry of Justice
MoL	Ministry of Labour
MoPH	Ministry of Public Health
MoSA	Ministry of Social Affairs
NGO	Non-Governmental Organization
NSDS	National Social Development Strategy
OMSAR	Office of the Minister of State for Administrative Reform
OSD	Office of Social Development





PM	Prime Minister
PMO	Prime Minister's Office
PPP	Public Private Partnership
SDC	Social Development Centre
TA	Technical Assistance
UDHR	Universal Declaration of Human Rights
UN	United Nations
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WB	World Bank
WWI	World War One





## Executive Summary

### Introduction

The Government of Lebanon has a National Agenda for a socially inclusive Lebanese Society, which requires broader public administration reform, for streamlining and integration of duplicative efforts and overlapping responsibilities between different line ministries.

The Strategy for MoSA and the Social Sector 2016-2020 has been elaborated to contribute to the achievement of the National Agenda, in the absence of public administrative reform, to achieve optimal accomplishments and results by MoSA within the limitations of its current legal mandate and jurisdiction over social sector areas.

Nevertheless, the Strategy analyses the provision of different services provided by MoSA, including those overlapping with functions of other line ministries, and provides clear recommendations to inform the future public administration reform.

This Strategy has been elaborated by MoSA SP Team, trained and coached by GFA experts, within the EU project “Technical Assistance to Strengthening Strategic Planning Capacities” (Strategic Planning or SP), carried out under the patronage of the Office of the Minister of State for Administrative Reforms (OMSAR).

### Framework and Content

The methodology used for elaboration of the Strategy followed the Manual for Strategic Planning provided by the project.

As per the methodology, in Chapter 1 – Situation Analysis, the Strategy provides an overview of the historical background and evolution of the social sector by examining key milestones, and different stakeholders’ mandates, that shaped the context in which MoSA was established and currently operates within. External and internal stakeholders have been identified, examined and presented as per their importance, role and involvement. The overall sector analysis has been summarized in Social Sector SWOT Matrix. Following the examination of the social sector’s strengths and weaknesses, Chapter 1 provides an in-depth analysis of MoSA operations in the provision of services and care to beneficiaries within the law 212 and Decree 5734. The areas examined, conclusions and recommendations provided focused on three main criteria, the first being direct beneficiaries of MoSA support, the second being evidence based situational analysis and planning against available human, material and financial resources, and the third being the percentages of the budget solely provided by MoSA annually and directed towards the beneficiaries through various programmes and projects. This approach methodologically required: a) the collection and analysis of evidence-based data and trends about beneficiaries and services for a 5 years period of time (period: 2010-2015); b) analysis of the functions, processes and structures of the MoSA Directorates and Social Development Centres, responsible for organizing and providing support to citizens in need; and c) analysis of the annual MoSA budgetary expenditures, directed towards support and care of beneficiaries, either by MoSA’s SDCs or through contracted service providers. Combined, these expenditures amount to more than 90% of MoSA’s overall annual budgets directly supporting people in need.





In addition to data analysis, this Chapter also includes an elaborated in-depth assessment of internal and external factors, such as: a) information and data collection, sharing and management; b) coordination, consultation and networking of resources; c) monitoring, evaluation, reporting, impact assessment, social impact analysis being current difficulties for evidence based planning; d) external communication and promotion; e) donors coordination and absorption capacity; e) legislative framework; and f) poverty assessment.

At the end, Chapter 1 summarises the key findings of the overall situation analysis in SWOT Matrix of MoSA, followed by detailed conclusions about all areas where current identified problems of MoSA business operations, processes and functions can be strengthened and improved. These conclusions were derived from problem definition and diagnosis of the existing decision making processes, human resource management, staffing, business processes, organizational bottlenecks within MoSA, as well as the planning, organisation, management and administration of the services and programs funded by MoSA. The conclusions served to provide for a pathway to recommendations enabling actions for capacity building, organisational modernisation, standardisation, improved visibility and transparency, as well as local communities' pro-active engagement in the planning and delivery of services that are tailored to meet individual needs of the citizens and local communities. These recommendations and actions can be achieved over the lifespan of the strategy leading to achieving sustainable social inclusion while taking into account the legal, operational and financial constraints faced by MoSA.

Chapters 2 and 3 present the Strategy's Mission and Vision, respectively, derived from the situational analysis, as realistic directions that can be accomplished by MoSA, while following guiding Principles and Values, presented in Chapter 4.

The Mission informs how MoSA will work towards improving the capabilities of vulnerable communities and the quality of life of all the citizens in need.

The Vision aims towards an inclusive society in which all citizens in need have equal access to services.

The Principles of the Strategy guiding MoSA towards fulfilling the Vision will be partnership, equality, social solidarity, systematic functioning, evidence based service planning and delivery, transparency and accountability. On the other hand, the Values of the Strategy reinforce equal opportunity, freedom of choice and human dignity stemming from broader national values.

In line with the Mission, Vision and Principles and Values, Chapter 5 presents 3 Strategic Goals and 9 Specific Objectives translated into detailed Courses of Action for the period 2016-2020. These Goals and Objectives are derived as logical and realistic measures to address the identified gaps and issues in the conclusions of the situation analysis in Chapter 1, and serve to fulfil the Vision. They are as follows:





This Strategy foresees 35 main activities divided into 150 sub-activities for the implementation of above objectives during the time-frame of the Strategy.

In line with the methodology, these activities will be translated into time-framed, resourced and budgeted annual Operational Plans, with clear targets, measurable indicators, expected end of year results and clearly allocated responsibilities.

Resources and Costs, required for implementation of the Strategy are examined in Chapter 6, while the Risk Mitigation Plan is presented in Chapter 7.

Finally, The Strategy presents acknowledgements to all involved in its elaboration.

## Conclusion

This Strategy is the first evidence based long term planning and programming document of MoSA that serves as a vehicle towards building a socially inclusive society. Its implementation is not conditioned by the change of the current national legislation and solely relies on MoSA's existing human, material and financial resources, on continued cooperation and partnership with non-governmental organisations and institutions, and potential donor assistance. It will be led by MoSA's Strategy Implementation Team which will regularly track, monitor and evaluate the progress, to ensure timely and effective adjustments to the Courses of Action towards fulfilling the Vision. The Strategy pays significant attention to strengthening MoSA's cooperation and partnership with the non-governmental organisations, associations and institutions while engaging and empowering the local communities, to actively participate in the Strategy's implementation by working side by side with MoSA, as founding shareholders "architects of nation-wide social inclusion". In doing so, the Strategy wants to establish a solid foundation of ownership and long term sustainability.

The first year Operational Plan 2016 has been elaborated as a separate document that will serve as a model for the future annual Operational Plans during the 2017-2020 period.

## Chapter I - Situational Analysis

### I.1 General Country Description

Lebanon is an East Mediterranean country. It covers an area of 10,452 Km<sup>2</sup>, with population estimated of nearly 6 Million People, where 4 Million people are Lebanese citizens, almost 1.5 Million Syrian Refugees, and around 313,000 Palestinian and about 180,000 Iraqi refugees.

Lebanon is divided into 8 governorates, with 26 districts, 43-municipality unions (2016), 1017 Municipality (2015), and 1350 Villages.



Figure 1 - Map of Lebanon

Lebanon is a representative democracy with an executive branch, a legislative branch and a judicial branch. Due to political differences the position of the President of the Republic has been vacant for more than two years. In Lebanon there are 18 different registered sects with representation in the National Assembly.

The legal system is a mixed system of civil Law, stemming from the French civil code, or what is known as the Napoleonic law, Ottoman tradition, and religious laws covering personal status, and family relations including marriage, divorce and other relations of the different religious communities.

## I.2 Introduction

Lebanon is a multi-confessional state and cultures, religious customs and traditions of the ethnic communities are influential ingredients of the political, economic and social system and functioning of the state and its institutions, particularly in the area of the social sector. The source of its richness and multi-cultural society adds complexities to the management and provision of services as the overlap between governance, social norms, religious norms, and administrative authorities are all meshed together forming the social and administrative fabric of Lebanon.

Therefore, the Social sector in Lebanon is fragmented with division and overlap of responsibilities and functions among different stakeholders with different interests.

This chapter is divided in two main sections and sub-sections namely:

- Overview of Lebanon Social Sector
  - Social Sector Evolution and Development
  - Current Stakeholders in the Lebanese Social Sector
  - Key Stakeholders
  - Social Sector SWOT Analysis
- Ministry of Social Affairs (MoSA)
  - Institutional and Organizational Characteristics
  - Services, Programmes, and Projects Funded by MoSA

The Strategy sees as important to provide an overview of the historical background and the evolution of the social sector in Lebanon before analysing the Ministry of Social Affairs (MOSA) and the areas of social sector under MOSA's jurisdiction. The overview is important to understand why:

- ❖ MOSA has limitations in implementing social policies;
- ❖ Social sector regulatory and functional changes need legal approval and the acceptance of the political, legal, ethnic, sectarian and religious courts;
- ❖ Non-Governmental Organisations have strong interests and powerful influence in the social sector in Lebanon;
- ❖ Ethnic and Religious Organisations are enjoying big trust among the Lebanese citizens and ethnic communities and are exercising exclusive jurisdiction over number of social policy areas (e.g. adoption, fostering, domestic violence, home assistance, etc.); and
- ❖ Various initiatives and reform programmes proposed by line Ministries default in long term status quo.

These issues have deep roots seeded in Lebanon's social sector long before MOSA was established and their understanding is crucial for elaboration of this Strategy by MOSA.

## I.3 Overview of the Lebanese Social Sector

### Social Sector Evolution and Development

The evolution and development of the sector, integrated with MoSA's history, is briefly examined throughout key Lebanon historical time frames: the early beginnings, the Lebanese Civil War period, the post-civil war era, and the present.

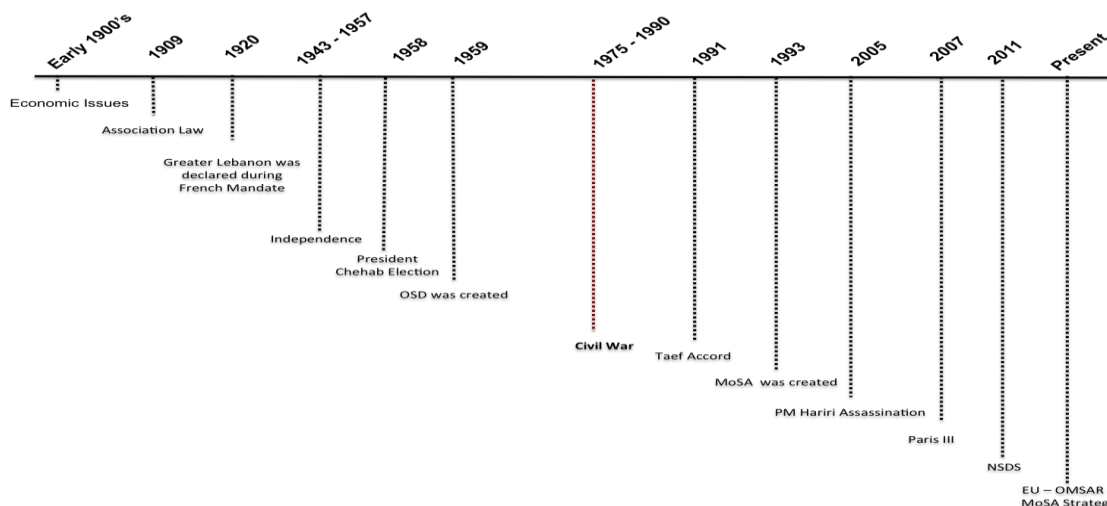


Figure 2 - Key Milestones for the Social Sector and MoSA

#### Key Milestones

Period/ Date	Context	Type of Care and Providers
Early 19 <sup>th</sup> Century	Poverty, Administrative and governmental structure was mainly sectarian division	<ul style="list-style-type: none"> <li>Care: Education, development and healthcare.</li> <li>Religious organisations were main actors.</li> </ul>
1909	Association Law was created, due to surge in associations caring constituents.	<ul style="list-style-type: none"> <li>The law is still in effect.</li> <li>Registration of association only requires awareness and notification to Ministry of Interior.</li> </ul>
1920	After WWI Sykes – Picot placed Lebanon under French Mandate. In 1920 Greater Lebanon was established, and the constitution was created.	<ul style="list-style-type: none"> <li>French administration discouraged the founding of NGO's, enabling missionaries to spread Christian and Western cultures</li> <li>This immobilized the social sector.</li> </ul>
1943 – 1957	Lebanon Post Independence	<ul style="list-style-type: none"> <li>Sectarian associations were formed under the patronage of different religious groups.</li> <li>Their purpose was to strengthen the bond between members of their communities by offering them charitable services.</li> </ul>
1958	President Chehab was Elected and a new period was established	<ul style="list-style-type: none"> <li>Commencing of national secular reforms</li> </ul>
1959	Creation of Office of Social Development (OSD)	<ul style="list-style-type: none"> <li>Office for Social Development (OSD) was created under the leadership of Mr. Joseph Donato.</li> <li>Oversight was by Ministry of Labour.</li> <li>OSD faced hostility from Non Public sector and that led to the notion of cooperation, collaboration and greater involvement of the civil organizations as main contractors and services providers.</li> </ul>
1959 – 1975	Administrative, economic and social reforms enabled a larger role for secular organizations.	<ul style="list-style-type: none"> <li>Specialized professional associations came in and reduced the influence of religiously affiliated associations and made room for new development of entrepreneurs focused on social and economic advancement.</li> </ul>
1975 – 1990	Civil War broke out across sectarian lines, government was in disarray with 750,000 displaced, 400,000 killed, 250,000 wounded, and 100,000 maimed	<ul style="list-style-type: none"> <li>State failure and confessional and politically backed Non-public organizations were main actors</li> <li>Organizations provided relief, reconstruction, healthcare, social care, training and education, assistance to orphans and people with disability, provision of food, transportation of the wounded, and scholarships for higher education.</li> <li>Organizations earned the trust of the populations</li> <li>NGO staff developed key skills</li> </ul>



1991	Taef Accord ended the war and Lebanon entered the stage of Syrian Tutelage.	<ul style="list-style-type: none"> <li>The Syrians dampened the registration of organizations and restricted opposing political parties' organizations.</li> <li>Funding shifted to government</li> <li>Organizations adjusted their focus to: <ul style="list-style-type: none"> <li>Socio-economic development</li> <li>Poverty alleviation</li> <li>Environmental issues</li> <li>Governance and Reform</li> <li>Care</li> <li>People with disability</li> </ul> </li> </ul>
1993 - 1994	MoSA Created	<ul style="list-style-type: none"> <li>The law 212 2/4/1993 created the ministry.</li> <li>Decree 5734 29/9/1994, set functions of the directorates.</li> <li>They re-legislated, and reinstated the social reanimation component of ODS with the mandate of the office becoming that of the ministry.</li> <li>Law 327 (date) allowed MoSA to create emanating projects and contract Civil Society Organizations.</li> <li>The minister organises, amends, through suggestions from the Director General.</li> <li>The law reduced the need to go to the council of ministers for several decisions. In 2004, the need to add legislation that that impacted the ministry arose again.</li> <li>Decision, 133/1 6/7/2004 organises the relationship of the ministry with communities, NGO's, and emanating structures.</li> <li>Decision, 134/1 6/7/2004, provided the legal framework for the financial procedures.</li> <li>Decision 662 18/12/2007 organises the relationship of the ministry with SDCs</li> </ul>
2005	PM Hariri was assassinated, and parties and associations aligned and that alignment led to the expulsion of the Syrian presence in Lebanon.	<ul style="list-style-type: none"> <li>New Government organizations took more effective role on key social issues from issues like civil and human rights, and participation in governance issues.</li> </ul>
2007	Paris III occurred allocating \$7.6 Billion to assist Lebanon, and requiring a strategy and the creation of an Inter-Ministerial committee (IMC).	<ul style="list-style-type: none"> <li>Inter-Ministerial Committee (IMC) was created with: <ul style="list-style-type: none"> <li>Minister of Social Affairs</li> <li>Minister of Public Health</li> <li>Minister of Education and Higher Education</li> <li>Minister of the Interior and Municipalities</li> <li>Minister of Labour</li> <li>Minister of Economy and Trade</li> <li>Minister of Finance</li> <li>Head of the Council for Development and Reconstruction</li> </ul> </li> </ul>
2011	First NSDS	<ul style="list-style-type: none"> <li>This strategy represented the first attempt by the Lebanese Government to develop a comprehensive National Social Development Strategy. However, its implementation was hindered by the Syrian crisis and influx of nearly 1.5 million refugees seeking health care and social services in Lebanon. Therefore I remain a policy framework with no implementation.</li> </ul>
2015	EU – OMSAR – MoSA Strategy	<ul style="list-style-type: none"> <li>Elaborated in 2016 through EU support.</li> </ul>

### Current Stakeholders in the Lebanese Social Sector

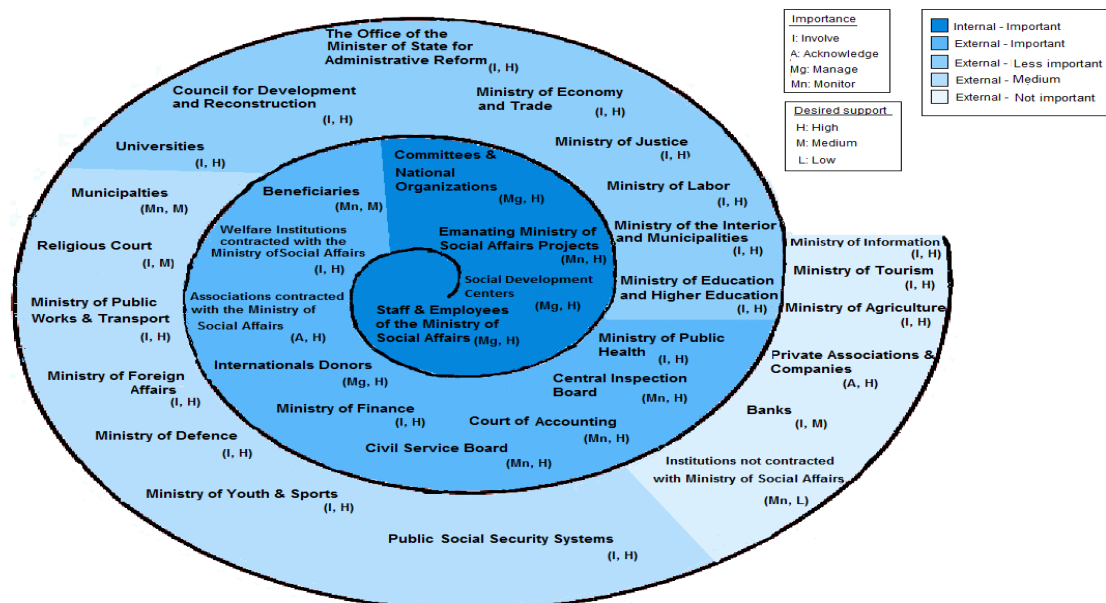


Figure 3 - Stakeholder Map





## Key Stakeholders

### *Ministry of Labour (MoL)*

MoL is a key partner of MoSA, and as indicated in the Historical Background section MoSA was part of the MoL. The current interaction is mainly focused on the employment of people with disability, and the creation of incentives to enable increased employment of people with disability and members belonging to the poorest families, without coordination with MoSA. This ministry, through its National Employment Office, also provides vocational services contracted to external institutions for beneficiaries regardless of age.

### *Ministry of Public Health (MoPH)*

MoPH is another integral partner for MoSA as SDC's are available across the country, and there is a clear overlap in terms of offering medical services to beneficiaries. This overlap is reflected with the division of associations and non-governmental organizations that are offering medical services. Also, as it pertains to nurseries, which remained under the purview of MoPH, after it was placed under the MoPH while it was still the OSD, they remained under the authority of MoPH. With the respect to elderly beneficiaries, the distinction as to under whose care they would fall is mainly ability to care for oneself or inability to do so. The elderly that are unable to care for themselves due to illness or old age fall under the care of the MoPH, whereas elderly able to care for themselves fall under the care of MoSA. The social workers visiting the institution need to verify that no double dipping is occurring.

### *Ministry of Finance (MoF)*

All ministries accounting practices are managed by the decree 14969 issued in December of 1969. Article 54 of the decree states that the four stages of a payment are:

- ❖ Establishing Contract; Verification of Debt; Authorization of Payment; and Payment.

The MoF is an integral partner to MoSA, as MoSA through the MoF manages the Social Affairs fund, and pays the stakeholders implementing work on behalf of MoSA. The frequency and importance of work being so high, requires the presence of MoF personnel to facilitate the establishment of contracts as per the Minister of MoSA's needs.

### *Ministry of Interior and Municipalities (MoIM)*

The Ministry of Interior is another key stakeholder whose contribution is also pivotal to the work of MoSA. Associations and organizations that disburse the bulk of MoSA's budget as shown earlier are established through the MoIM through notification as per the 1909 Association Law. The law has evolved to require MoIM to coordinate with MoSA, where MoSA is entitled to suggest the withdrawal of notification of an association.



### *Ministry of Justice (MoJ)*

The interaction with the MoJ has more than one area. Prior to bringing a juvenile into the care of MoSA, a judge's decision is required. For the judge to issue a decision the social assistant provides a report about the case of the juvenile, and the judge considers the report before issuing a judgment. The other areas are human trafficking, and prisons. As it pertains to prisons, MoSA supports the preservation of the rights of female inmates, their families, their capacity building, and the care of infants born in prisons. There is also a new IMC that focuses on drug addiction, whose meetings occur at MoJ, with MoSA as a contributor in the evaluation of the cases. MoSA also intervenes after the completion of the treatments, when the treatment path is chosen, for the rehabilitation of patients through contracted associations.

### *Ministry of Education and Higher Education*

MEHE is an important partner of MoSA with overlap in responsibilities in terms of education. In terms of formal education, MoSA, through NGO's and specialised institutions offers education, residential care and welfare for youth in terms of boarding schools, as well as funding for vocational education and training through organisations and SDC's. In addition to leveraging NGO's to work on the education, there are also emanating projects that are worked on in collaboration between both parties.

### *Non-Governmental Organisations and Associations*

Non-governmental organisations and associations, estimated at 12,500, play a significant role in the provision of services to beneficiaries and communities. They are further examined in the subsequent sections from the purview of how they interface in terms of MoSA operations.

### *Local Authorities and Communities*

Local authorities and communities are at the frontlines with the beneficiaries within the communities and play an integral role in community-based development programmes. The strategy focuses on closer cooperation and building capacity of the local government bodies for development of community based social services for social inclusion of the beneficiaries into their respective communities.

The following analysis of the social sector below provides a comprehensive overview of the strengths, weaknesses, opportunities and threats (SWOT) of the Lebanese social sector.



## Social Sector SWOT Analysis

Strengths	Weaknesses
<ul style="list-style-type: none"> <li>S1 – Availability of specialized human capital due to available highly qualified educational system</li> <li>S2 – Increased technical know-how and skills transfer as a result of donor funded trainings and development projects</li> <li>S3 – Existence of a significant number of national institutions extending nation-wide coverage to respond to social needs</li> <li>S4 – Strong presence of experienced service providers with long years of continuity in delivering services to people in need. There are around 12,500 non-governmental organizations and associations enabling increased national coverage, some of which preceding MoSA in years of operation.</li> <li>S5 – Existence of prominent and established private local donors, supporting social needs within local communities</li> <li>S6 – Increasing adoption of social corporate responsibility practices in the private sector targeting local social needs</li> <li>S7 – Strong diaspora ties rich in financial and human capital for social intervention and skill transfer</li> <li>S8 – Prominent well established voluntary sector with volunteers regularly engaged in social sector activities</li> <li>S9 – Standing beneficiaries loyalty and trust towards service providers</li> <li>S10 – Experienced and highly diversified social sector actors to respond to various social needs and crises</li> <li>S11 – Existing local authorities know how and experience n co-funding and implementing social infrastructure projects</li> </ul>	<ul style="list-style-type: none"> <li>W1 – Highly politicized and bureaucratized hiring process of employees within line Ministries and national institutions</li> <li>W2 – Limited competitive remuneration of employees in the social sector</li> <li>W3 – Lack of strategic planning practices at both national and local levels</li> <li>W4 – Limited involvement of local authorities in planning and selection of priority services funded by line Ministries</li> <li>W5 – Insufficient measurement mechanisms and evaluation of effectiveness and quality of services provided among different service providers</li> <li>W6 – Continued delays in adoption of national social services minimum standards</li> <li>W7 – Long delays in establishment of National MIG (Minimum Income Guarantee) Scheme and Cash Benefit System</li> <li>W8 – Absence of Disability Fund, as well as Retirement Income and Health Insurance Scheme for all people at risk</li> <li>W9 – Lack of transparency, coordination and exchange of information between national, local and civil society organizations</li> <li>W10 – Highly politicized and competitive posture amongst service providers preventing lasting partnerships and joint cooperation</li> <li>W11 – Weak regulation requirements for accreditation of service providers limiting evidenced based planning and services development</li> <li>W12 – Lack of accountability and financial transparency within public and private organizations</li> <li>W13 – Instances of nepotism as basis of selection of service providers and beneficiaries</li> <li>W14 – Absence of Beneficiary Associations with strong lobbying capacity</li> <li>W15 – Underutilized and fragmented cross sector collaboration limiting opportunities for private sector and educational institutions stronger involvement in social innovation and PPP opportunities</li> <li>W16 – Lack of National Social Investment Fund, channelling various co-investment schemes fuelling pro-active creation of sustainable local social infrastructure and community based services</li> <li>W17 – Existing cross sector overlap in responsibilities of line Ministries, including fragmented jurisdiction over various aspects of social sector areas, divided between state, ethnic and religious organizations, resulting in insufficient coordination and data base sharing and de-confliction, limiting effective responsiveness, planning and management of provision of services</li> <li>W18 – Lack of fiscal decentralization weakening local stakeholder capacity for planning and funding social services</li> <li>W19 – Limited cross sectorial initiatives for employability of poor, marginalised and vulnerable citizens</li> <li>W20 – Unavailability of national demographic statistics due to politically hindered census, denying adequate programming and allocations of financial and human resources</li> <li>W21 – Absence of an inventory of social services existing in Lebanon</li> </ul>
Opportunities	Threats
<ul style="list-style-type: none"> <li>O1 – Utilization of donor technical and financial assistance to incentivize various models of intra and cross sectorial cooperation and partnerships</li> <li>O2 – Continued interest from international development organizations to financially support communities hosting refugees</li> <li>O3 – Donors active development of local and central governance capacity building for planning and delivering of social services</li> <li>O4 – Donor technical assistance in supporting improvement and establishment of national social protection mechanisms</li> <li>O5 – Enhanced utilization of voluntary-based activities in social sector programmes</li> <li>O6 – Promotion of PPP for development of local social community based services</li> <li>O7 – Diaspora centric opportunities to vitalize sector and increase resilience of efforts to support beneficiaries</li> <li>O8 – Effective integration of available expertise from educational, academic and research institutions in various social sector initiatives and programmes</li> <li>O9 – Development of Government schemes for promotion social entrepreneurship, and employment of poor, disadvantaged as well as marginalised citizens</li> <li>O10 – Implementation of Fiscal Decentralization policies</li> <li>O11 – Issuance of policies to incentivize creation of beneficiary associations</li> <li>O12 – Twinning programmes between local and international organizations active in the social sector</li> </ul>	<ul style="list-style-type: none"> <li>T1 – Political and Security threats in some areas of Lebanon denying work of NGOs in providing care at all times</li> <li>T2 – Possible increases in numbers of refugees worsening economic burdens, job acquisition by non-Lebanese, and further degradation of GoL support infrastructure</li> <li>T3 – Protracted geopolitical conflicts and their impact on the ability of the economic recovery of the country</li> <li>T4 – Polarization of constituent and provider bases due to political deadlock and local differences</li> <li>T5 – Current regional strain due to politics impedes economic growth to vital sectors such as tourism by regional tourists visiting, a significant previous contributor to the economy, and the threat of the deportation of Lebanese expatriates in the Gulf, leading to the denial of a serious source of revenues to Lebanese GDP</li> <li>T6 – Shifting and changing in donor priorities based on their political objectives without focus on longevity and continuity of efforts and sustainability</li> <li>T7 – Refusal of repatriation of Syrian refugees post-Syrian conflict</li> <li>T8 – Resistance to deinstitutionalization and decentralization of key stakeholders</li> <li>T9 – Worsening of environmental and health conditions without adoption of long-term nation-wide solutions of waste management</li> <li>T10 – Extended absence of president of the Lebanese Republic, impacting local stability and economic recovery</li> </ul>



## I.4 Ministry of Social Affairs

### Organisational Structure

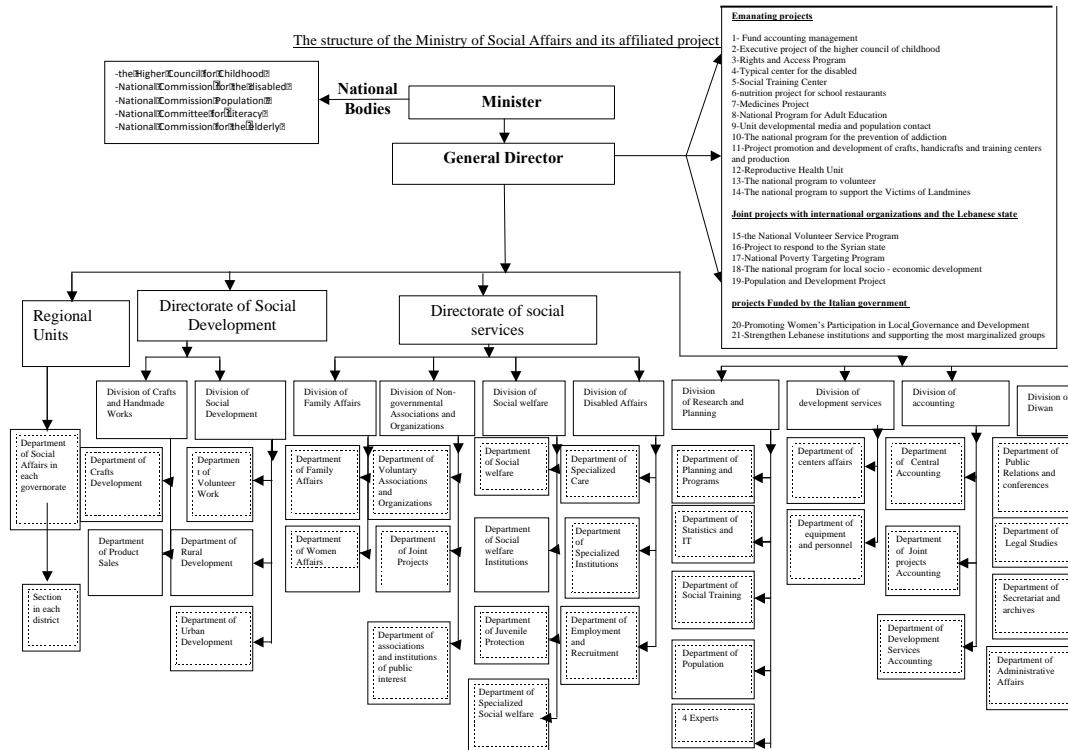


Figure 4 - MoSA Organisational Structure

### Nature of Services

Since its establishment, MoSA funds a wide range of social services targeting poor, disadvantaged and marginalised citizens. These services are not limited to the social assistance nature and they include elements of social care, medical care and/or education. This is due to an overlap in responsibilities, redundancies and lack of effective synergy between the core roles; responsibilities of various programmes and projects ran by MOSA and other Ministries (particularly MoPH and MEHE).

Therefore, to effectively assess the full spectrum of service of MoSA, this situational analysis will not be limited to social assistance but will examine all services funded solely by MOSA for the people in need.

As MoSA has two key mechanisms to interact with its beneficiaries, directly through Social Development Centres (SDC's) at a local level, and through the directorates contracting service providers, the analysis is structured in a beneficiary centric order.

The analysis is examining the organisational, administrative, financial and legal aspects, including the working processes, data management and procedures of the SDC's, directorates and key divisions and departments.

### Social Development Centres (SDC's)

The Department of Centres Affairs, handling all matters related to SDC's, operates under the supervision of the Division of Development Services, falling directly under MoSA's General Director. SDC's are a vital component of MoSA, as they are the critical vehicle through which people in need across the country receive relief and support from the Government. There are over 216 SDC's across all 8 governorates. The types of services offered vary by SDC and include medical, academic, and vocational services. Out of the 216 centres only 80 are equipped with Internet infrastructure, while other SDC's are being encouraged to subscribe to Internet service to improve connectivity between them and the ministry in terms of information flows. In addition, half of the administrative personnel of SDCs are without computers and manually record data in the logbooks.

### Budget Trends

SDC's between 2011 and 2014 have on average received 15% of the ministry's total budget. The SDC Budget witnessed a sharp increase between 2011 and 2012 due to an assessment of the cost of living, and to the influx of Syrian refugees across the country.

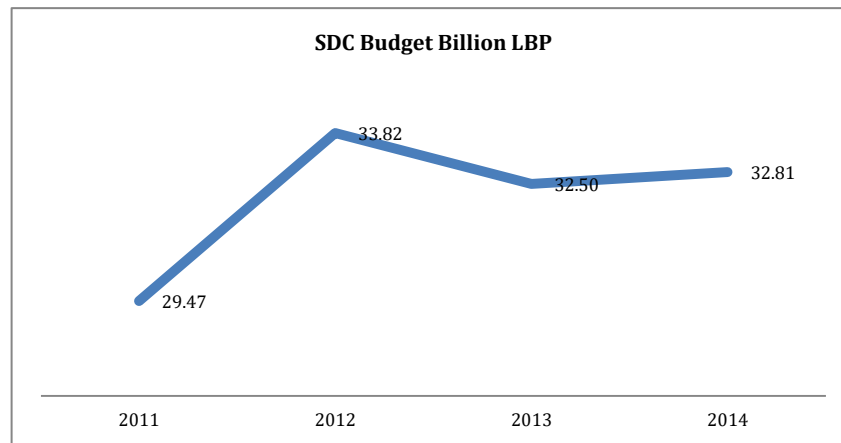
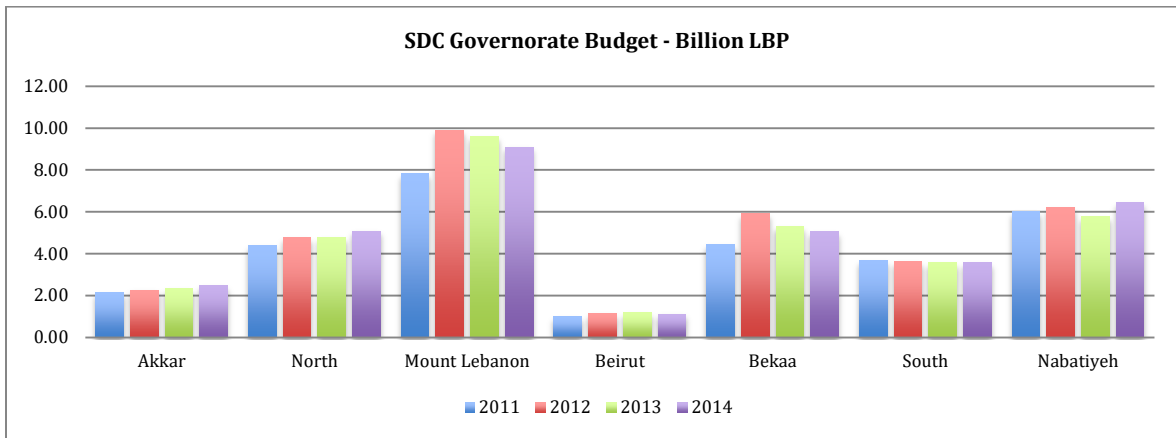


Figure 5 - SDC Budget Billion LBP

SDCs budget allocations for per governorate from 2011 till 2014 are shown below:

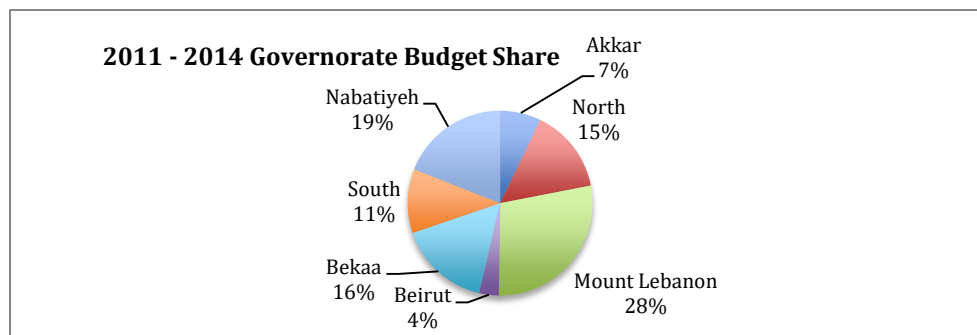


**Figure 6 - Billion LBP per Governorate**

The average SDCs expenditure between 2011 and 2014 across the different governorates was as follows:

Governorate	Average
Akkar	LBP 2,303,250,000.00
North	LBP 4,753,250,000.00
Mount Lebanon	LBP 9,092,250,000.00
Beirut	LBP 1,107,500,000.00
Bekaa	LBP 3,907,500,000.00
South	LBP 3,609,000,000.00
Nabatiyeh	LBP 6,108,500,000.00
Baalbek and Hermel	LBP 1,268,750,000.00
Overall Total	LBP 32,150,000,000.00

The three governorates receiving the highest allocation in terms of budget for services through SDC's are Mount Lebanon followed by Nabatiyeh and Bekaa. The difference in distribution of funds between governorates is explained further in the number of main SDC's and sub SDC's shown in Figure 6 in each of the governorates.



**Figure 7- 2011 -2014 Share of Budget by Governorates**

## Staffing and Personnel

The staff consists mainly of social workers, health professionals, and administrative professionals. The exact breakdown is currently unavailable. They are supposed to have around 2,800 staff members, and they have less than a 1,000. This has been the case since 2005. They are lacking 75% of the needed staff/budget.

## SDC Distribution

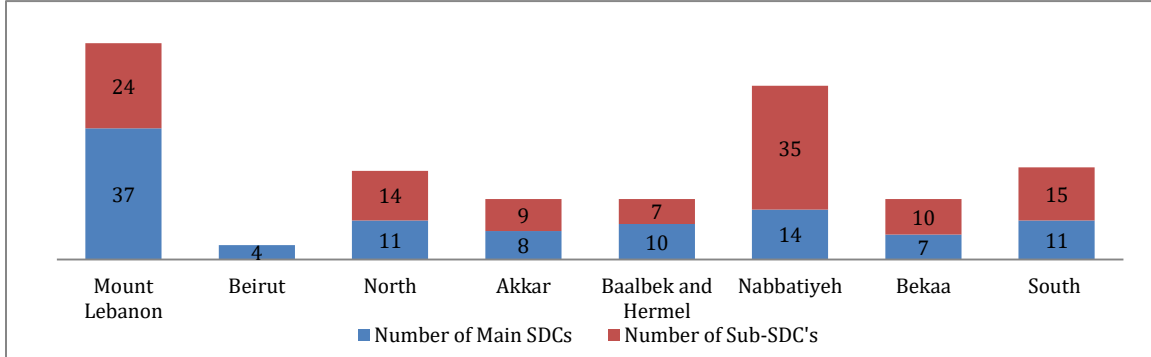


Figure 8 - Distribution of SDC's by Governorates

A detailed geographic distribution of the 216 SDC's is shown in the map below.

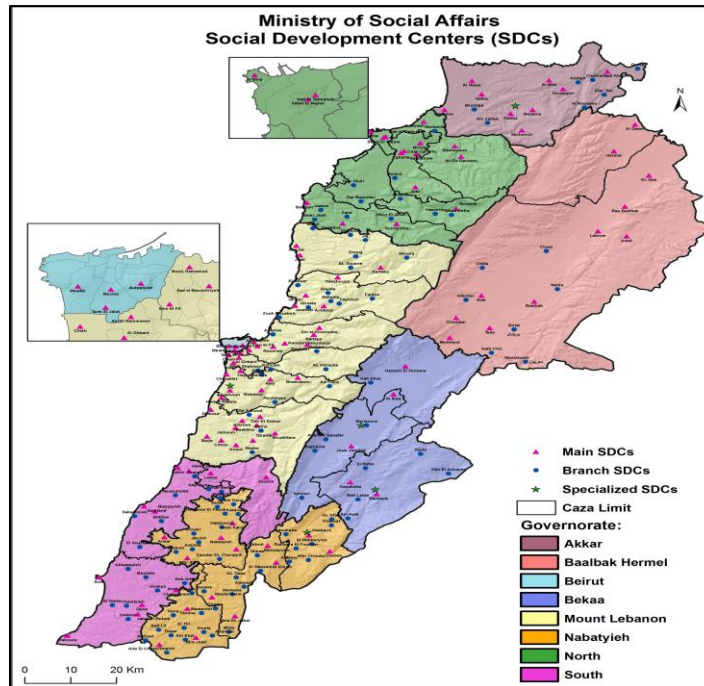


Figure 9 - Social Development Centres Map

## Beneficiaries and Services

The standard fee for the use of most medical services within the SDC stands at 7000 LBP. SDC's play a critical role not just in providing social and health care services, but also in connecting with youth, particularly those above 15 years old, through these needs, and then channelling them to receive vocational skills. This helps improve the youth's basic conditions through skill and capability transfers.

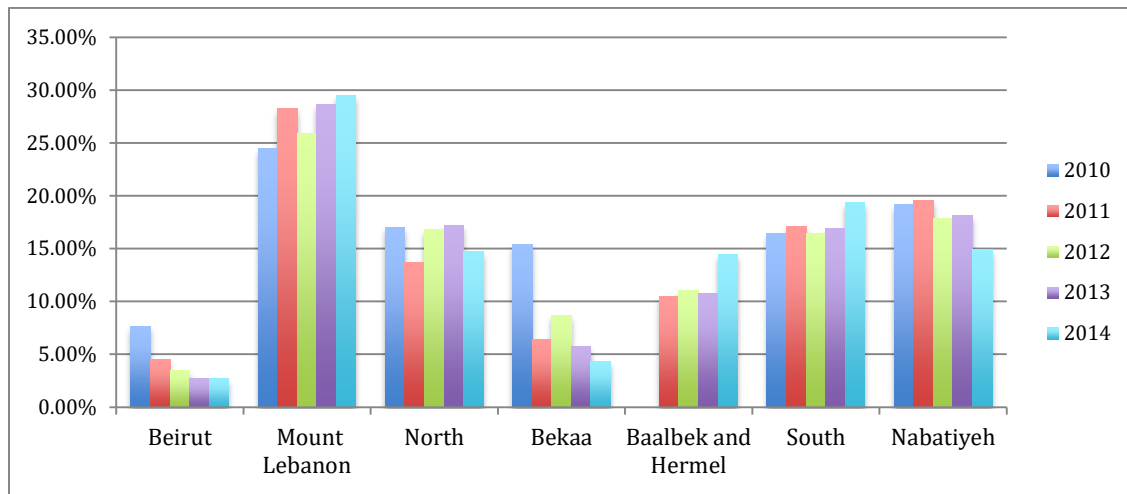


Figure 10 - % of Services Delivered by the SDCs per Governorate during 2010-2014

Population densities in each of the governorates explain the variation in services per governorate, particularly, Mount Lebanon, as the population's density is the largest in this governorate, where about a quarter of the population resides.

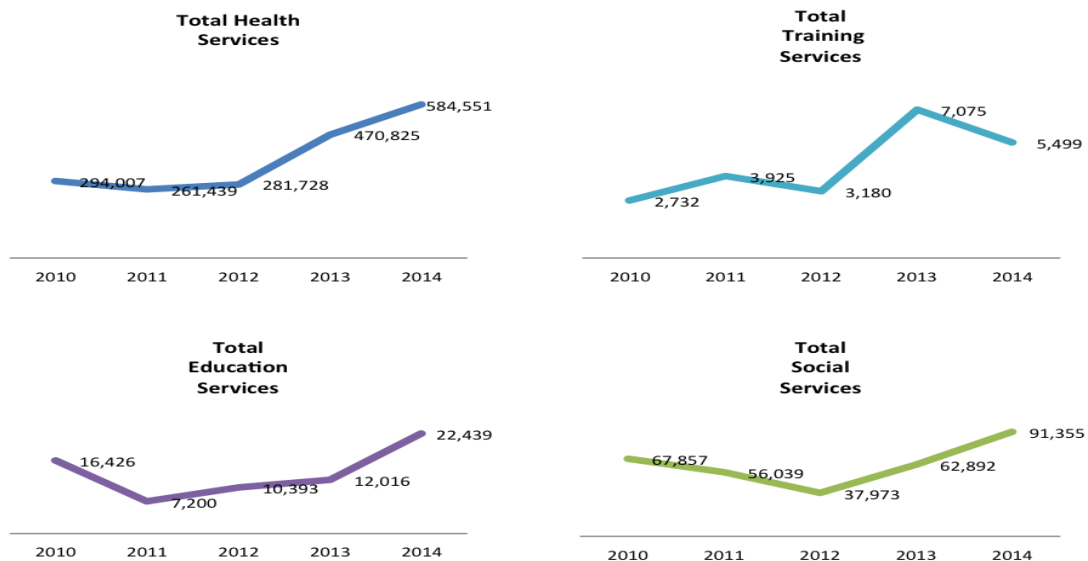


Figure 11 - Total Education, Health, Social and Training Services 2010 - 2014



Comparing the different type of services provided during the years 2010 and 2014, shown in Figure 11, notable is an increase in the orientation of services, particularly health and social services, because with the start of the Syrian crisis many SDCs became the primary social and healthcare services providers to Syrian refugees. The reduction in provision of training and educational services was due to budgetary constraints and limited capacity of the SDCs staff as priority had to be given to respond to a rapidly increasing number of beneficiaries seeking urgent medical and social care. The data from 2014 and 2015 shows that in some SDCs in Beirut and North above 90% of the SDCs beneficiaries were Syrian refugees. The minimum fee payable for service (7,000 LBP) is symbolic and not enough to cover the costs for the working hours of contracted medical and social staff engaged by the SDCs, creating significant burden for MOSA.

### Processes

Beneficiaries are received at the different locations of SDC's, and basic information is collected about them. SDC's also serve as a foothold for social workers residing in the areas in which they are present. Though not maximized to the fullest potential, social workers from time to time visit the facilities of the institutions and organisations (providers of residential and non-residential services) contracted by MOSA to inspect the compliance with respect to the numbers of beneficiaries and quality of services specified within the contracts with MoSA are met.

### Data Management, Monitoring, Evaluation and Reporting

The data across SDC's are recorded manually on logbooks. Monitoring is irregular and the files and information sharing between SDCs and MoSA takes place through transporting hard copies of SDCs monthly reports to relevant MOSA departments, mainly for processing payments. Data collection and tracking per service area does not occur per beneficiary, but by service offered, so within MOSA there is no information about exact number of individual beneficiaries served by the SDCs. The actual impact per SDC by respective area is currently difficult to gauge beyond the number of services, which without the actual number of beneficiaries renders effectiveness not measurable. The Ministry is currently in discussions with the UN to assist in effectively connecting the ministry and SDC's technologically to improve overall monitoring capabilities.

### Directorate of Social Services

The Directorate of Social Services is the directorate with the largest budgetary allocation of MoSA. The composition is illustrated in the diagram below. The directorate is currently staffed at 34%: where Decree 5734 allocated 100 people, and there are currently only 34 occupied positions.

As per Figure 12, the directorate is comprised of four departments and they are:

The Division of Family Affairs consists of two departments. These two departments are: the Department of Family Affairs and the Department of Women's Affairs.



The division is currently staffed at **18%**: where by the Decree 5734 the division is supposed to have **17** occupied positions, but it currently has only **3** occupied positions.

The Division of Non-Governmental Associations and Organisations consists of three departments. The three departments are: Department of Voluntary Associations and Organizations, Department of Joint Projects, and the Department of Associations and Institutions of Public Interest. The division is currently staffed at **30%**: where by the Decree 5734, the division must have **23** occupied positions, but it currently has **7** occupied positions.

The Division of Social Welfare consists of four departments. These four departments are: Social Welfare Department, Social Welfare Institutions Department, Juvenile Protection Department, and the Specialized Social Welfare Department. The division is currently staffed at **46%**, where by the Decree 5734: the division must have **37** occupied positions, but it currently has **17** occupied positions.

The Division of Disabled Affairs consists of three departments. The three departments are: Department for Specialised Welfare, Department for Specialised Institutions, and the Department for Work and Employment. The division is currently staffed at **30%**: where by the Decree 5734, the division must have **23** occupied positions, but it currently has **7** occupied positions.

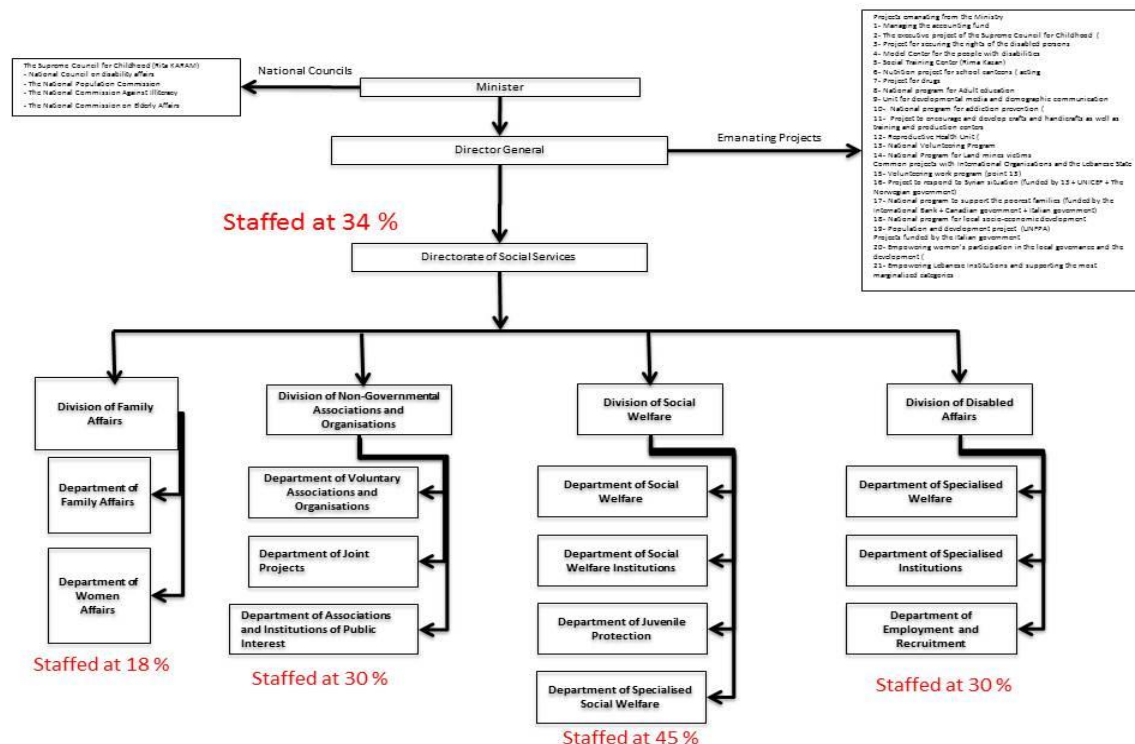


Figure 12 - Directorate of Social Services

Due to the scale of budgetary allocation of divisions within the directorate, further evidence-based analysis is presented below.

## Division of Social Welfare

The Division of Social Welfare is one of the vital Divisions of MoSA. It alone expends, between 2011 and 2015, an average of 38.6% of MoSA's overall budget. The division is responsible for welfare services for infants, children, young people, adults and the elderly.

### Key Trends

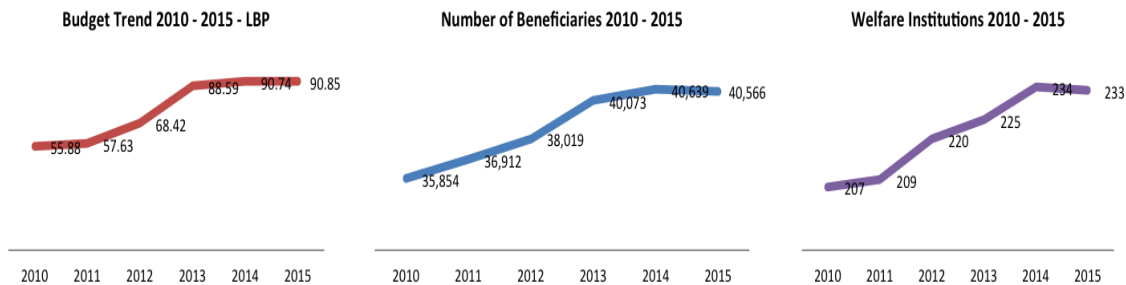


Figure 13 - Key Trends 2010 - 2015

From 2010 till 2014, the budget of the division has witnessed a sharp increase, due to the rising demand of people in need of care, swelling from 35,854 in 2010 up to 40,639 in 2014. This has led to contracting additional organizations to meet that demand, starting at 207 in 2010 going up to 234 contracted organizations in 2014. The first significant rise in budget was in 2012 due to new daily fee rates, per the 2011 study, increasing allocation on some categories of services, and overall expenditures rising by 18.32 % in comparison with 2010. The daily fee rates were again amended in 2013 by an additional 23.71% and the overall expenditures amounted 88.59 Billion LBP in 2013 and 90.74 Billion LBP in 2014 respectively. In 2015 there was a slight drop in the number of beneficiaries by 0.18%, however the budget still showed an increase of 0.12% compared with 2014. This is because the distribution between beneficiaries shifted to fewer beneficiaries between 4-18 and more beneficiaries in terms of infants and elderly, whose per diem rates are higher due to the 2013 increase.

The budgetary allocation for this division, uniquely, is split into three allocations. The three allocations are grouped as follows: the first allocation combines the Department of Social Welfare and the Department of Social Welfare Institutions, the second allocation is for the Department of Juveniles Protection, and the third allocation is for the Department of Specialised Social Welfare. The average share of the division's overall budget, between 2010 and 2015 was as follows:

- Department of Social Welfare and the Department of Social Welfare Institutions received 92.24% of the division's budget
- Department of Juveniles Protection received 3.31 % of the division's budget
- Department of Specialised Social Welfare received 4.45 % of the division's budget

## Beneficiaries and Services

### Departments of Social Welfare and Social Welfare Institutions

Beneficiaries are mainly clustered as, infants ages 0-4, children and youth ages 4 – 18, and elderly ages above 40. The distribution across the governorates, between the year 2010 and 2015 is as depicted in Figures 14 and 15.

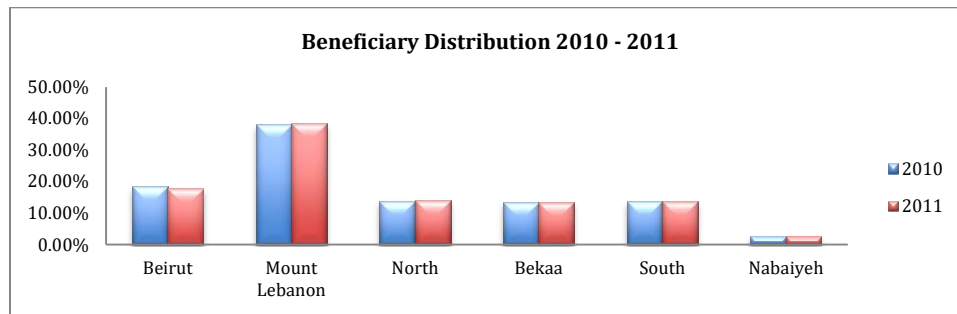


Figure 14- Beneficiary Distribution per Governorate 2010 - 2011

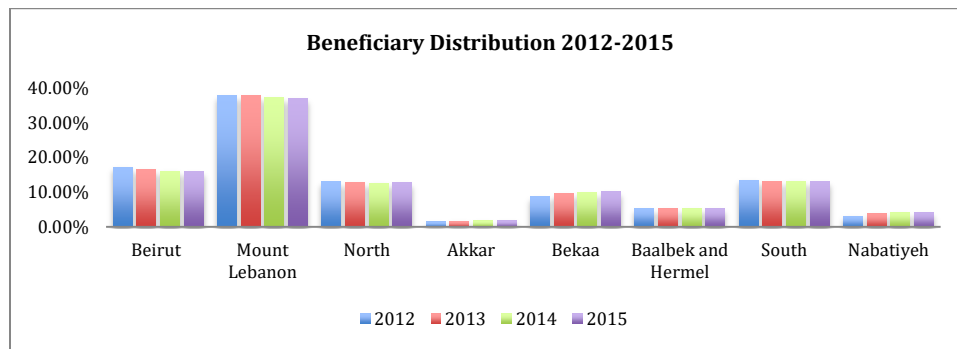


Figure 15 - Beneficiary Distribution per Governorate 2012 - 2015

By analysing figures 14 and 15, it is evident that Mount Lebanon has the largest number of beneficiaries in need of care, and that is due to the density of the population and the number of NGO's in the governorate. The Governorate of Beirut and the Governorate of the South follow Mount Lebanon in governorates receiving care.

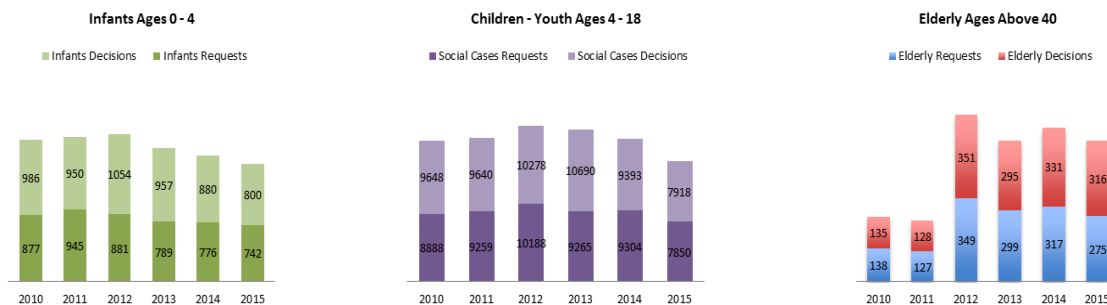
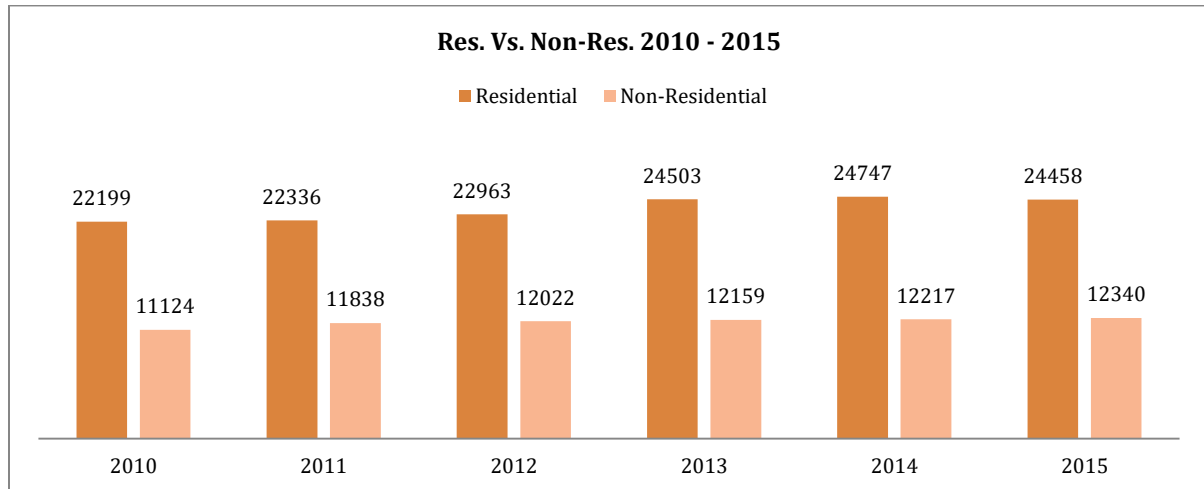


Figure 16 - Overview of Requests and Decisions by Beneficiary Group 2010 - 2015

By observing the varying numbers and a higher number in decisions than requests in the displayed charts are namely due to the following two reasons:

A request can be submitted in the year prior to the release of the decision, and there are no available slots in the requested organization until the following year.

Transferring beneficiary from one institution to another requires a new decision. It is evident from Figure 16 that the highest numbers of recipients of care are the social care requests for children and youth between 4 and 18 years old.



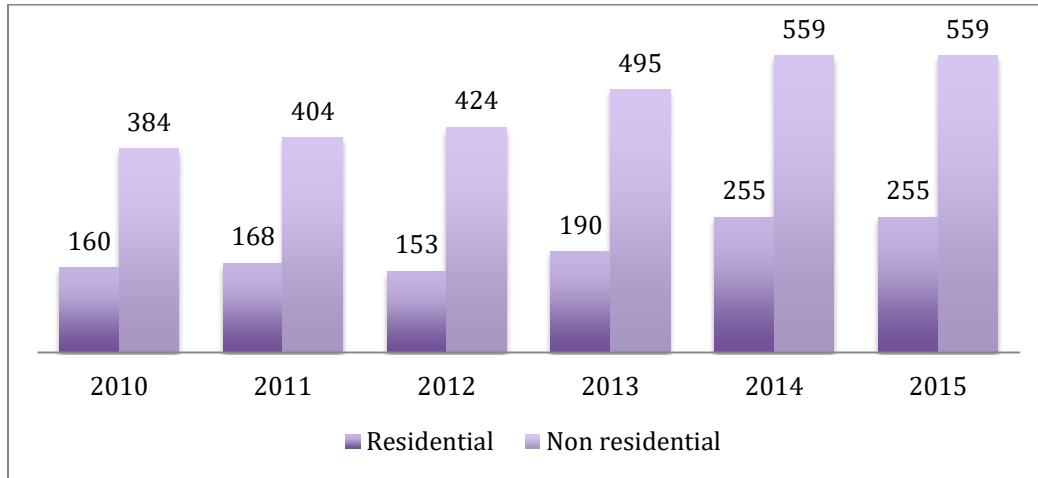
**Figure 17 - Residential Vs. Non - Residential Care 2010 - 2015**

Between 2010 and 2015, there is an increase in both residential and non-residential care, while the residential care continues to remain the dominant form of social care, because the majority of beneficiaries are children and youth in Residential institutions obtaining education, vocational education and vocational training.

### Department of Juvenile Protection

This department provides support for juveniles from families at risk, or in conflict with the law. Care funded by MoSA is both residential and non-residential, through specialized NGO's that provide services for reintegration of juveniles, through social integration programmes, psychological rehabilitation, as well as medical and educational services.

Beneficiaries are mostly from poor families, dysfunctional families, and women at risk. The demand for support shows a recorded increase of 33.17% of beneficiaries between 2010 and 2015, stretching the department's budget denying it the ability to respond to a significantly higher undocumented demand. Furthermore, due to the nature of the care, documentation is scarce, only enabling knowledge of the distribution of residential and non-residential care for supported cases between the years 2010 and 2015.



**Figure 18 - Residential Vs. Non - Residential Care 2010 - 2015**

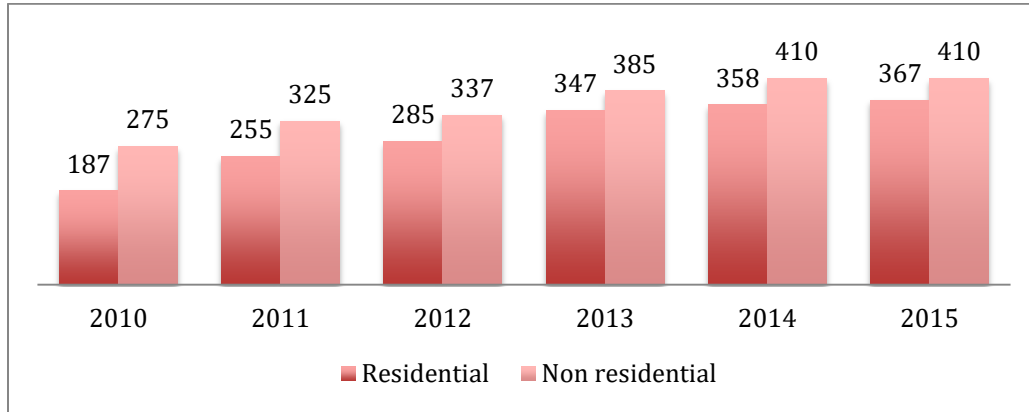
Observing Figure 18, it is evident that the number of beneficiaries receiving care from this department has grown steadily, from 544 in 2010 to holding constant at 814 in 2014 and 2015. There was an increase in terms of both residential and non-residential care, while non-residential care received a higher allocation of the funds due to insufficient capacity in existing specialized NGOs offering residential care.

### Department of Specialised Social Welfare

This department mainly provides support for special cases for infants and children, people with addiction problems, women at risk with their children, people with AIDS, and the homeless. Care funded by MoSA varied between residential and non-residential depending on the beneficiary group, through specialized NGO's.

The services are as follows: for children and young people with addiction problems are residential and non-residential, mainly consisting of integrated social, medical care and psychological care for rehabilitation of people who are addicted to drugs or alcohol; for women at risk are residential and non-residential, predominantly comprised of awareness sessions, specialized training and rehabilitation programmes, for women in conflict with the law and single mothers as well as their children; for people with AIDS are non-residential medical, psychological, and social care; and for homeless people are residential social and medical care.

Between 2010 and 2015, this department has a recorded increase of 40.54% of beneficiaries, stretching the department's budget denying it the ability to respond to a significantly higher undocumented demand. Furthermore, due to the nature of the care, documentation is scarce, only enabling knowledge of the distribution of residential and non-residential care for supported cases between the years 2010 and 2015.

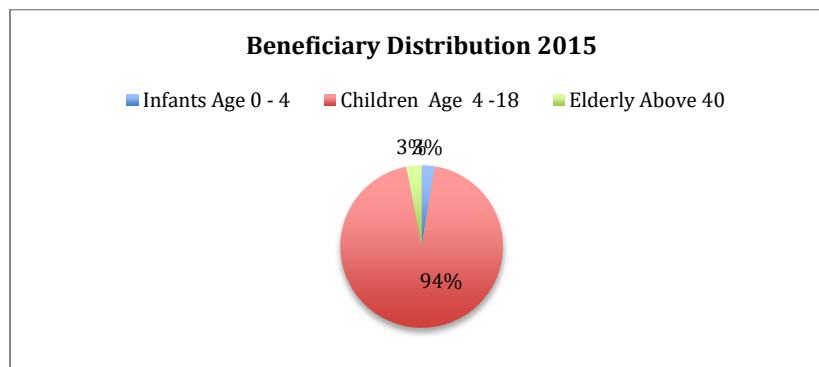


**Figure 19 - Residential Vs. Non-Residential Care 2010 - 2015**

Observing Figure 19, it is evident that the number of beneficiaries receiving care from this department has grown steadily, from 462 in 2010 to 777 in 2015, with a balanced increase in terms of both residential and non-residential care until 2014. In 2015, residential care showed a small increase while non-residential care remained the same because of budgetary restrictions and prioritisation of beneficiaries.

#### **Departments of Social Welfare and Social Welfare Institutions In Focus -2015**

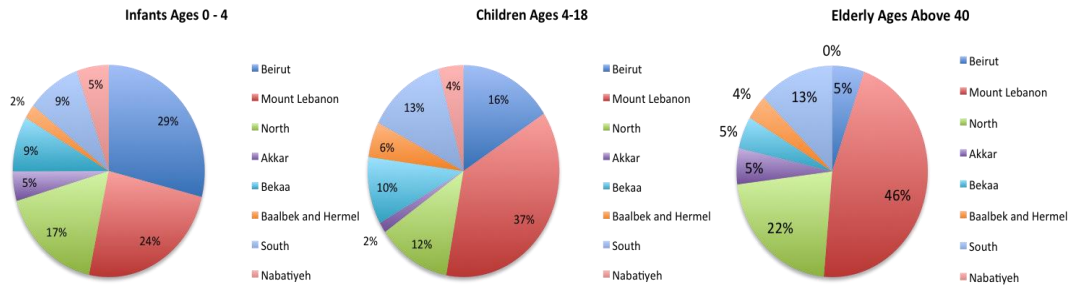
Due to the significant size in terms of budgetary appropriation, of the budgetary allocation of the Departments for Social Welfare and Social Welfare Institutions, as previously mentioned, they have supported a sizeable number of beneficiaries. For example, in 2015, these departments supported 38,975 beneficiaries through contracts with 202 NGOs and Welfare Institutions, with a total amount of around 85 billion LBP. Around 36.96% beneficiaries were placed in 86 institutions in the Governorate of Mount Lebanon.



**Figure 20 - Beneficiary Distribution 2015**

Figure 20 clearly shows that Children and Youth, between the ages of 4 and 18 constituted 94% of beneficiaries, while the elderly above 40 and infants below four both constituted 3% each. The number of children and youth ages 4-18 in institutions stands at the high number of 19,275 steadily increased since 2010. This was due to a number of problems in the communities ranging from: poor families, domestic violence, general quality of education in public schools, sometime non-existent public schools in area where the family lives.

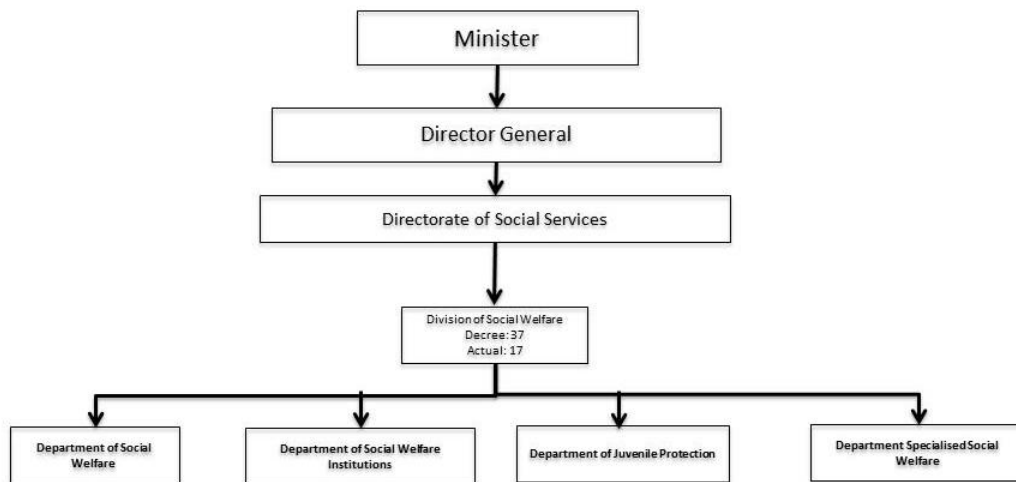
Furthermore, during those years, the emerging Syrian crisis, and large influx of migrants, led to lots of public schools in became overloaded causing Lebanese families to seek alternative education for their children within Institutions.



**Figure 21 - Distribution of Beneficiary Segments per Governorate 2015**

By examining Figure 21, the number of infant beneficiaries in Beirut exceeds the number of infant beneficiaries in Mount Lebanon because the majority of specialised institutions are located in Beirut, The other beneficiary groups remain consistent with the trends from 2010 – 2014 where Mount Lebanon had the highest number of beneficiaries because it has the largest number of institutions.

### Structure and Personnel



**Figure 22 - Division of Social Welfare**

As indicated above, the Division of Social Welfare is staffed at **46%** and consists of four departments. These four departments are: Department for Social Welfare, Department for Social Welfare Institutions, Department for Juvenile Protection, and the Department for Specialised Social Welfare. It is composed of 18 permanent employees (17 civil servants and one assistant), three employees from the SDCs (who under Minister internal decision are placed within this division), and three contracted staff (one clerk and two database editors).



The Department for Social Welfare is currently staffed at **38%**: where by the Decree 5734 the department is supposed to have **13** occupied positions, but it currently has **5** occupied positions.

The Department for Social Welfare Institutions is currently staffed at **56%**: where by the Decree 5734 the department is supposed to have **9** occupied positions, but it currently has **5** occupied positions.

The Department for Juvenile Protection is currently staffed at **67 %**: where by the Decree 5734 the department is supposed to have **6** occupied positions, but it currently has **4** occupied positions.

The Department for Specialised Social Welfare is currently staffed at **33%**: where by the Decree 5734 the department is supposed to have **9** occupied positions, but it currently has **3** occupied positions.

### *Processes*

As all contracts are at the level of minister, all renewed contracts have to receive his approval. In addition to the approval of the contracts, the minister regulates the age of the children in social welfare institutions and for social care applications for both children and the elderly. In addition to the contract, and ages, the minister allocates the social workers that will monitor the performance of the organisations for each year.

For children and the elderly the process is similar. Families have to file request through the respective SDC's in closest proximity to them, and the social workers process the request to the appropriate personnel in the respective MOSA's department for approval of the file. After this, the file is raised to the head of the department for study and approval. After the head of the department has signed off, there are three signatures that are required, and they are the Head of the Division, the Director of Social Services, and the Director General. After this, the institution has to the choice to accept the applicant or not. If the institution accepts, then the child, below 18, is accepted. If not, the parents have the choice to reapply to another organization, hold off till there is availability at the desired institution, or cancel their application. Acceptance of youth is limited to Lebanese citizens or those whose mothers are Lebanese. Elderly acceptance is limited to Lebanese citizens only. For Juveniles and youth, the application process is different, as some cases are placed by Juvenile Court Judges, requested by third parties, or families apply directly with the Juvenile Protection Department. For specialized welfare cases, there is no formalized application process and the system is reactive to immerging needs, on case-by-case bases. These cases are usually brought to MoSA attention from SCDs, from NGOs or by families, and often by beneficiaries themselves asking for assistance and support directly from MoSA.

Since the departments handling the organisations and the beneficiaries are different, this means that different departments handle and store the data. The different departments had a lot of the data managed in databases but these databases have not been active since 2013 because of limitation in memory size, incompatibility of the operating system with the previously software used which led the teams to revert to paper work and logbooks.



The MoSA divisions hold the following data and information about institutions:

- ❖ Contract, legal status of the institution and its establishment, information about signatories, and the confirmation of annual renewal deposits (set at 1 Million LBP), and confirmations from the Social Security through the MoL about the contributions paid by the state. It is worthwhile to note that the MoIM and Heads of Religious Parties established most institutions.
- ❖ Tabulated information about contracted institutions, including the number of institutions, their addresses, contact persons and the number of beneficiaries.
- ❖ Reports from social workers about the institutions.

Information on beneficiaries at social welfare institutions includes their health certificate, family ID, the welfare application and the social study on the family.

### *Monitoring and Evaluation*

Around 50 Social Workers are engaged in visiting, monitoring and inspecting the institutions, but the mandates for inspection and monitoring have not been formally regulated. The visits per institution are done regularly, at least every 3 months for institutions for children and once per month for institutions for elderly. The practice of rotations is established to avoid that the same Social Worker undertakes visits to the same institution every time, in order to ensure impartiality, avoidance of development of relations and to ensure diversity of perspectives from the different social workers.

The problems are usually resolved at the level of the social worker, with the ability to refer them to the Head of the Division that has the authority to cease payments until the problem is resolved. If the problem persists, the intervention of the minister is required to resolve the problem at the contractual level.

The monitoring shall be more regular, with improved periodical monitoring criteria, where the monitoring team is comprised of social workers. There also needs to be a separate inspection team that is comprised of social workers, division and department heads, as well as other members of the departments, and be conducted in random fashion.

### *Division of Disabled Affairs*

The Division of Disabled Affairs is another of the vital divisions of MoSA. It alone expends, between 2010 and 2015, an average of 29.6% of MoSA's overall budget.

The division is responsible for providing services, such as education, vocational training, vocational education, as well as welfare and rehabilitation to people with disabilities and children with learning difficulties through contracted institutions.

## Key Trends

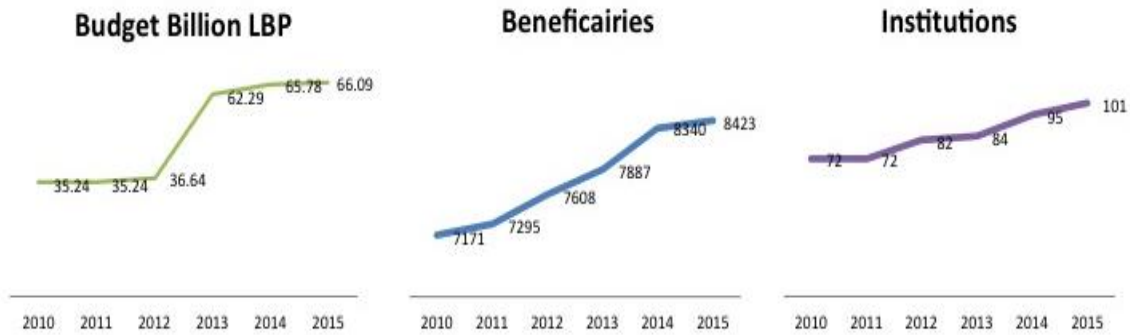


Figure 23 - Key Trends in DDA 2010 - 2015

The shifts in budgets between 2010 and 2015 show an increase in beneficiaries, institutions and budgets. The sharpest increase in terms of budget occurred between 2012 and 2013, where the budget increased by 1.7 times jumping from 36.64 Billion LBP to 62.29 LBP. There were three main reasons for the sharp increase in 2013. The first reason is the adjustment of daily rates due to the increase in costs; the second is the modernisation of categories, such as autism, and different levels of mental disabilities that warrant higher costs from previous categories enabling more beneficiaries to become enrolled in the programmes, and the third reason being an increase in 275 beneficiaries. With the exception for the 2012– 2013 time interval, the increases were incremental due to a linear increase in beneficiaries and institutions.

## Beneficiaries and Services

As per Figure 23, there was a 17% increase in beneficiaries between 2010 and 2015, where in 2010 there were 7171 beneficiaries and 8423 beneficiaries in 2015.

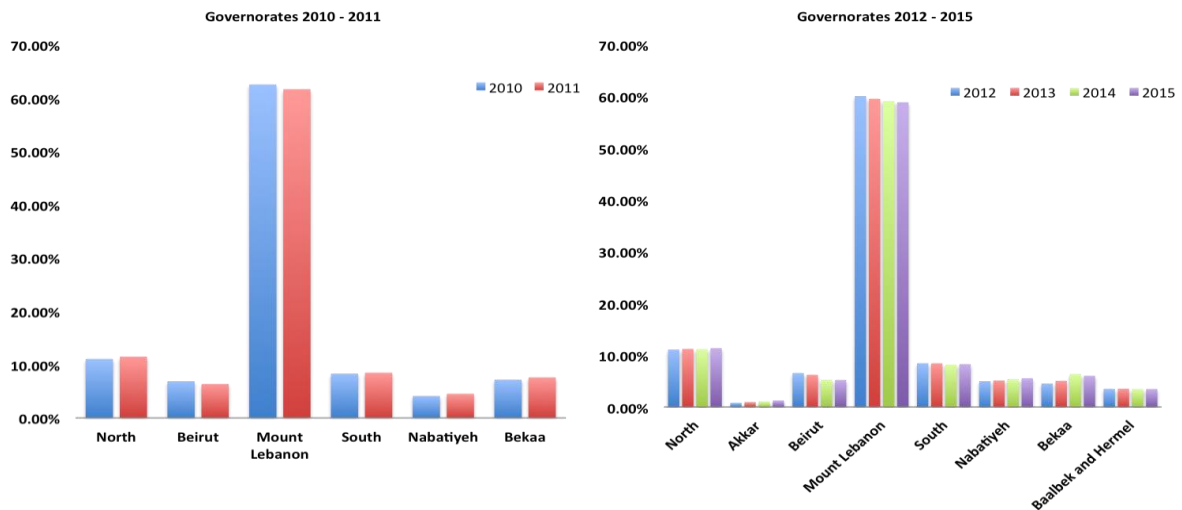
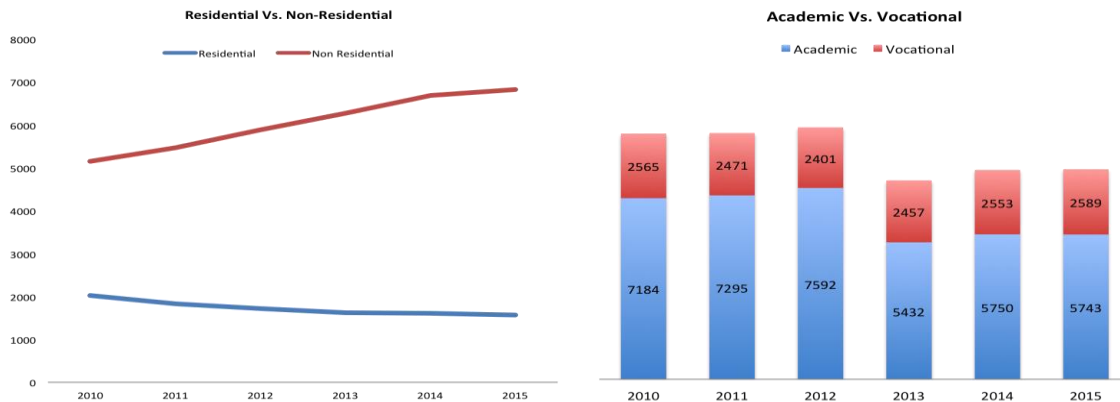


Figure 24 - Distribution of Funds by Governorates 2010 - 2015

The distribution of beneficiaries by governorate, presented in Figure 24, shows that Mount Lebanon, due to the density of population and institutions, has received around 60% of the funds, followed by the Governorates of the North, and South around 10% on average.

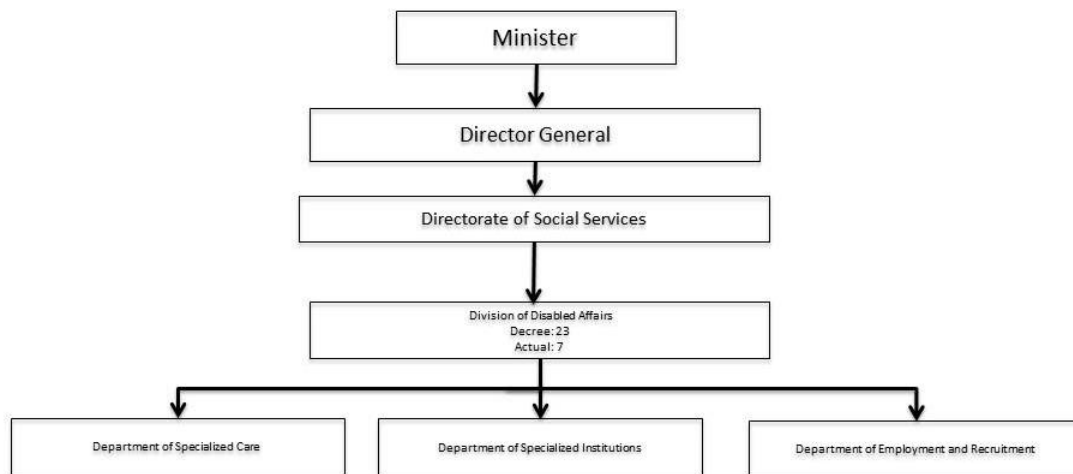


**Figure 25 - Residential Vs. Non Residential and Academic Vs. Vocational Trends 2010 - 2015**

Figure 25 shows that unlike the division of social welfare, between 2010 and 2015, residential care decreased, with non-residential care sharply increasing due to stricter restrictions for residential care. It is worthy of note that residential care is not permanent residence, but involves a weekly or bi-weekly return home as well as official holidays and summer breaks.

As for academic and vocational distribution, there was a drop in academic support with a slight fluctuation with slight increases between 2012 up till 2015 after a drop between 2010 and 2011. This is due to the separation of academic and vocational in 2013 leading to better inclusion of people in need of mental care as well as the sustainability of that care.

### Structure and Personnel



**Figure 26- Division of Disabled Affairs**



The Division of Disabled Affairs is staffed at **30%** and consists of three departments as per Figure 24 and they are the Department of Specialised Care, the Department of Specialised Institutions, and the Department of Employment and Recruitment. The Department of Specialised Care handles receipt of care applications, their assessment and approval. The Department of Specialised Institutions mainly handles preparation and evaluation of annual contracts. The Department of Employment and Recruitment mainly handles applications for employment of people with disability. The total number of staff of the division is seven people composed by the Head of the Division and 3 Heads of Departments. The Head of Department for Specialised Welfare is permanent since 1999 while the Head of Department for Specialised Institutions and the Head of Department for Employment and Recruitment are Social Workers filling these positions. Other members of the Division are 2 Social Workers and 1 editor within the Department for Specialised Welfare. The temporary heads of departments are staff members within these departments.

According to the Decree 5734, the division is supposed to have 23 occupied positions, but it currently has 7 occupied positions. To fulfil some of the gaps there are also 54 social workers that are employed within other structures of MOSA and in addition to their prime functions they are also controlling the work of the Institutions having contracts with MOSA for services they provide to people with disability. However, it should be noted that most of the workload regarding dealings with individual and families' requests for services (arising from urgent need for care, or from abuse, domestic violence, negligence, etc. for people with disability (from all categories), falls on the 7 staff of the division and mostly to two Social Workers of the Department for Specialised Care.

### *Processes*

Information about welfare applications, whether they are for social, academic or vocational services, can be received through SDCs, institutions, schools, or directly at the Division of Disabled Affairs, depending on geographic proximity to the beneficiaries or their guardians.

Welfare applications can only be obtained and submitted, directly by the beneficiary or their guardians, at the Rights and Access Cards Issuing Centres. There are eight centres located as follows in different governorates: one in Beirut, two in Mount Lebanon, one in the North, one in Akkar, and one in the South. These centres hold the records of all beneficiaries who are issued handicap cards once they are determined to be eligible. The files and information stored at the Rights and Access Centres are not available to the division's staff. When staff within the division, require information held at the centres, they need to ask personnel at the centres for that information, and vice versa. This is problematic, as it leads to a situation in which teams working on the same issues are dealing with different bits of information and respond to different levels of oversight in the ministry which further impedes efficiency and information sharing. The absence of automated and synchronised access to data and information flow, leads to duplication of effort, whereas sharing information, and access to forms and files at the different stages of the process would benefit all parties involved.

Welfare applications and their accompanying documents, mainly contain the type of disability, age, educational background, and behavioural problems. Once they are signed by





the organisation, that is willing to accept the beneficiary and has available space, the applications are submitted to the Specialised Care Department where they are examined and when necessary, additional information is requested and processed. When additional information is needed, the social worker from MoSA requests information from respective organisation that has signed the welfare application, and if further necessary, an interview is scheduled with the beneficiary or their guardians for collection of additional information needed for analysis of the problem and evaluation of the needs. When the welfare application is approved by the Department of Specialised Care, then it is submitted for signature by the Head of the Division and the Director General for final approval. The application is then registered with Number of Decision, issued either in MoSA HQ, or in Rights and Access Cards Issuing Centres. The approved application with Decision number is a guarantee for the organisation that MoSA accepts the payments for that beneficiary, and payments are calculated from the date when the beneficiary becomes recipient of care in the Institution.

The welfare application requests are always higher in number than the decisions (approvals). For example, in 2015 there were 1800 requests, and only 1300 approvals. The difference is due to several reasons such as lack of appropriate service, unmet conditions, lack of acclimatization in the association, or no vacancies at desired organisation. There are mainly three types of requests, first type, is a request for care, the second is the request for transfer to another institution, and the third is a request for transfer as it pertains to the service within the same institution.

At this point in time, individual file and care plan are not mandatory. Reports are not obligatory and not always prepared, only basic information is recorded. Reports become obligatory only when written requests or complaints are raised. When reports are prepared, they must include suggestions and recommendation for appropriate assistance and services to be provided, as well as the allocation of numbers and addition of signatures.

As there are limitations in the range of available services and given the absence of formal communication and communication protocols between ministries and institutions, personal contacts are leveraged to place beneficiaries in schools or institutions. When it comes to children with disability and learning difficulties, the families usually insist that the child is placed in an institution and they pro-actively participate in the selection of appropriate institution. The regular public schools rarely accept children with disability or limited disability to take part in their regular school programme, while the private schools are rare and expensive so many families can't afford the rates. When it comes to juveniles, adults and elderly with mainly mental and psychological disabilities with diseases or disorders, MoSA usually directs these beneficiaries to the Ministry of Public Health, mainly because their needs for medical care are primary. MoSA tries to direct care to MoPH in Psychiatric Hospitals for mental and psychological disorders that can provide medical care, but results are not always satisfying as some of them return to streets. Treatment is either a fixed length, two weeks for example, or permanently. The decision is made by MoPH, however there are adults and elderly with disability who are in institutions funded by MoSA since early age and in absence of family, relatives or any other community based services they remain to live in the Institutions. This number is very small and MoSA has only one contract since 2013 for Permanent care for 37 beneficiaries (adults and elderly with disability) and it





is confined to beneficiaries with very severe disabilities that do not have the intellectual and motor skills for integration into the academic section and the vocational training. There is a problem providing care for people aged over 35 years. Between 69 and 70% of the beneficiaries from 2010 to 2015 were under the age of 18 years, less than 9% were above 35 years old. At the moment Lebanon does not have operating Day Care Centres and Clubs for adults and elderly with disability that are funded by MoSA, neither services of home care assistance, meals on wheels, etc. The only possible care to these people can be given in Residential or Non-residential contracted institutions.

The division's limited personnel working on people with disability are frequently pulled in to coordinate and mediate on issues between beneficiaries and some institutions thus impacting the effectiveness of their work. The main reasons for these repeated problems are the absence of standards, accreditation system, and a limited monitoring ability of MoSA to evaluate the efficiency and effectiveness of these institutions and the quality of implementation of the individual plans by these institutions. The limited monitoring ability is due small number of social workers (54 in 2015), who don't have written authorities, lack specialised training, while covering a significant number of institutions and beneficiaries (8423 in 2015). The division does not keep records of all incidents except for those that require the Minister's intervention limiting their number. It is worthy of note that not all institutions area causing problems and there is a large number of cooperative institutions with whom the division staff have built good relationships and keep open lines of communication in order to ensure good services to beneficiaries.

Furthermore, in order to improve the performance and quality of care and services in the residential institutions, MoSA organised training for institutional staff and social workers in 2002 and 2003, on how to create various programmes and activities to improve the quality of life and time of the beneficiaries living in the institutions. This programme resulted in good practices and enabled institutions to proactively organise and deliver a variety of new activities. Unfortunately, no subsequent trainings were delivered and no assessments or evaluations had been conducted on whether these services are still existent and what is their impact on improved quality of life of the beneficiaries. Social Assistants have also undergone training sessions but most of the trainings were administrative not technical.

### *Monitoring and Evaluation*

Prior to 2010, in absence of legal requirements, monitoring and evaluation has been very limited, and for some institutions almost non-existent. After 2010, with the appointment of a large number of social workers to the staff of the ministry monitoring became more regular and effective. In 2011 new teams were appointed to monitor institutions according to decision prescribing criteria and specified functions for the number of visits (no less than two visits quarterly for non-residential institutions, and at least one visit quarterly for residential institutions). Non-residential visits by the social workers were mainly compliant with the issued decision for monitoring (during day time) whereas the residential visits, instead of occurring at night (as prescribed by the decision for monitoring), occurred mostly in the afternoons. The Ministerial internal Decisions 547/2014 and 908/2015 regulated the distribution of number of social workers monitoring institutions and increased the number of supervisors at the centres. However, due to shortage in staff and



large distances between facilities and institutions, this is not occurring at the frequencies required by these decisions. The contribution of the SDC's social workers is critical for the monitoring of institutions, but more elaborate criteria for visits are necessary. Evaluation is still non-existent.

Reports and evaluations are sent quarterly and annually to their respective departments. The division randomly chooses a sample from the parents to follow up with them on the phone, or during their visits to the ministry, during which their opinions are solicited on the services received as well as services effectiveness. Complaints are mainly directed to the division's departments that have measures to escalate, depending on the needs of the case, and in the event of a complaint that the division's department is unable to resolve, reports are raised, with recommendations to the appropriate authorities.

With these changes and decisions, the quality of monitoring did change, but not to the requisite level due to the absence of monitoring standards, general requirements, and the small numbers of the teams and the increases in numbers of institutions year after year. Furthermore, through other different means and efforts, institutions have been compelled to conduct their own monitoring.

### Division of Non-governmental Associations and Organisations

The Division of Non-governmental Associations and Organisations is another important division of MoSA. It is mainly responsible on matters related to nongovernmental associations and organisations, such as, the examination of their requests, to setting the principles and standards, preparation of social records, and impact regulation of these voluntary associations and organisations. In 2014 and 2015, its annual budget represented around 4.5% of MoSA overall budget.

#### Budget Trends

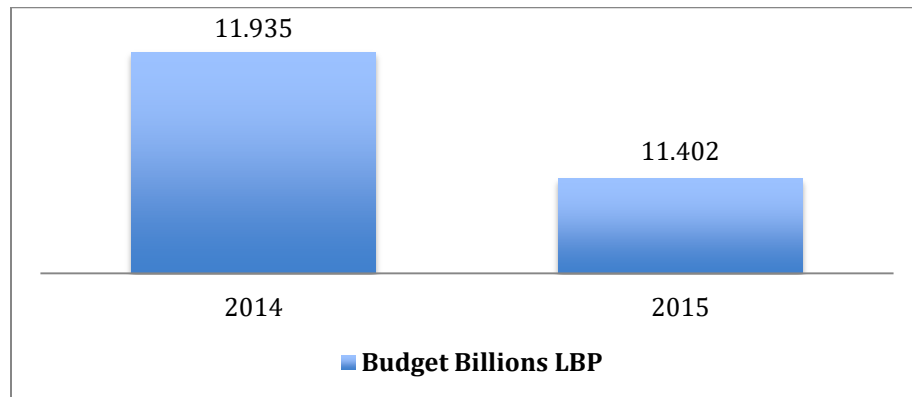
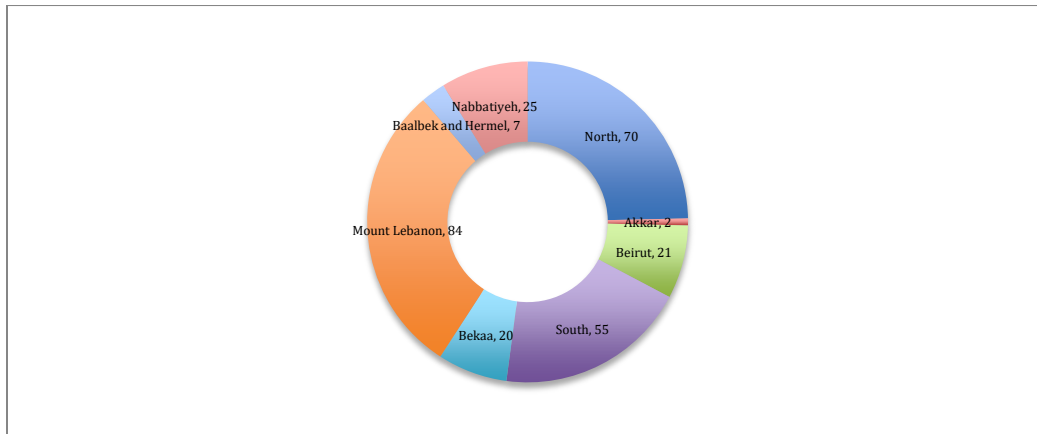


Figure 27 - Division Budget 2014 - 2015 Progression

In 2014 the division's budget was 9.400 Billion LBP, and in 2015 9.547 LBP. In 2014 MoSA had requested and received supplemental budgetary allocation from the provisional supplemental budget of MoF. The justification for additional funds was the increase of fee rates of the regular and specialised staffs within the associations contracted by MoSA. This

was approved and prioritised, because salaries are fixed costs, and fixed costs take precedence over other types of costs. As such, the budget in 2014 was raised to 11.935 Billion LBP. In 2015, within the law 39 11/2015 by MoF, the budgetary allocation was increased to 11.402 Billion LBP.

### *Beneficiaries and Services*

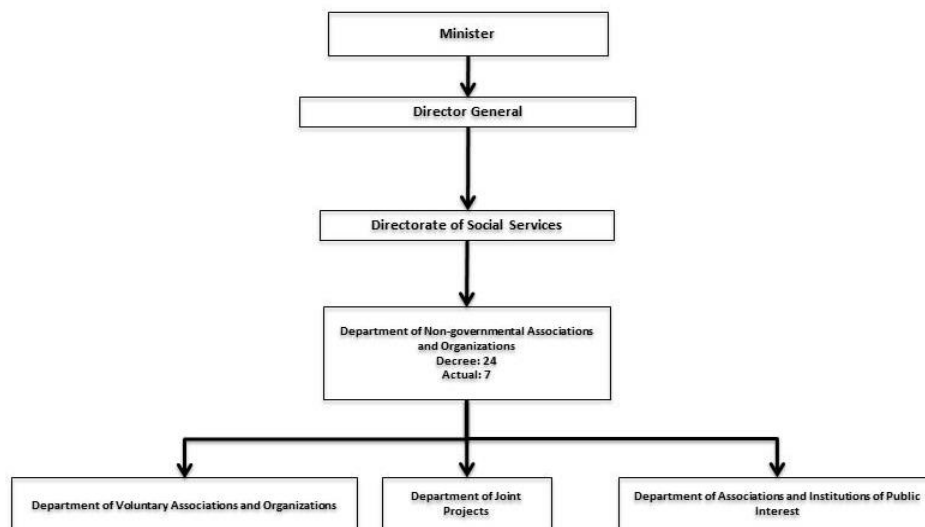


**Figure 28 - Employees Supported by MoSA in Organisations in Governorates**

As Figure 28 shows, Mount Lebanon has the largest number of supported employees (84), followed by the North Governorate (70 employees), and the South Governorate (55 employees).

In 2014, the division supported 75,702 beneficiaries through 289 organisations and groups.

### *Structure and Personnel*



**Figure 29 - Division of Non-Governmental Associations and Organisations**



The Division of Non-governmental Associations and Organisations is staffed at **30%** and consists of three departments as per Figure 29 and they are the Department for Voluntary Associations and Organisations, Department for Joint Projects, and the Department of Associations and Institutions of Public Interest. The total number of staff of the Division is 7 people, whereas the Decree 5734 requires 24 staff members. The composition comprises of two department heads and 5 social workers.

As shown in Figure 29, the division is comprised of three departments and they are:

The Department for Voluntary Associations and Organisations is currently staffed at **37.5%**: where by the Decree 5734 the department is supposed to have **8** occupied positions, but it currently has **3** occupied positions.

The Department for Joint Projects is currently staffed at **37.5%**: where by the Decree 5734 the department is supposed to have **8** occupied positions, but it currently has **2** occupied positions.

The Department of Associations and Institutions of Public Interest is currently staffed at **12.5 %**: where by the Decree 5734 the department is supposed to have **8** occupied positions, but it currently has **1** occupied position.

### *Processes*

The division sets general targets annually, but due to financial and human resources constraints not all of them are accomplished.

The data files about all non-governmental associations and organisations operating in the social sector in Lebanon are kept in this division, by the Department for Voluntary Associations and Organisations. The Ministry of Interior and Municipalities (MoIM) does the registration of all non-governmental associations and organisations, following positive opinion presented by MoSA, in accordance to the law 212 and Decree 5734. The files kept by the Department for Voluntary Associations and Organisations contain information about the association/organisation name, address, contact details, founding members, representative person, etc. Currently, this department keeps files for 500 non-public associations and organisations, organised in two separate excel databases. In 2014, there was an attempt to create a uniform database but this work had not been completed to date.

Sixty non-governmental associations and organisations registered and operating in the social sector in Lebanon have the special status of public interest that allows them customs exemptions. The Department of Associations and Institutions of Public Interest keeps their files. To obtain the status of public interest association or organisation, the procedure requires inspection and positive recommendation from a MoSA social worker, an approval from MoSA's Minister and a Decree issued by the Council of Ministers.

Not all non-public associations and organisations working in the social sector receive funding from MoSA. There are 280 non-public associations and organisations that currently have joint contracts with MoSA. They are called joint contracts because they require the





participation of 30% by the association or organisation and MoSA's co-funding participation of 70%. The joint contracts are renewable annually. Some of these contracts have been renewed annually and carried over since 1960's at the time of OSD. In average, every year the division receives around 100 new requests for joint contracts, however due to budgetary constraints, 7 to 10 new contracts are approved in addition to the existing ones. The approval of contracts is done by MoSA's Minister at the recommendation of a MoSA social worker following a field visit and report containing the following information: conditions of physical premises of the organisation or association, proof of minimum 3 years of establishment, data and information about the staff and volunteers, experience of previously implemented social projects during the last 3 years, proof of non-existence of similar services provided to the beneficiaries in the geographical proximity, and number of beneficiaries served so far.

The joint contracts are managed and supervised by Steering Committees, one Steering Committee per project. These committees consist of 2 members from MoSA and 2 members from the respective association or organisation. The Steering Committees are agreeing on annual plans of activities and budgets, and each meeting is formally reported to the division. There are on average between 4-6 Steering Committees meetings per year, for each joint project.

#### Data and Information Sharing

Though the associations and organisations contracted by MoSA have been somewhat constant since 1993, the division does not have a single unified and precise database. This reduces the ability of the division to have an overview per governorate/service, type of contract, and relevant persons and specialists involved in provision of services and impede the ability of the division to monitor and track all contracts and the number of beneficiaries. Two years ago, the division had software that had limitations, and since then they tried to upgrade the software to enhance proper tracking and monitoring, but the funding of this project is pending approval. Another area that could benefit from enhancements would be the case of information sharing with other ministries, and the reduction of required forms.

#### Monitoring and Evaluation

In terms of monitoring, the Division of Non-Governmental Associations and Organisations has no standardised procedures and regular reporting in place. The basic monitoring is conducted by social workers prior to approval and signature of contract, and once a year by the Head of the Steering Committee conducting basic site survey regarding joint contracts.

There is a significant room for improvement through introduction of selection and evaluation criteria that would further enhance the contracting and implementation of joint contracts, and enable MoSA the regular collection of categorised data and information about the beneficiaries and the services offered. The effectiveness of current surveys and monitoring visits can be increased by further specification of compliance criteria and standards.



## Division of Family Affairs

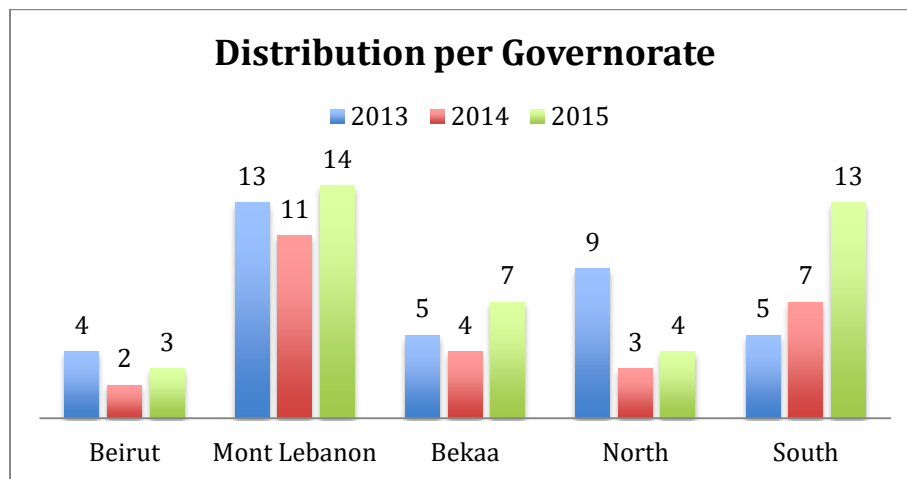
The Division of Family Affairs is another important division of MoSA, with functions and responsibilities covering number of areas related to social, educational, health and employment conditions of families and individual family members.

### *Budgets and Monitoring and Evaluation*

As the division does not keep records of beneficiaries and does not receive budgetary allocations for contracting services, no further analysis was required in terms of budget expenditures, distribution of expenditures per governorates, as well as monitoring and evaluation of services.

### *Beneficiaries and Services*

The Division of Family of Affairs only supports families with triplets, in amount of two million LBP per family. The following figure provides an overview of the distribution of families supported per governorate for the years 2013 – 2015.



**Figure 30 - Support to Families with Triplets per Governorate**

As per Figure 30, Mount Lebanon had the highest number of families with triplets supported between 2013 and 2015 by the Division for Family Affairs.

### *Processes*

The division works closely with the project “Committee for Family Support”. Through this project, the division processes applications received from SDCs, for families with triplets. During 2013-2015, a total number of 104 families with triplets were supported.

In addition, the division serves as an executive body of the National Elderly Commission of Lebanon, responsible for setting priorities with an agreed annual Action Plan. This



Commission is headed by MoSA's Minister, and includes representatives from other line Ministries, and national organisations, NGOS and experts active in the field of elderly affairs.

Under the supervision of this Commission, the Division of Family Affairs worked on developing standards for quality of services for elderly people in institutions. The work on standards was funded and supported by UNFPA through the emanating project Population and Development. In 2014, representatives from 13 Residential Institutions and 10 social workers from MoSA received training and operational toolkit, consisted of operational procedures and a manual. MoSA social workers tested the application through piloting of these standards in four specialised residential SDCs, with satisfactory results and positive feedback from both beneficiaries and the SDCs. This was considered a big achievement at the national level, as it was the first time in Lebanon standards for quality for services for elderly have been designed and practically tested.

However, these standards have not been adopted yet as national standards. The Division of Family Affairs and the National Elderly Commission are working on adoption of the standards and their legal enforcement as mandatory minimum standards for all institutions in Lebanon providing residential services for elderly people.

The Division of Family Affairs additionally cooperates closely with NGOs and Universities. During 2011-2012, the division cooperated with specialised NGOs in awareness campaigns for doctors, nurses and social workers, about Alzheimer disease and early prevention (including medical and non-medical treatments). In 2013, the division cooperated with the University of Saint Joseph on developing a study in regards deficiency of vitamin d in elderly, which involved 230 people. In addition, the department cooperated with NGOs, specialised Institutions, youth groups, and media, to increase public awareness for support of families with autism.

The division also works closely with communities and municipalities regarding inclusion of retired people with different areas of expertise, in various development programmes in the communities.

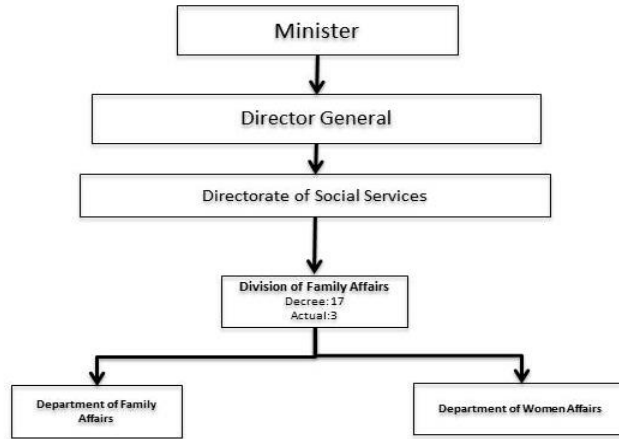
In 2015, MoSA re-activated a National Technical Task force, in partnership with an International Medical Assembly, and it gathers all national and local organisations working in areas of gender based violence in order to produce unified tools to combat gender based violence.

The division is also involved in the implementation of the National Plan "Plan to Safe Guard Women and Children in Lebanon" co-funded by the EU, MOSA and UNICEF, which include establishing of safe spaces within selected SDCs for women and children victims of violence, as well as assist in the implementing of the Law 293 (dated 2014), regarding protection of women and other family members from domestic violence.

Furthermore, the division is currently working in collaboration with the British Council on a project for participation of women in public life.



## Staffing and Personnel



**Figure 31 - Division of Family Affairs**

As indicated above, the Division of Family Affairs consists of two departments. These two departments are: the Department of Family Affairs and the Department of Women's Affairs. The division is currently staffed at **18%**: where by the Decree 5734 the department is supposed to have **17** occupied positions, but it currently has only **3** occupied positions.

The Department of Family Affairs is currently staffed at **22%**: where by the Decree 5734 the department is supposed to have **9** occupied positions, but it currently has **2** occupied positions.

The Department of Women Affairs is currently staffed at **12.5%**: where by the Decree 5734 the department is supposed to have **8** occupied positions, but it currently has **1** occupied position.

## Directorate of Social Development

The Directorate of Social Development is the directorate that handles the engagement of local communities, and corresponding institutions, in coordination with the General Directorate of the Ministry of Youth and Sports. It works on youth to prepare them to get more involved in their community development, be it local or regional rural and urban development. It works in concert with clubs, youth, and municipalities to develop and prepare development programmes. It enables the improvement of local industry capabilities, and supports handicraft/craftsmanship production to meet market needs and the organization of fairs and other events to promote them. It receives on average between 2012 and 2015 of about 0.8 % of the overall budget of the ministry.

## Budget Trends

Though the budget of the directorate is very small in comparison with that of the Directorate of Social Services, it is still an essential component of the ministry's work.

The allocated budgets are not sufficient and the delays in processing payments prevent the effectiveness of the directorate. The budgetary trends have also been impacted by the Syrian crisis, at different timeframes, as more refugees begin to impact the infrastructure of the areas, most densely occupied by them, especially the North governorate. There was a sharp increase in the budget for this governorate, almost doubling the budget between 2013 and 2014.

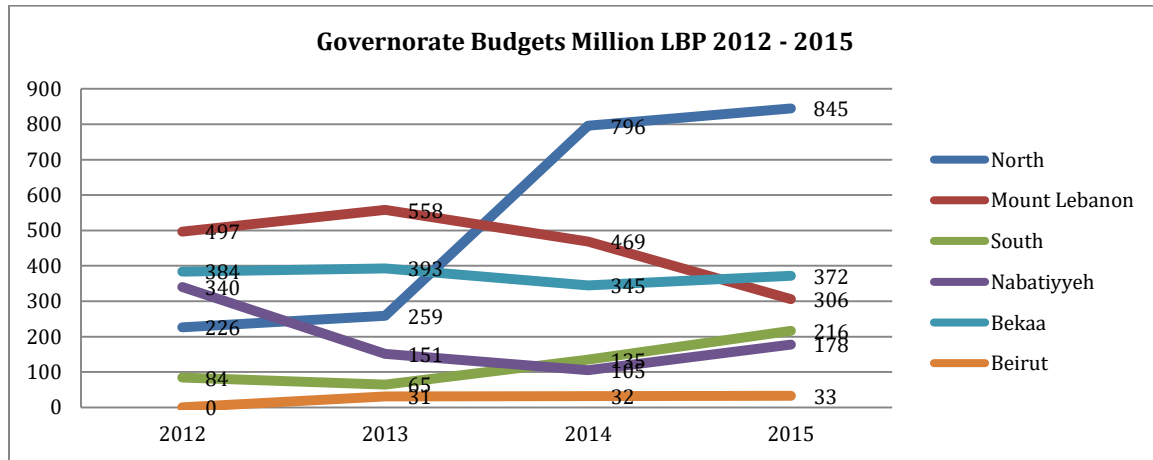


Figure 32- Governorate Budgets Million LBP 2012 - 2015

### Staffing and Personnel

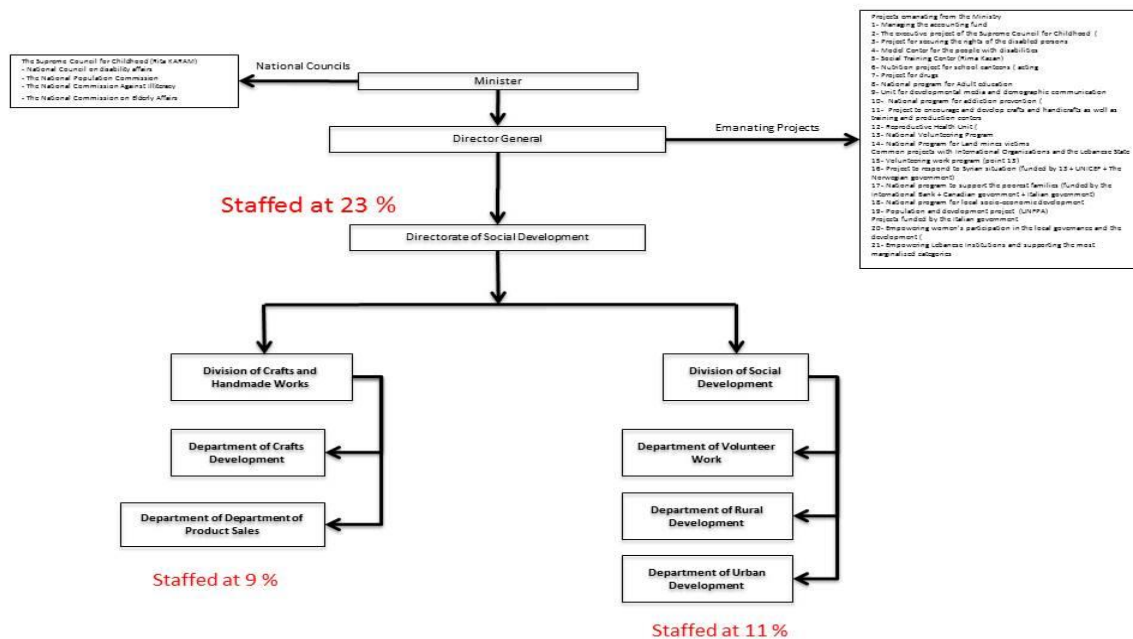
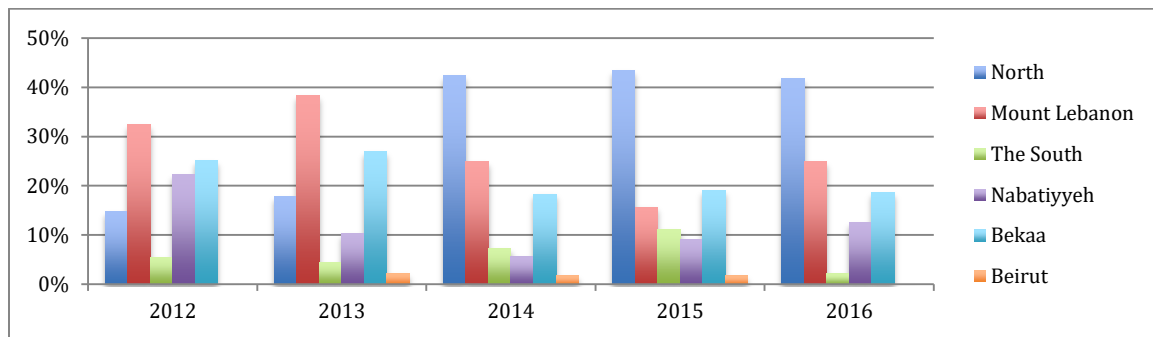


Figure 33- Directorate of Social Development

The directorate, which by the decree has 31 personnel allocated, has only seven positions filled. As shown in Figure 33 above, it has two divisions: the Division of Crafts and Handmade Works and the Division of Social Development. The Division of Crafts and Handmade Works is comprised of the Department of Crafts Development with 12 personnel allocated by the Decree 5734, but with two occupied positions present, and the Department of Product Sales with 20 personnel allocated by the Decree 5734, with one occupied position. The division as a whole is only staffed at 9% of capacity as given per the decree.

The Division of Social Development is comprised of the Department of Volunteer Work which has 18 allocated by the decree, but in fact only two staff members are available; the Department of Rural Development has 19 personnel allocated by the decree, in fact it is staffed by two staff members; and the Department of Urban Development has 12 personnel allocated, but in fact the whole department is not staffed. The division as a whole is only staffed at 11% of capacity as given per the decree.

### *Beneficiaries and Services*



**Figure 34 - Distribution of Beneficiaries per Governorate 2012 - 2016**

Beneficiaries are mainly associations, municipalities, schools, groups of individuals, clubs and societies that perform different types of work to include power, accommodation, agriculture, water, construction and rehabilitation, medical, industrial, infrastructure, and waste management projects. The distribution per Governorates is present in Figure 34 above.

### *Processes*

The directorate does exercise annual planning. It develops and issues an annual plan specifying the focal areas based on available data, from previously submitted projects, and accomplishes objectives fairly well.

Projects proposals are normally submitted to the ministry. Projects below 15 Million LBP can be granted support without prior approval from the Court of Audit. Projects that require more than 15 million LBP require prior approval of Court of Audit. The ministry covers up to 70% of the cost, and the applicant has to cover 30%. Main obstacles in this work are: a) delay of applicant contribution in cash; b) speed, or lack thereof, of the postal service within the administration; c) delay of accounting division in referring the invoices for disbursement; d) Financial/Economic difficulties; and e) reluctance of contractors who



accept to work with the ministry due to multiple issues, to include the delays in payment by Ministry of Finance and the MoSA accounting division.

### *Monitoring and Evaluation*

The directorate has improved the quality of projects and their overall execution by working on project proposals prior to their approval. They follow a standard assessment procedure, study and verify project files, check for conformity with the standards and documentation required they prepare standard contracts for development projects, and check on compliance during execution.

### *Other Entities*

#### *National Bodies*

There are 5 national bodies that respond directly to the Minister. They are: Higher Council for Childhood, National Council on Disability Affairs, National Population Commission, National Commission Against Illiteracy, and The National Commission on Elderly Affairs.

#### *Emanating Projects*

There are 14 emanating projects, and they are the following: Fund Accounting Management, The Executive Project of the Higher Council for Childhood, Rights and Access Program, The Model Centre for Disabled, Social Training Centre, Nutrition Project for School Canteens, National Program for Adult Education, Medicines Project, Unit for Developmental Media and Demographic Communication, National Program for Addiction Prevention, Project to Encourage and Develop Crafts and Handicrafts as well as Training and Production Centres, Reproductive Health Unit, National Volunteer Service Program, and the National Program for Landmines victims.

#### *International Donor Projects*

There are seven common projects funded by the Lebanese State and International Organizations, and they are: Volunteering work programme; Project to respond to Syrian Situation funded by UNICEF and the Norwegian Government; National Program to support Poorest Families funded by the World Bank, the Canadian and Italian Governments; National Program for local socio-economic development; Population and development project in collaboration with UNFPA; Empowering women's participation in local governance and development funded by the Italian Government; Empowering Lebanese Institutions and supporting the most marginalised categories funded by the Italian Government.

#### *Oversight Structures – Council of Ministers*

There are three entities that currently provide oversight and monitoring to MoSA's work, and they are the Central Inspection Board, the Court of Audit, and the Civil Service Board.



## I.5 Assessment of Internal and External Factors, SWOT Analysis

### Internal Factors

#### *IT, MIS, Data Collection and Sharing*

There is ample room for improvement of data collection and management. There are no shared data collection requirements and data collection systems. The data management across the MoSA system is in need of more coordination and coherence.

Elements such as data collection and data sharing need to be standardised. There is a need of a MIS (Management Information System), an intranet between MoSA divisions internally and between MoSA and its SDC's, as well as MoSA Joint Projects, of a CBR (Client Beneficiary Register) with clear unique identifiers for beneficiaries. Such element would considerably facilitate information sharing internally and externally with institution and considerably contribute to the effectiveness and efficiency of services. In absence of such systems, staff is developing their own excel databases and worksheets to meet their own data collection and information needs.

The preparation of this Strategy had faced numerous obstacles regarding data collection and impossibility of verification of data, including deficient responsiveness from the institutions contracted and funded by MoSA. Collection and sharing of data is of course not an end itself, the data also has to be analysed and policies and programmes developed on the basis of the analysis.

#### *Cooperation, Coordination, Consultation and Networking of Resources*

Generally the elements of coordination, cooperation and consultation are in need of development, and this is especially the case in the social system across the programmes, which are funded by MoSA, other Ministries and donors. Many employees within MoSA are not involved the work of the projects and programmes that operate as parallel structures and vice-versa. Similarly there is ample need of improvement of cooperation, coordination and networking between MoSA and other Ministries, notably with MEHE and MoPH despite the fact that major funds from MoSA are for funding education and health care. There is genuine feeling that MoSA is carrying out activities that by nature should be regular activities of MEHE and MoPH. However, the transfer of responsibilities from MoSA to these ministries will require legislative changes, new laws, organizational transformations and first of all political willingness and approval of the Council of Ministers and the Parliament.

#### *Monitoring, Evaluation, Impact Assessment, Social Analysis, & Evidence based planning.*

There is a serious need of a mechanism for assessing whether the needs of the beneficiaries are met through programmes and projects funded, and to monitor the effectiveness or value for money of any of the social services and programmes. The lack of such systems is compounding the existing fragmented approach and fails to identify overlap or duplication



between and among programmes. The current staffing challenges limit the ability of MoSA and de-concentrated divisions to effectively carry out monitoring and evaluation. The monitoring is more regular depending on the beneficiary type, by professionals from SDC's and MoSA. These visits consist of verifications of the presence of beneficiaries subscribed to the institution, the conditions of the premises, cleanliness, building type, adequate furnishing, adequate staffing suitability for beneficiaries, and quality and quantity of food. From time to time, beneficiaries are interviewed, whereas inspections occur when problems are reported.

There is no evaluation of the work of SDCs or NGOs and Institutions contracted and funded by MoSA.

### *Referral and Case Management*

Referral and case management is relatively new in Lebanon, launched some years ago and operating through individual systems developed by the professionals that are predominantly paper based. Opening and closing of cases, case conferences, prioritization, follow-up of referrals and case reviews should be undertaken within a unitary and regulated case management and file management system. Among professionals this results in mixed views about the extent to which the current referral system is functioning effectively or not. There is sense of clients being passed around the system as opposed to a system that is client-centred.

In 2015, MoSA initiated and organised training of social workers in Case Management. This was done in cooperation with University of Saint Joseph and the participants included social workers from MoSA and from SDC's. The social workers who attended the training delivered by senior case management professionals were equipped with operational manuals and procedures necessary for practical application of case management. Some social workers have launched piloting of case management for children after the training.

### *External Communication and Promotion*

Within any government structure, ministries that deal with social protection issues and vulnerable populations are often seen as the less important ministries when compared to others such as health, education, economic development, industry, etc. While most people are clear about reforms and services available and offered by the health or the education system, they are less clear when about the services and benefits for social care. MoSA's website could be made much more informative, and public awareness campaigns should be resumed. There is no publicly available annual report for the work and activities of the Ministry and SDCs, nor leaflets and brochures about the available services and benefits, or social programmes funded through MoSA. The overall visibility of MoSA in the social sector is in need of improvement. Lots of beneficiaries are unaware of MoSA activities in the social sector, while many still associate the regional units run by MoSA within the Governorates as units of NGOs and Institutions.





## *Donors Coordination and Absorption Capacity*

Within MoSA there is no central point with responsibility for donor coordination. Some donors funded projects are not synchronised while some of them run in parallel. This creates problems, overlaps and confusion in terms of prioritisation and at same time, overstretches the capacity of MoSA to systematically absorb and implement conclusions and recommendations from donor support. MoSA and all donors should give more careful consideration to the ability of MoSA to absorb and sustain donor support especially given that the majority of this support is in the form of technical assistance (TA).

## *External Factors*

### *Legislative Framework*

MoSA operates within the framework of the Law No. 212 from 1993, which stipulates the organizational structure, staffing and core functions. Any change to the organizational structure or the functions of MoSA is possible by approval of the Council of Ministers. Since establishment of MoSA, no attempts have been made for legislative changes or formal adoption of secondary legislation. Therefore, part of the secondary legislation regarding various enforcements mechanisms and working operations has been provided by Minister's decisions, while attempts to establish national social system of minimum standards, accreditation and licensing system through TA support from international donor funded projects have not been successful. Rejections have been generally motivated with insufficient compliance of these proposals with the overall context of the society (last attempts were in 2002-2004 by a WB funded. Areas as adoption, fostering, and domestic violence are also not under jurisdiction of MoSA and other state civil institutions. They are regulated by the Religious Courts of the religious communities.

### *International Agreements*

The Government of Lebanon is guided by the Constitution that explicitly safeguards fundamental human rights, dignity of life and freedom for every citizen. It has also signed several international agreements and conventions where the human rights based arguments and rights of the citizens are grounded as fundamental principles that call for a global contract on Social Protection and obligations of the signatory states to guarantee social protection and to enable their citizens to claim social protection rights. The following is a List of International Agreements signed by the Government of Lebanon:

- The Universal Declaration of Human Rights (UDHR) signed on 10.12.1948
- The International Convention on Civil and Political Rights, signed on 28.06.1962
- The Convention on the Rights of the Child (CRS), signed on 26.01.1991
- The Convention on the elimination of all forms of Discrimination Against Women (CEDAW), signed on 21.04.1997
- The Optional Protocol on the sale of children, child prostitution and pornography, signed on 10.10.2001
- The Optional Protocols to the Convention on the Rights of the Child, signed on 02.11.2002
- The UN Convention on the rights of Persons with Disability, signed on 14.06.2007





## Poverty Assessment

“The Mapping of Living Conditions in Lebanon” published in 1998 was the first fruit of cooperation between MoSA and UNDP for measuring poverty against indicators. It was methodologically grounded in the assessment of unsatisfied basic needs, and was the first analysis in both Lebanon and in the Arab World to measure poverty through basic needs, rather than income and expenditures. The poverty analysis was based on a compound index of living conditions consisting of 11 indicators. This report also provided a comprehensive overview of the characteristics of the poor and their regional distribution in the mid-1990s. In 2004, the need reappeared for information on the changes in deprivation indicators and in the living conditions of the population of Lebanon. The studies from 2004 shown that at the individual level, the percentage of deprived people in 1995 was approximately 34%, of whom about 7% had very low living conditions, compared to 25% in 2004, with some 4% having very low living conditions. The number of deprived individuals in 1995 totalled 1,018,505, versus 919,799 in 2004. It should be noted that the percentage of deprived households has declined about 6 %, while the percentage of deprived individuals declined about 9 %. This difference in the change in deprivation rates among households and individuals was due to the increase in the number of households, compared to the decline in population between 1995 and 2004. This decrease also occurred for households living in relative poverty, with an overall decline from 28% to 19% in 2004, although disparities remain between different Lebanese districts. This improvement appeared for the indicators related to education, housing, access to potable water and sewage facilities. However, income-related indicators have declined noticeably, in particular those related to work and economic dependency, where the comparative study shows an increase in the deprived households from 43% to 52% in this field.

However, the positive trends with the percentage of households suffering from severe poverty declining from 7% in 1995 to 5% in 2004 returned backwards reaching below the level of 1995 after the 2006 war with Israel and especially with the start of the Syrian crisis in 2011. In particular, the key issues facing Lebanon currently is the economic and social impact of the Syrian crisis, now entering its fifth year. Over 1.5 million Syrians, about a quarter of the Lebanese population, have taken refuge in Lebanon since the conflict started in March 2011, straining public finances, service delivery and the environment. The crisis had worsened the poverty incidence among Lebanese as well as widened the income inequalities. Latest unofficial figures show that as a result of the Syrian crisis, some 170,000 additional Lebanese have been pushed into poverty above the 28.6% in 2011 and around 220,000 to 320,000 Lebanese citizens became unemployed, most of them unskilled youth. The North and Mount Lebanon governorates currently account for around 65% of the total poor in Lebanon and the social distribution of poverty remains the same with a higher prevalence among agricultural workers and unskilled seasonal or temporary workers in services, industry, and construction, as well as among the elderly, the disabled, and female-headed households. This Syrian crisis creates significant burden to the Lebanese society and MoSA is highly affected. For an example, figures from SDCs show that 90% of beneficiaries of service of SDCs in Beirut and in North Lebanon are Syrian Refugees.

## Other Factors

Additional external and internal factors are addressed in the MoSA SWOT analysis below.





## MoSA SWOT Analysis

Strengths	Weaknesses
<ul style="list-style-type: none"> <li>❖ S1 – Leadership support of MoSA modernization</li> <li>❖ S2 – MoSA-wide focus on improved quality services for beneficiaries</li> <li>❖ S3 – Leadership ability to regulate areas where there is a lack of secondary legislation and ability to leverage projects to respond to crises</li> <li>❖ S4 – Experienced and qualified professional staff</li> <li>❖ S5 – Diversified available expertise</li> <li>❖ S6 – Resilient and inventive employees that diligently pursue the work in spite of shortage in numbers</li> <li>❖ S7 – Experience in collaborating with International Donors</li> <li>❖ S8 – Cohesion and support within divisions</li> <li>❖ S9 – Nation-wide presence through 216 SDC's and local offices in all 8 governorates and in districts</li> <li>❖ S10 – Regular participation in International Committees and Working Groups within the framework of the International Conventions and Agreements signed by GoL</li> <li>❖ S11 – Developed cooperation with NGO's and CSO's in improved responsive service delivery</li> <li>❖ S12 – Established frameworks for collaboration with line ministries and national institutions</li> </ul>	<ul style="list-style-type: none"> <li>❖ W1 – Low visibility of MoSA's role amongst beneficiaries, to the extent that beneficiaries are unaware that MoSA funds some services offered by NGO's.</li> <li>❖ W2 – Existing ambiguity of role of MoSA among NGO's and CSO's. Additionally, missing accreditation system for service providers.</li> <li>❖ W3 – Lack of strategic policies, programmes, and local community based-planning. As well as low capacity at the local level to assume planning of community based social services.</li> <li>❖ W4 – Lack of IT data collection and management processes. Majority of divisions and SDC's use paper and logbooks to collect and store information, rendering retrieval and sharing difficult.</li> <li>❖ W5 – Absence of mechanisms to monitor and evaluate efficiency, effectiveness, cost-benefits, and quality of funded services. Additionally, missing application of full project cycle management for design, implementation, monitoring and evaluation of programmes, projects, and services.</li> <li>❖ W6 – Unavailability of minimum standards and performance indicators hinders organised planning, and limits performance-based contracting as well as service quality evaluation.</li> <li>❖ W7 – Insufficient internal information sharing across projects, directorates and SDC's, as well as multi-hierarchical intervention on same issues, with lack of integration, due to absence of formalized protocols and data-sharing infrastructure. SDC's, the local foothold of MoSA and integral providers of services to beneficiaries only have 80 connected to the Internet.</li> <li>❖ W8 – Centralized decision-making at the level of Strategic Apex, with limited delegation.</li> <li>❖ W9 – Staffing levels in key operational Directorates is below requirements with a significant number of vacancies. Directorate of Social Services is staffed at 34% (34 out of 100), the Directorate of Social Development at 23% with 7 out of 31, and the SDC's at 36% with 1000 of 2800.</li> <li>❖ W10 – Non-existent HR Strategy. There is clear absence of job descriptions, performance appraisals and adequate fulfilment of positions based on actual needs.</li> <li>❖ W11 – Sub-optimal budgetary allocation to and within MoSA with respect to existing scope of responsibilities and work, as well as delays in disbursement of funds by MoF. e.g.: MoSA assumes educational and medical responsibilities for vulnerable and poor people, including large numbers of refugees, without receiving sufficient and timely budgetary allocations to operate effectively.</li> <li>❖ W12 – Absence of donor-coordination unit leading to overlap of donor assistance and duplication of effort in operations. Furthermore, it decreases the absorption capacity and creates a burden to maintain sustainability of the projects, requiring local funding and resources to continue effort.</li> </ul>
Opportunities	Threats
<ul style="list-style-type: none"> <li>❖ O1 – Donors technical and financial assistance for implementation of the strategy</li> <li>❖ O2 – International Community responsiveness to Syrian Crisis with financial assistance to countries hosting refugees</li> <li>❖ O3 – Ability to leverage private sector, universities, and skilled local workforce to close human capital gaps</li> <li>❖ O4 – Availability of enhanced modern IT solutions to include unlimited cloud-based Secure Storage, and applications to collect data and place them on internal databases</li> <li>❖ O5 – Increased access to local and international experts to support existing and emerging needs</li> <li>❖ O6 – Technological advances to respond to green environmental practices, and crises as catalysts for broader adoption of beneficiary friendlier and healthier environments</li> <li>❖ O7 – Increasing local and international support for decentralized offering to solutions, enabling non-residential care with quality community based support</li> <li>❖ O8 – Twinning projects and cooperation between local and EU local authorities</li> <li>❖ O9 – Cooperation with Universities and Research Centres for closer integration and building practical experience of students to pro-actively enter the social sector job market</li> <li>❖ O10 – PPP supporting social infrastructure, socio-economic initiatives, and the creation of social enterprises</li> </ul>	<ul style="list-style-type: none"> <li>❖ T1 – Impact of political deadlock on budgetary allocations; since 2005 the ministry has been working on the 12<sup>th</sup> rule</li> <li>❖ T2 – Economic Crisis in the country due to geopolitical conflicts leading to increased poverty and polarization of different communities</li> <li>❖ T3 – An increase in the number of Syrian refugees and their impact on infrastructure, overwhelming MoSA facilities and resources, as well as the economies of the areas they are in</li> <li>❖ T4 – Socio-economic and demographic impact of high number of refugees remaining in Lebanon</li> <li>❖ T5 – Worsening of environmental and health conditions without adoption of long-term nation-wide solutions of waste management</li> <li>❖ T6 – Worsening of economic conditions leading increased unemployment, and consequently brain-drain as well as loss of talent</li> <li>❖ T7 – Continued absence of regulation in terms of commissioning and contracting cycle, and post-award monitoring of quality of services and products delivery</li> <li>❖ T8 – Political agendas undermining effective planning that is responsive to beneficiary needs</li> <li>❖ T9 – Resistance to De-institutionalization and Decentralization by key stakeholders</li> <li>❖ T10 – Shifting Donor priorities and lack of donor coordination against national strategic priorities</li> </ul>



## Conclusions

### *Staffing, Business Processes and Organisational Bottlenecks within MOSA*

- Decision making in MoSA is highly centralised at the level of the Strategic Apex (Minister and Director General). At the lower level of the hierarchy very few decisions can be made by the Heads of Divisions.
- MoSA's Divisions are understaffed. The staffing of divisions has been addressed many times but has not materialised due to administrative and legal obstacles and delays in employment of civil servants.
- Existing Human Resource Management gap. MoSA does not have an internal HR division, HRD Strategy and Retention Plan. Currently, MoSA staff lacks job descriptions, written procedures and manuals for day to day operations.
- Staff performance measurement, appraisal and promotion system are non-existent.
- There is general lack of know how among staff in areas of programme and project cycle management.
- The reporting system exists but does not include elements for reporting against effectiveness and efficiency, or against indicators and targets.
- Communication and cooperation between the staff of the Divisions exist and the Divisions share information and data between themselves. However, due to lack of intranet IT/data management system, the flow and exchange of data and information frequently faces bottlenecks.
- Data and Information management are to be improved. Since 2012 some divisions have completely turned to completely paper based data and information management due to lack of computers, change of operating systems, etc.
- Communication, cooperation and information flow with the SDCs and Regional Units of MoSA in Governorates exists but is reactive and lacks protocols and procedures, aside of monthly reports submitted manually (paper based) to MoSA by the SDCs. The other forms are mainly phone calls, emails and from time to time meetings.
- The communication between MoSA Divisions and the emanating projects within MoSA is not regulated in terms of sharing and exchange of information and data. MoSA divisions do not have access to data and information in possession of the emanating projects and access to their data and information is only available for the Minister, the Director General, and the members of the committees.
- Communication between MoSA, beneficiaries, and other key stakeholders stands to be improved. There is ambiguity of MoSA role by NGOs, low visibility of operations and lack of knowledge in who funds social care by beneficiaries. There is a need for a stronger online presence, higher grassroots engagement, as well as social and traditional media campaigns.
- Cooperation with international donors exists and shall be enhanced through the establishment of a Donor Coordination Unit to prevent overlap, duplications of effort, optimised donor spending and increase of absorption capacity.



## *Budget, Organization, Management and Administration of Services and Programs funded by MoSA*

- Since 2005, MoSA budgetary allocations follow Article 86 of the Lebanese Constitution, Provisional Twelfth, preventing annual and long-term budget programming to effectively respond to beneficiaries needs.
- The MoSA budgetary allocations are sub-optimal and some departments are under-allocated or completely lacking allocations to develop programmes and services (e.g. Division of Family Affairs) despite identified needs and requirements.
- Strategic planning, full cycle programme management, and community based planning is still underdeveloped and shall become institutionalised.
- All services and programmes funded by MoSA are contracted to external providers (Non-Governmental Organisations and Welfare Institutions).
- The contracting is standardised and follows procedure and formal application process. Final approval of every contract is at sole discretion of the Minister.
- There are currently no minimum standards and accreditation for service providers. Last attempts for introducing minimum standards from two years ago were rejected as the proposal was seen as not adequate for Lebanon.
- There are no baseline indicators for services and beneficiaries.
- There is no national classification for services and beneficiaries neither does MoSA has its own internal classification. All services are recorded as contracts and many contracts are for multiple services.
- There is no regular monitoring on the quality of services contracted, due to lack of staff and resources.
- Social protection mechanisms can be enhanced to better respond to citizens' needs.
- Evaluation and performance measurement are non-existent.
- The absence of centralised donor coordination unit leads to multiple donor projects running at the same time (some of them through emanating projects) which leads to lack of synchronised activities, duplications and opacity between different divisions and respective staff.
- There is an overlap in some operations between MoSA and line Ministries of MEHE and MoPH, and need for improved inter-ministerial coordination and communication.
- There is lack of organised cooperation with the business sector, voluntary organisations and Universities, limiting their active participation in MoSA programmes and activities (e.g. Private Public Partnerships, Social Innovation, Social Enterprises, etc.).
- The cooperation with local authorities stands to be strengthened for generating evidenced based local needs assessments and their pro-active role in local community social policy planning to inform national priorities.





## Chapter II - Mission

### MISSION

The Ministry of Social Affairs works to improve the capability of the vulnerable communities and improve the quality of life of those who can't take care of themselves.

It will do so through:

- ✓ Offering the necessary support to entities that offer the most effective services to marginalised groups of citizens;
- ✓ Developing modernised social regulations governing the Ministry's work with various sectors to organise the delivery of services; and
- ✓ Offering high quality services that meet the needs of the marginalised groups in Lebanese society.

## Chapter III - Vision

### VISION

***Our Country is an inclusive society in which all vulnerable, marginalised and disadvantaged citizens have equal access to services***



## Chapter IV – Principles and Values

### Principles

**The Principle of Partnership** – both as a principle of social welfare and as a mean for implementing the strategy, through active participation of institutions, authorities, associations, foundations, religious groups, companies and citizens in order to achieve the objectives of the strategy. We believe in continuous and effective consultation with all stakeholders and developing relationships built on trust and mutual respect.

**The Principle of Equality** – ensuring that every citizen has the right to social care within the limits of the law and access to services wherever citizen may live within the country.

**The Principle of Social Solidarity** – ensuring social cohesion within the communities by supporting those who cannot provide for their own social needs.

**Systematic Functioning** - providing social assistance services and benefits within a unitary national system and regulatory framework.

**The Principle of Evidence Based Service Planning and Delivery** – a key to high quality services which meet the needs of the vulnerable citizens is the planning and delivery of services based on facts of social needs which the services are supposed to meet and on the impact of these services on the lives of these citizens. This strategy therefore seeks to provide improved models of planning, delivery and monitoring of current and new services.

**The Principle of Transparency** – Our activities will be open and transparent so that everyone can trust that they are fair and honest, while keeping our citizens informed about their rights and about the available services and benefits.

**The Principle of Accountability** – Our Organization will be responsible and remain fully accountable towards all our clients and within the framework of the law.

### Values

**Equal Opportunity** - All people have equal opportunity to access social services and receive equal treatment without any form of discrimination.

**Freedom of Choice** - Each person's choice for the social service responsive to his or her approved needs will be respected.

**Human Dignity** – Guarantee for the free and full development of each individual to be treated with dignity with regard to lifestyle, culture, beliefs and personal values.

## Chapter V - Strategic Goals and Specific Objectives



### STRATEGIC GOAL 1: Modernised and Strengthened MoSA

- Specific Objective 1.1: "Effective Evidence Based Planning and Programming"
- Specific Objective 1.2 "Strengthened Human Resources"
- Specific Objective 1.3 "Improved MoSA's Visibility"

### STRATEGIC GOAL 2: Enhanced National Social Welfare

- Specific Objective 2.1 "Standardised and Regulated Services"
- Specific Objective 2.2 "Strengthened and Diversified Social Assistance"
- Specific Objective 2.3 "Developed Social Protection Mechanisms"

### STRATEGIC GOAL 3: Empowered Local Communities

- Specific Objective 3.1: "Built Local Social Planning Capability"
- Specific Objective 3.2 "Modernised Local Social Infrastructure"
- Specific Objective 3.3 "Developed Community Based Social Services"



## STRATEGIC GOAL (SG) 1: Modernised and Strengthened MoSA

This Goal foresees overall modernization of the working processes MOSA Divisions, Regional Units and SDCs for more efficient, systematic and evidenced based system of planning and delivery of services of through introduction of:

- modern centralized information and data management system;
- project cycle management best practices regarding design and implementation of projects and programmes;
- long term human resources development plan;
- strategic planning and prioritization of services, projects and programmes, for each target group of beneficiaries;
- strategy implementation arrangements; and
- committee/s for donor programming.

## SG 2: Enhanced National Social Welfare

This Goal foresees enhancement, through regulation and standardization, of the processes and mechanisms for planning and delivery of social assistance services and social protection provided by MOSA:

- Development and establishment of baseline performance indicators for all types of services and beneficiaries;
- Deployment of Performance measurement systems;
- Setting Minimum standards for social services;
- Conducting uniform monitoring, evaluation and reporting protocols and procedures;
- Case management;
- Accreditation of service providers;
- Planning and delivery of improved, regulated and standardized quality social, medical, educational and health care services, by SDCs and contracted service providers;
- Introduction of social services that enhance the inclusion and integration of the vulnerable marginalised and disadvantaged citizens within the life of their communities.
- Creation of Cash Benefits system based on Minimum Income Guarantee (MIG); Creation of Disability Fund; and
- Creation of Retirement Income and Health Insurance scheme for all people at risk

## SG 3: Empowered Local Communities

This goal foresees empowerment and capacity building of local authorities for planning and delivery of community based social services

- Building local capacity and know-how for organised planning and delivery of social services at community level;
- Creation of local community initiatives and development of community based social services providing support outside institutions;
- Creation of alternative forms of Non Residential care within the pilot areas;
- Promoting deinstitutionalisation and integration of the vulnerable, marginalised and disadvantaged citizens into the life of the communities;
- Improved prioritisation within MOSA for programming and funding services at local level based on evidence and facts; and
- Dissemination of the results of the piloting of social policy planning.
- Social infrastructure investment and rehabilitation projects and programmes co-funded by local authorities targeting the needs of the vulnerable, disadvantaged and marginalised citizens in the local communities.
- Procurement of necessary equipment and capital investments and procurement of necessary equipment for establishing new community social based services at local level; and
- Activities launched by donor funded projects at local level aiming to improve the living conditions of the vulnerable, marginalised and disadvantaged citizens.





## Courses of Action

Goals, Objectives and Activities	2016				2017				2018				2019				2020			
SG - SO - Activities	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
SG1. Modernised and Strengthened MoSA																				
SO1.1 Effective Evidence Based Planning and Programming																				
A 1.1.1 Review and Evaluate Data/ Information Management and Overall Processes																				
A 1.1.2 Design and Develop Data Management Standardization, Processing, and Information Flow System																				
A 1.1.3 Review of Existing IT Infrastructure (MoSA, SDCs)																				
A 1.1.4 Install planned upgrade of IT Infrastructure through Donor Approved Project																				
A 1.1.5 Design, Procure and Install New Management Information System (MIS)																				
SO1.2 Strengthened Human Resources																				
A 1.2.1 Request TA Support to the Implementation of the strategy																				
A 1.2.2 Formalisation of the Strategy Implementation																				
A 1.2.3 Development and Implementation of Human Resources Development Strategy (HRDS)																				
A 1.2.4 Preparation, Formalisation and Enforcement of Job Descriptions																				
A 1.2.5 Study Visits, Staff Exchange and Organising Voluntary Work																				





SO1.3 Improved MoSA's Visibility																			
A 1.3.1 Dissemination of the MoSA Strategy to Stakeholders																			
A 1.3.2 Development of MOSA's Public Communication Strategy																			
A 1.3.3 Development of new Web Site, Mobile Application and Social Media Pages																			
A 1.3.4 Organise Public Awareness Campaigns																			
A 1.3.5 Strengthening Local Authorities and Non Public Sector Involvement																			
SG2. Enhanced National Social Welfare																			
SO 2.1 Standardised and Regulated Services																			
A 2.1.1 Establishing minimum standards for all Social Services (functional and structural)																			
A 2.1.2 Best Value Performance Measurement																			
A 2.1.3 Setting up an Accreditation System for Service Providers																			
A 2.1.4 Case Management																			
SO 2.2 Strengthened and Diversified Social Assistance																			
A 2.2.1 Implement, Monitor, and Evaluate 2016 Contracted Services																			
A 2.2.2 Evaluation of Current Services and Providers																			
A 2.2.3 Developing and Piloting New Services																			
A 2.2.4 Elaborating a Strategy for People with Disability																			



[illegible]



## Chapter VI - Resources and Costs

The social system is functioning based on the use of human resources and significant financial resources. The latter are required for covering the capital and yearly operational costs. The provision of social services for the next couple of years will continue to function in partnership with service providers, depending on the available resources.

Therefore, the hypotheses for Evaluation of Cost and Resources Required for Strategy implementation are:

- 1) The cost of the existing services for 2016 are based on the 2011 and 2013 decisions of the national committees determining the daily costs per service and beneficiary for both residential and non-residential care, with budget with an estimated increase of up to 10% during 2018-2020 (based on historical trends and particularly those between 2013-2015).
- 2) The cost of the new services was not calculated based on a log-frame model of cost evaluation for capital and operational costs. All figures are given in LBPs (Lebanese Pounds) based on the actual wages in the public and non-governmental sector and on the average prices level during 2013-2015;
- 3) The estimation of the Strategy overall costs includes only the cost of social assistance services and the costs for development social projects, without the cost of social cash benefits, until unitary and regulatory cash benefit system is introduced. The decisions who can be entitled to cash benefits had been discretionary right of the Ministers of MoSA, since MoSA establishment in 1993.
- 4) The cost of contracted services for whole period 2016-2020 includes only operational costs (based on cost per beneficiary per day), since they are based on contracts between MoSA and service providers, without capital investments required by MoSA;
- 5) The operational costs for the services provided by SDCs are estimated as same level as in 2015 (under assumption that the number of non-Lebanese citizens benefiting from SDCs services will remain same and/or gradually reduced during 2016-2020). The costs of services provided by SDCs will be higher after introduction of Case Management as mandatory, expected from 2018 onwards. During 2016-2020 MoSA will work on piloting Standards, Case Management and Local Social Policy Planning and will seek support by International donors. The purpose will be to strengthen the local capacities at Municipal and District levels and to prepare the local actors to effectively assume de-centralisation.
6. The costs for social development projects for the period 2016-2018 will follow the trends for the period 2010-2015, estimated in range between 0.8 and 1 % of the overall MoSA budget. It is expected that these costs will increase from 2018 onwards for purpose of introduction of new community based services that will require co-funding of capital costs (e.g. for rehabilitation/renovation of premises, purchase of equipment, IT infrastructure, vehicles, etc.). This assumption is based on past, current and future expected continuous interest for development projects by local authorities and their increased capacity for local social policy planning and developing new social development projects and services.



## Chapter VII: Risks Mitigation

Risks	E/I	S	Li	Mitigation Plan
Unavailability of skilled social sector workers	E	●	L	<ul style="list-style-type: none"> <li>Improved cooperation with universities</li> <li>Raising Public Awareness</li> <li>Technical Assistance and Trainings</li> </ul>
Inability of hiring new staff	E	●	L	<ul style="list-style-type: none"> <li>Cooperation with Universities for Volunteer Placement</li> <li>Hiring Contractual Experts</li> <li>Resource Levelling</li> <li>Donor based Technical Assistance</li> </ul>
Delays of Fiscal Decentralization	E	●	H	<ul style="list-style-type: none"> <li>Lobbying</li> <li>Increased Communication and Coordination with Relevant Stakeholders</li> <li>Request Donor Funded TA for Decentralization and Deinstitutionalization</li> <li>Grassroots engagement and education on benefits of decentralization</li> </ul>
Limited PPP Initiatives in the social sector	E	●	H	<ul style="list-style-type: none"> <li>Increased Cooperation with relevant stakeholders</li> <li>Coordination with Universities and Donors for Awareness Creation on benefits of PPP as well as provision of trainings</li> </ul>
Availability of Donors Support	E	●	L	<ul style="list-style-type: none"> <li>Increased Cooperation with OMSAR, the Prime Minister's Office, the CDR, and others for Donor Engagement in supporting the implementation of the strategy and funding of activities</li> <li>Dissemination and Promotion of Strategy to International Donor Community</li> </ul>
Local Authorities insufficient capacity	E	●	L	<ul style="list-style-type: none"> <li>Organizing Technical Assistance for Local Authorities Capacity Building</li> <li>Increase Communication and Information Sharing between MoSA Entities, local authorities and leaders</li> </ul>
Change in Senior and Mid-Level Management Leadership	I	●	L	<ul style="list-style-type: none"> <li>Briefing Incoming Leadership on the Reasons and priorities of on-going activities and projects</li> <li>When Possible promote staff from within MoSA</li> <li>Maintaining Database of Information</li> <li>Maintaining Records of Processes, Documents, and Tracking of Strategy of Implementation</li> <li>Improved Inter-divisional Cooperation</li> <li>Enhanced Changed Management Policies and Frameworks</li> <li>Training in Change Management of the Staff</li> </ul>
Staff continuity	I	●	L	<ul style="list-style-type: none"> <li>Development of HR Strategy</li> <li>Increase Internal Staff involvement in Donor Funded Capacity Building Projects</li> <li>Enhanced IT data and information flow exchange between staff within and staff between different divisions</li> <li>Developed internal appraisal system;</li> <li>Completion of documentation of job descriptions</li> <li>Establishing of inter-divisional working groups within MOSA to participate in strategy implementation</li> <li>Establishing and scheduling weekly, monthly and quarterly meetings for staff update on strategy implementation progress and activities</li> </ul>
E/I = External/ Internal; Severity: ● = Low, ● = Medium; Li = Likelihood. L = Low, M = Medium, H = High				



Risks	E/I	S	Li	Mitigation Plan
NGOs sector dis-alignment with MOSA social sector priorities	E	●	M	<ul style="list-style-type: none"> <li>Effective External Communication Strategy and Coherent Messaging from division heads and leadership</li> <li>Involvement of NGO's into MoSA joint activities funded by International Donors</li> <li>Create and use tools to include and share feedback from and to beneficiaries</li> <li>Improved Communication Channels between MoSA and NGO's</li> <li>Improved Commissioning and Contracting of services enabling effective monitoring and reporting</li> </ul>
Inadequate procurement processes	I	●	M	<ul style="list-style-type: none"> <li>Request and use of Technical Assistance for preparation of technical documentation and tendering processes</li> <li>Increased MoSA Technical Team Inputs in the designing and specifying of needed services and solutions</li> <li>Develop/Update Inventory of data, information, documented processes, and tools used in MoSA Operations</li> </ul>
Lack of formalized strategy implementation mechanisms	I	●	M	<ul style="list-style-type: none"> <li>Development of Strategy Implementation Monitoring Systems</li> <li>Development of Reporting Mechanisms</li> <li>Periodical Evaluation of Outputs and Outcomes</li> <li>Creating of Dedicated Strategy Implementation Team</li> <li>Improved Cooperation with SDC's and NGO's with periodical reporting on the set targets</li> <li>Designated Roles and Responsibilities to ensure accomplishment each activity of the strategy</li> </ul>
Delays of Senior Management Decisions	I & E	●	M	<ul style="list-style-type: none"> <li>Improved formalized communication between Divisions and Senior Management</li> <li>Periodical High-Level Briefings</li> <li>Timely Lobbying to action by management on Risk-Prone activities</li> </ul>
Resistance to deinstitutionalization	E	●	H	<ul style="list-style-type: none"> <li>Piloting Community Based Social Services, Disseminating Success of Piloted Projects</li> <li>Capture Lessons Learned, and Incorporate them into design of future Projects</li> <li>Adhere to Best Practices in designing Pilot Projects and Activities</li> <li>Promoting and Funding Community Based Social Services</li> <li>Organise Outreach of Beneficiaries</li> <li>Design and Deployment of tools to capture and disseminate Beneficiary Generated Feedback</li> </ul>
Resistance of other Line Ministries towards MOSA social sector reform processes	E	●	M	<ul style="list-style-type: none"> <li>Improve Inter-Ministerial Cooperation in areas of overlap and duplication</li> <li>Involve other ministries in TA and Workshops received by MoSA per relevant areas</li> <li>Bi-directional Involvement of Relevant Ministry Staff in Team Building Activities and Workshops</li> <li>Dissemination of Strategy Implementation Results to Other Ministries</li> <li>Promotion of regular reporting between ministries</li> <li>Promoting Establishment of Shared Databases on Beneficiaries, Organizations, and Service Providers</li> </ul>
E/I = External/ Internal; Severity: ● = Medium- High; Li = Likelihood. L = Low, M = Medium, H = High				





Risks	E/I	S	Li	Mitigation Plan
Low Cooperation and Coordination Across MoSA Entities	I	●	M-H	<ul style="list-style-type: none"> <li>Effective MoSA-Wide Communication Strategy</li> <li>Evident Senior Leadership Support of Strategy and emphasis on Collaboration</li> <li>Establishing of MoSA-Wide working groups to participate in strategy implementation</li> <li>Improved communication flow and regular information exchange between all MoSA entities</li> <li>Establishing regular meetings for updates, debriefs, and the elimination of bottle-necks occurring during the strategy's implementation</li> </ul>
Low staff commitment and resistance to change	I	●	M-H	<ul style="list-style-type: none"> <li>Effective Internal Communication Strategy; Evident Senior Leadership Support of Strategy and emphasis on Collaboration</li> <li>Establishing of inter-divisional working groups within MOSA to participate in strategy implementation</li> <li>Clear Delineation between staff work and contribution in overall strategy</li> <li>Team-building and Collaboration workshops</li> <li>Increased Staff involvement in monitoring strategy implementation</li> <li>Division focused all hands meetings on implementation of strategy and development of solutions to presented obstacles</li> <li>Demonstration of valuing staff input by Mid-Senior Level Management</li> </ul>
Worsening country economic conditions	E	●	M-H	<ul style="list-style-type: none"> <li>Request of donor funding</li> <li>Lobbying to Ministry of Finance</li> <li>Promoting PPP measures</li> <li>Solicit Diaspora Support and Donations</li> <li>Direct CSR funding to MoSA priorities</li> </ul>
Reduction of Budgetary Allocations	I & E	●	M-H	<ul style="list-style-type: none"> <li>Request of donor funding</li> <li>Lobbying to Ministry of Finance</li> <li>Promoting PPP measures</li> <li>Solicit Diaspora Support and Donations</li> <li>Direct CSR funding to MoSA priorities</li> </ul>
Poor Donor Coordination and/or Overlap	I & E	●	M-H	<ul style="list-style-type: none"> <li>Improved donor coordination in close collaboration with OMSAR, CDR, Prime Minister's Office, and others</li> <li>Establishing of MoSA donor coordination unit</li> <li>Transparent Exchange of Information Across MoSA Entities on All Donor Projects and Activities</li> </ul>
Delayed Adoption of the Strategy	I	●	L	<ul style="list-style-type: none"> <li>Lobbying Senior Leadership on Urgency of Adoption of Strategy</li> </ul>
Inadequate Planning and Resources Allocation to Strategy Implementation	I	●	H	<ul style="list-style-type: none"> <li>Training of MOSA employees in Project Cycle Management and Change Management</li> </ul>
Shifting or change of policy priorities	I & E	●	L-M	<ul style="list-style-type: none"> <li>Lobbying and promotion of MoSA priorities and the social strategy to international donors and MoSA Staff</li> <li>Ensuring stable and regular communication and dialogue between MOSA and other line Ministries and Prime Minister Office</li> <li>Ensuring strong visibility of MOSA by propagating success stories contributing to improved quality of life of beneficiaries</li> <li>Strong involvement of all relevant stakeholders in MOSA reform projects and activities</li> </ul>
Non-alignment of Donors interventions with MOSA priorities	E	●	L-M	<ul style="list-style-type: none"> <li>MOSA led prioritization of development aid;</li> <li>Effective external communication from MOSA towards international donors</li> <li>Effective reporting of progress of strategy implementation</li> <li>Pro-active submission of project fiches towards international donors</li> <li>Active participation of MOSA staff during implementation of donor funded projects</li> <li>Assert MOSA role in contextualization and localization of suggested development projects</li> </ul>
Increasing influx of number of refugees requiring social care and assistance	E	●	L-M	<ul style="list-style-type: none"> <li>Planning crisis response and resources</li> <li>Prepared contingency project fiches based on studies of current impact of Syrian refugees using MOSA resources</li> <li>Continued cooperation with the international donors for crisis appraisal and developing joint interventions</li> </ul>
E/I = External/ Internal; Severity: ● = High; Li = Likelihood. L = Low, M = Medium, H = High				





## Chapter VIII: Acknowledgements

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