The conflict in Syria has created a humanitarian crisis, with almost two million people having fled to neighbouring countries in the hope of escaping the violence. Thousands of Syrian refugees continue to enter Lebanon each week, putting increasing pressure on the ability of host communities and aid agencies to provide them with support. The situation has created intense levels of stress for refugees, as in many cases they are forced to take on new responsibilities at odds with their traditional gendered social roles. In order to understand these changing roles, Oxfam and the ABAAD – Resource Centre for Gender Equality conducted a gender situation and vulnerability assessment among Syrian refugees and Palestinian refugees from Syria now living in Lebanon. The findings are presented in this report, which aims to contribute to an improved understanding of the gendered impact of the Syrian conflict and subsequent displacement on refugees now in Lebanon. The report concludes with detailed recommendations for development and humanitarian practitioners and donor agencies, to help them design and implement gender-sensitive programming that addresses these shifting gender roles and helps to minimize stress and tensions among refugee populations (at individual, household and community levels) and between refugee and host communities.
CONTENTS

Executive Summary ................................................................. 3
1 Introduction .............................................................................. 8
2 Scope and Methodology of the Assessment ......................... 10
3 Findings and Analysis ............................................................. 13
4 Conclusion ................................................................................ 34
Notes .......................................................................................... 37
Acknowledgements ..................................................................... 42
EXECUTIVE SUMMARY

The Syrian conflict has resulted in approximately a million people fleeing to Lebanon\(^1\) – equivalent to nearly 25 per cent of the Lebanese population of 4.2 million.\(^2\) Despite the efforts of the Lebanese authorities, generous Lebanese citizens, UN agencies, and international and national aid organizations, this overwhelming influx of refugees has created intense stresses, as refugees find themselves having to take on new roles and responsibilities that are often at odds with their traditional gendered social roles. Many refugee men are experiencing severe stress and feelings of powerlessness because they are unable to fulfil their traditional role as family provider and protector, while many refugee women and girls no longer have access to the resources and services they used to have in Syria before the conflict began, which enabled them to fulfil their traditional gender role.

In order to understand these changing gender roles, Oxfam and ABAAD – Resource Center for Gender Equality carried out a gender situation and vulnerability assessment among Syrian refugees and Palestinian refugees from Syria now living in Lebanon, which involved over 150 people. Qualitative research was conducted using focus group discussions and individual interviews with key people and individual refugees in March and April 2013. The aim was to explore people’s experiences of how their gendered social and economic roles are changing, and the negative and positive effects these changes are having on their lives. The areas investigated included: changes to gendered norms, values and identities; changes in people’s physical safety and emotional well-being; changing gendered control over resources; and gendered access to aid and basic services.

Although the research provides useful insights into their experiences, the limited number of interviewees means that it not a comprehensive picture and offers only a snapshot of the situation for Syrian refugees or Palestinian refugees from Syria in Lebanon. Being a rapid impact assessment, the fieldwork was conducted in less than ten days. While this research did not address the problems faced by host communities, many poor Lebanese men, women and children are also feeling the effects of the Syria crisis, which has had a devastating impact on the Lebanese economy.

This report presents the findings and analysis from the assessment. It aims to contribute to an improved understanding of the gendered impact of the Syrian conflict on refugee women and men, girls and boys. It concludes with detailed recommendations for development and humanitarian practitioners and donor agencies to help them design and implement gender-sensitive programming that addresses these shifting gender roles and helps to minimize stress and tensions among refugee populations (at individual, household and community levels) and between refugee and host communities. The recommendations look at the ways that those involved in the humanitarian response can work more effectively together on programmes that focus on gendered identity, gender-based violence and protection, employment and income generation, housing and rent payments, water, sanitation and hygiene (WASH), health and education, and children’s rights.
KEY RESEARCH FINDINGS

Changes in gendered norms, values and identities

Patterns of mobility and life styles have changed, and, in part as a result of this, both women and men have been forced to redefine core aspects of their identities. As well as losing their traditional role as breadwinner, men seeking jobs and services also often face threats and discrimination from some members of host communities. Many women reported feeling that they have lost their femininity as, in addition to caring for their families, they now have to support them by going to the market, running errands, making decisions, and working in paid informal employment. However, for some other women this has created an increased sense of empowerment.

Changes in levels of gender-based violence, protection, and emotional stress

Families fled Syria because they feared for their lives, yet for many, their safety and security remain under threat. Despite generous assistance from most Lebanese communities, many respondents reported experiencing xenophobia, discrimination and hostility.

Protection and security

Lower self-esteem among refugee men because of the crisis has, in some cases, led to a negative expression of masculinity. Violence towards women and children has increased as some men vent their frustration and abuse their power within the household.

Outside the household, there are also examples of women and girls who are vulnerable to physical and verbal harassment, including sexual harassment, and in many areas they fear kidnap, robbery, and attacks. Widowed or other women on their own are particularly vulnerable, with some pretending in public to receive phone calls from their former husbands, to protect themselves from male harassment.

Early marriage

Although early marriage of daughters was common practice in Syria before the conflict began, this is reportedly also being increasingly resorted to as a new coping strategy, either as a way of protecting young girls or easing pressures on family finances.

Freedom of movement

For many women respondents, mobility in Syria before the conflict was very limited, as they were only allowed to leave the house with the male head of the household’s permission and when accompanied by men. As refugees in Lebanon, their movement is still restricted, though principally because of insecurity and fears of harassment or attack. Living in overcrowded conditions means that many women are no longer able to go into a different room whenever men who are not relatives come to visit male family members, as they would have done before. Now, if an unrelated man visits the household, women go to their female neighbour’s house until a man separates the room with bedsheets. Women can then stay behind these bedsheets so that they are not seen by the visitors.

Stress and anxiety

Stress and anxiety will inevitably affect all refugees who fled the conflict in Syria. However, how this manifests itself, and how refugees express and deal with these anxieties, is highly gendered. Many are suffering because they have no one to talk to about their worries. Many men feel they cannot meet society’s expectations of them as men.
Women are still expected to fulfill their traditional roles, but have lost the resources they used to depend upon. They cope by prioritizing the needs of their husbands and children, often to the detriment of their own health and well-being. Living in overcrowded and poor accommodation has increased the feelings of anxiety for men and women alike, as the lack of privacy can undermine their own sense of dignity.

Male respondents also talked about feelings of guilt over choosing to leave Syria with their families rather than stay and fulfill their role as protectors and defenders of their land, which has added to their feelings of low self-worth and powerlessness.

Many refugees (both women and men) are also extremely worried about family members and others who remain in Syria and would like to help the people still there. In addition men reported feeling that they needed to protect and provide for their own families.

**Changes in gendered control over resources**

*Employment and income*

Refugees, whether women or men, have very limited opportunities for work in Lebanon. Even if they do find work, wages are low, working conditions generally poor, and refugees often face discrimination or harassment. Despite this, many wish to work, as unemployment means they can no longer provide for their families (which also further lowers self-esteem, particularly for men).

Despite some shifting gender roles, refugee men generally retain control over household income, and as the head of household are often the primary recipients of income-generating activities or cash transfers. Men decide how cash is spent, although women are often responsible for receiving distributions of food or other (e.g. blankets, jerry cans etc.) items. Widowed and other women on their own frequently lose out, and are often excluded from receiving aid as there is no male member of the household to be registered with humanitarian agencies and cultural norms often prevent them from going to register by themselves.

*Access to food*

Most refugees (whether Syrians or Palestinian refugees who were living in Syria before the conflict) participating in this research reported eating less since they arrived in Lebanon. Bearing the brunt of financial hardship, women sometimes resort to harmful coping strategies. Many have cut down on their own food intake so that children and men in the household can eat. Respondents reported that certain types of aid (specifically food vouchers) are insufficient; some respondents reported selling their vouchers at lower than face value to get cash to pay rent and other expenses.

*Housing and accommodation*

Without outside assistance, the capacity of local communities to host more refugees will become exhausted. The majority of refugees interviewed owned their own houses in Syria and so had no rent costs, but in Lebanon, many are paying high rents for poor-quality accommodation, sometimes in garages or shacks. In some cases, boys are having to work to pay the rent when their fathers are unable to find employment. Respondents reported renting rooms with no electricity or sanitary facilities; in one instance 20 people were reported to be sharing one room, further depriving individuals of their privacy and sense of dignity. Some respondents reported receiving temporary support from aid agencies for rent costs but lack long-term means of support. Women are still the main care-givers and are responsible for their families’ wellbeing, but living in poor quality accommodation makes it much harder for them to fulfil this role.
Gendered access to aid and basic services

One of the biggest changes that refugees have to cope with is the sudden reduction in their access to basic services since fleeing their homes in Syria. Previously, Syrian families had good access to education (in 2009, 93 per cent of girls and 94 per cent of boys were enrolled in primary school, for example\(^5\)) and health care (in 2009, 96 per cent of pregnant women gave birth in the presence of a skilled health attendant\(^6\)), as well as other basic services. Now they are coping with a drastically different reality.

**Water, sanitation and hygiene**

Syrian refugees and Palestinian refugees, who were living in Syria but fled to Lebanon, interviewed for this research, reported a lack access to appropriate water and sanitation facilities. Inadequate water sources and sanitation facilities affects women disproportionately as they often prioritize their husbands and children’s need above their own. Limited water supply also increases women’s time and work burden given their gendered responsibility for washing and cleaning.

The rapidly increasing refugee population is putting pressure on the supply of safe water, and funds to expand water-tankering operations to areas without running water are insufficient. The lack of such services creates public health risks and greater vulnerability to sickness and infections.

**Education**

It has been estimated that only one in four refugee children are attending school, due to space limitations, language barriers given prevalence of English instruction, and difficulty of access (either because the schools are too far away and travel is unsafe – or perceived to be unsafe especially for girls - or because they thought they were not entitled to attend). Some girls who took part in the assessment were not allowed to go to school because parents, especially fathers, are reluctant to send them to mixed schools for cultural reasons. Additionally, the need for many young boys to work and support the household not only prevents them from studying, but also has disrupted the power dynamic within families, causing tensions within the family, because income generation was traditionally the father’s role.

**Health**

A recent estimate suggests that half of all refugees in Lebanon are not receiving necessary medical treatment, mostly because they cannot afford it.\(^5\) Aid agencies are providing some services, but the scale of needs has exceeded their resources. Compounding this, many refugees do not know where to go to get help. Chronically ill people, pregnant and lactating women, and children are particularly in urgent need of affordable health services, while the needs of older people and people with disabilities have been largely ignored. One of the biggest gaps is for psychosocial support, particularly given the increased levels of fear, stress, and anxiety that many refugees are experiencing.

**Access to and appropriateness of aid**

Respondents reported significant problems with provision of appropriate food and non-food items, which are distributed (usually to women) through a voucher system. Cash payments for rent and health services are also being provided, although not consistently, and are often paid to men as heads of household – both conforming to, and perpetuating, traditional gender roles. There are concerns about single women or female-headed households not receiving assistance because gaps in targeting of cash or rent payments (focused on male head of households) and cultural norms around mobility. Refugee women also reported that the personal care and sanitary items they receive are not suitable or of poor quality, in some cases causing health problems.
RECOMMENDATIONS

The research findings indicate that humanitarian organizations need to manifest a clear organizational commitment to promoting gender equality, which must be embedded into all aspects of programming. Gender and social analysis must be conducted as part of all emergency responses. Sex and age-disaggregated data should be collected, analysed, and used in planning and implementation of aid projects. Refugee women and men’s anxieties and fears about their changing gender roles need to be acknowledged and addressed. This can be used as an entry point for challenging attitudes that have traditionally limited women’s participation in social, economic and political life, and also for changing long-established social norms, such as women’s restricted freedom of movement. It is also an opportunity to give much greater attention to engaging men and boys on gender issues, and providing targeted counselling and mental health services for men who are struggling to cope with low self-esteem and help deal with their inability to fulfil their traditional gender roles.

Programme design should utilize refugees’ existing skills and capacities, as well as meeting their needs. Access to income-generating programmes and other benefits and assistance should be equally available to women and men.

Donors need to hold implementing agencies accountable for delivery of programmes that are gender sensitive. Mechanisms should be in place so that feedback from women and men, and boys and girls, is channelled in the right direction and responded to promptly.

Detailed recommendations for development and humanitarian practitioners and donor agencies designing and implementing gender-sensitive programmes can be found in Section 3: Findings and Analysis.
1 INTRODUCTION

Millions of people are suffering as a result of the acute humanitarian crisis in Syria. The conflict between forces loyal to President Bashar al-Assad and those opposed to his rule has caused political and economic instability and large-scale destruction in the country, leading to more than a million Syrians being displaced and seeking refuge in neighbouring countries.

In January 2013, the UN predicted that there would be 1.1 million refugees across the region by June. However, by the beginning of August 2013, the situation was much worse than envisaged, with 1,781,329 registered Syrian refugees in North Africa, Egypt, Iraq, Jordan, and Lebanon – 60 per cent more than the UN predicted. Of these people, 597,916 are registered as refugees in Lebanon, with a further 110,130 awaiting registration there. Of the refugees in Lebanon, 49 per cent are men and 51 per cent are women; just over half (52.8 per cent) are under 18 years old. It is also estimated that 235,000 Palestinian refugees from Syria are now displaced within Syria, and a further 92,000 are currently in Lebanon.

Thousands of Syrian refugees continue to enter Lebanon each week, and despite generous assistance from many host communities, the additional pressure is limiting their capacity to provide support. The impact of the crisis in Syria and the resulting influx of refugees is harder to deal with in those areas in Lebanon where overcrowding, inadequate access to basic services and poverty were already present. Rising rent and food prices, and competition for the limited work opportunities for refugees and host communities alike has created rising tensions in many areas of Lebanon.

There is an urgent and enormous funding need. The current Inter-Agency Syria Regional Response Plan is appealing for $5bn to cover Syrian refugees’ needs. Based on arrival trends since the beginning of the year, it is estimated that the number of Syrian refugees in need of assistance across the region may exceed three million by the end of 2013. The Response Plan aims to provide lifesaving assistance to refugees while ensuring that the cost of their welcome is not solely borne by host countries.

Experience from previous conflicts indicates that the different needs and aspirations men, women, children, elderly people and people with disabilities are often overlooked. Failures to conduct thorough gender analysis also often miss the specific vulnerabilities faced by different groups. The situation for Syrian refugee men, women and children, and Palestinian refugees from Syria who are now seeking refuge in Lebanon needs to be understood in the context of gender realities in their region. For example, many women are bound by traditional patterns of kinship, legalized discrimination and social subordination.

As in all humanitarian emergencies, the Syrian crisis is affecting refugee women and men in different ways. In order to gain a deeper understanding into the impact of the Syrian conflict on changing gender roles among refugee populations, Oxfam and its local partner, ABAAD, conducted a gender situation and vulnerability assessment in four governorates of Lebanon (see page 10 for details on study areas and methodology).

This report presents findings and analysis from the assessment, focusing on changes in four key areas of refugees’ lives since leaving Syria:

1. changes in gender norms, values and identities;
2. changes in levels of physical safety and emotional stress;
3. changes in gendered control over resources; and
4. gendered access to aid and basic services.
Each of these sections offers recommendations for those responsible for funding, designing, and implementing humanitarian responses that will contribute to early recovery and long-term, long-lasting change.

**GENDER RELATIONS IN SYRIA**

Although conflict was already well underway by then, in the Human Development Report 2013 (based on data from 2012) Syria was ranked 116 out of 187 countries, with a value of 0.648, placing it in the medium human development category.\(^\text{17}\) Between 1980 and 2012, many positive changes occurred. For example, life expectancy increased by 9.8 years, mean years of schooling increased by 3.1 years, and expected years of schooling increased by 2.4 years.\(^\text{18}\) However, progress on women’s rights has been limited. Syria was ranked 75 out of 86 non-OECD countries in the 2012 Social Institutions and Gender Index.\(^\text{19}\)

Child marriage was prevalent in Syria before the conflict began. The legal age of marriage is 17 years for women and 18 years for men, but judges may authorize marriages at younger ages – as low as 13 years for girls and 15 years for boys.\(^\text{20}\) According to the 2010 ‘National Situation Analysis Report: Women’s Human Rights and Gender Equality in Syria’, 38 per cent of women and girls married between the ages of 15 and 19 years, and 29.8 per cent of women became pregnant between 15 and 19. Polygamy is also common.\(^\text{21}\) Recent research by ABAAD and the International Rescue Committee (IRC) has revealed that sexual violence, including rape, is the most extensive form of violence faced by women and girls in Syria since the conflict began.\(^\text{22}\)

Even before the crisis, women were subject to discrimination, both in law and in practice. While the constitution affords all citizens equal rights, and Syria has ratified the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), these commitments have not been fully implemented through national legislation. Syria has a mixed legal system; the court system includes both secular and religious courts. Sharia is applied in matters related to personal status, with religious minorities applying their own laws in many of these cases. Laws assign inferior status to women compared to men, notably the Personal Status Laws that govern marriage, divorce, inheritance, child custody and other key areas.\(^\text{23}\)

There is no legislation in place that specifically addresses domestic violence.\(^\text{24}\) In November 2011, a joint study by the government and the UN Population Fund (UNFPA) reported that one in three women suffers domestic violence in Syria.\(^\text{25}\) The Penal Code prescribes lower penalties for murder and other violent crimes committed against women when defence of family ‘honour’ is considered a mitigating factor. At least 16 women, two men and four children under the age of 18 were reported to have been victims of ‘honour killings’ in 2011.\(^\text{26}\)

Women’s experiences in Syria before the crisis and as refugees in Lebanon will have an impact on their long-term ability to claim their rights in areas from economic and social independence to political participation. The gender situation and vulnerability assessment aimed to understand the differential impact of the conflict and its consequences on women and men. The findings of the study will contribute to the knowledge and understanding of the gendered impact of the conflict on women, men, girls and boys displaced from Syria, and offer guidance to humanitarian organizations and host governments on gender-sensitive approaches to needs assessment and programme design.
2 SCOPE AND METHODOLOGY OF THE ASSESSMENT

The gender situation and vulnerability assessment carried out with Syrian refugees and Palestinian refugees from Syria covered the following geographical regions (see Figure 1):

- North Lebanon (Tripoli and Halba camp in the Akkar region);
- Bekaa (Arsal, Taalabeya, and Bar Elias);
- Palestinian camps hosting Syrian refugees in Beirut (Chatila camp) and in South Lebanon (Ein el Helweh camp).

These areas were selected because they are covered by ABAAD’s current activities, or will be covered by Oxfam and ABAAD’s future work. North Lebanon and Bekaa Valley have more Syrian refugees and Palestinian refugees from Syria than any other parts of Lebanon. International NGOs and UN agencies, including Oxfam, are providing assistance to Syrian refugees there and to Palestinians refugees from Syria who have fled to existing Palestinian refugee camps. In addition to information gathered as part of the assessment, this report draws on other data collected as part of Oxfam’s work in Lebanon.

Figure 1: Regions covered by the gender situation and vulnerability assessment
KEY RESEARCH QUESTIONS

The assessment was designed to answer the following key research questions in relation to Syrian refugees and Palestinian refugees from Syria now living in Lebanon:

• How have gender roles and responsibilities changed – between men and women, and boys and girls – due to the conflict? What gendered implications do these changes have (at individual, household, and community levels)?

• What impact is the conflict having on gendered cultural practices, and how do these differ for women, men, boys and girls?

• How has the conflict affected men, women, boys and girls differently, in terms of vulnerability, livelihoods, protection, security and access to services? What coping strategies do men, women, boys and girls use?

• What gendered effects does the Syrian conflict have on people’s access to and control over resources compared with the situation in Syria before the conflict?

More specifically, the assessment considered the gendered aspects of key areas of refugees’ lives, as follows:

Practices and participation: including examining the gendered division of labour, gender roles and responsibilities and the extent that women and men and boys and girls are engaged at the household and community levels, based on their gendered roles.

Perceptions and aspirations: of women and men, boys and girls, about their roles in areas where they live.

Protection and safety: including analysing the specific threats to the safety and well-being of women and men and boys and girls, and how they respond to and cope with these threats, which include gender-based violence and early marriage. Changes to refugees’ masculine and feminine identities are also explored.

Access to and control over resources and services: including livelihoods income, cash transfers and remittances, food, health and reproductive health care, information about availability of services, and school attendance.

Power and decision-making: this cross-cutting dimension is assessed based on people’s experiences in the aforementioned aspects. The focus is on analysing key differences between what people experienced in their homeland and what they experience as refugees in Lebanon, principally the following issues:

• Women and men’s roles in production, earnings, reproduction, controlling budgets, decision-making, and marriage and divorce practices.

• How people live, in terms of accommodation, food and nutrition, health, personal relations and presence in the host community.

• What aid people are receiving, how they receive it, and how they find out about their entitlements.

• Family dynamics and the extent to which women and young boys are taking on new roles and influencing heads of households and other family members as a result of their new responsibilities.
METHODOLOGY

A total of 158 respondents took part in this gender situation and vulnerability assessment, which was carried out by ABAAD using qualitative research methods. These included 22 focus group discussions (FGDs), which were conducted with either Syrian refugees or Palestinian refugees from Syria (four FGDs with boys and girls, eight with men, and ten with women) in four governorates (North, Bekaa, Beirut and South), covering four areas and two Palestinian camps: Wadi Khaled, Tripoli, Taalabaya and Bar Elias, and Chatila and Ein el Helweh. Some location details have been removed in this report to protect the identity of sources. The identities of individuals participating in the survey have also been withheld for the same reason.

The assessment also included six key individual interviews and 20 semi-structured interviews carried out by ABAAD with people from Syrian and Lebanese communities in the four regions, based on gender-balanced selection criteria. Key interviewees included social workers, health workers, community workers, case managers, sheiks, and animators. The individual interviews were conducted with people who were either Syrian refugees or Palestinian refugees from Syria, and included elders (women and men), widows and widowers, men and women with disabilities, boys and girls aged 15–16, married Muslim men and women, and women who are on their own. In addition, Oxfam conducted a small number of interviews with refugees in the Tripoli area, which were used as the basis for more detailed case studies.

Participants for the FGDs were recruited according to the following criteria:

- religious identity and nationality (Syrian refugees or Palestinian refugees from Syria);
- geographical location (North, Bekaa, Beirut and South);
- demographic characteristics (women and men, boys and girls, covering different age groups).

Where secondary data have been used as background information in this report, references are provided. Men-only and women-only FGDs were held, as well as mixed groups with boys and girls, so that participants felt able to participate in the most open and unrestrained way.

Data collection tools

A comprehensive FGD guide was developed for those conducting the sessions to ensure that all areas of the study were covered. This included suggestions for open-ended questions and guidelines to facilitate discussions around the key issues, comparing people's experiences of their gendered roles before the conflict began against their lives as refugees in Lebanon. The guiding questions were classified into general and background questions on aspects of people's lives listed. In addition, two separate questionnaires were developed (one for young boys and girls, and one for key interviewees), with questions in the same general and background questions categories.

Limitations of the assessment

Although the research provides useful insights into their experiences, the limited number of interviewees means that it can only offer a snapshot of the situation for Syrian refugees or Palestinian refugees from Syria in Lebanon. Being a rapid impact assessment, the fieldwork was conducted in less than ten days.

The political nature of the Syrian crisis and use of group discussions meant that some participants did not respond to sensitive questions. Geographical coverage was also limited to the areas described. Continuous changes in the refugees’ addresses forced the research team to hire local focal points to locate them in almost all regions. Christian Syrian respondents were present in the areas covered by the study, but researchers were unable to reach them. Analysis of the different experiences of other specific groups (e.g. Druze, Kurds and Alwites) was also difficult to ascertain given the sensitivities of discussing ethnicity and religion in Lebanon.

27
28
3 FINDINGS AND ANALYSIS

This section presents the main findings and analysis from the assessment, incorporating quotes from the FGDs and individual interviews, and concludes with recommendations for humanitarian agencies and actors on what they can do to address the issues raised. It begins by exploring how people perceive changes in gender norms, values and identities. It then looks at changes in levels of gender-based violence and protection, and the emotional stress associated with this. Finally, it explores changes in gendered control over resources among Syrian refugees and Palestinian refugees from Syria in terms of employment and income, access to food, accommodation and housing; and gendered changes in access to aid and services, including water, sanitation and hygiene (WASH), education, and health care.

CHANGES IN GENDER NORMS, VALUES AND IDENTITIES

Women refugee participants in the assessment reported that in Syria, before the crisis, they had traditional gender roles. They did most of the household chores, even the minority of women who also had jobs outside of the house. Men were mainly responsible for supporting the family financially and made most of the decisions about the running of the household.

The crisis in Syria and their new status as refugees has changed these gendered roles. Some women reported having more mobility in Lebanon, mostly out of necessity, for example as a result of having to leave the house to collect water, while others felt unsafe and therefore restricted their mobility to reduce risks of harassment or violence in parts of Lebanon. The lack of access to adequate drinking water is often a completely new experience for them; in Syria most areas (including rural areas) had well-established water supply systems and tapped water direct to households, something that is unavailable in the tents or other basic shelters that many refugees are forced to live in. Patterns of mobility and lifestyles have changed, and both women and men are being forced to redefine core aspects of their identities. However, perceived threats to established masculine and feminine identities have exacerbated the stress that women and men are experiencing, with overwhelming feelings of powerlessness and desperation.

**Women’s changing gendered roles**

One of the main research findings among Syrian refugees and Palestinian refugees from Syria was that women’s sense of self-worth is closely linked to their traditional gender role. This was discussed in many of the focus groups. Although their dependency on their husbands meant that they lacked power in the household and in their community, some women feel threatened by changes to this situation.

“If you are staying in your house and your husband is providing you with all your needs, you will feel like a woman and feel your femininity.”

“In Syria, a house is like a big kingdom: he’s a king and she’s the queen.”

As refugees in Lebanon, most women in focus groups reported feeling under pressure to fulfil their principal role as mothers and carers, doing the housework and bringing up children, but they also now need to provide financially for their families. This has affected their gendered identity in two ways.
First, because many families are living in poor-quality accommodation and lack adequate facilities, they are no longer able to provide the quality of care that they were in Syria. According to children in one FGD, 'The bathrooms are in a bad shape, filthy, and it always stinks.' The majority of Syrian refugees and Palestinian refugees from Syria, both women and men, indicated that the accommodation conditions are uninhabitable. As one woman said, 'I suffered for my kids because I now cook in the same room [as where we live and sleep]. They suffocate from the food smell.'

Second, women now need to find money to buy food and other essential items. They are often the ones who go to aid agencies to ask for help because many men reported feeling ashamed to do this. One woman described how women are shouldering all of the burdens, saying, 'Women need to work for their children; they carry everything on their shoulders.'

As well as the increased time burden these new responsibilities present for women, the fact that they are required to undertake activities that are outside of their traditional role makes some women feel that they have lost their gendered identity. Many raised this issue in FGDs, saying, for example, 'The first thing is that our womanhood has disappeared,' and 'Women are now both a woman and a man. There is no femininity anymore, it has gone!'

The changes in family dynamics have led to increased stress for women and men alike. Despite some women reporting a sense of increased empowerment with their new responsibilities, some men resent the changes, which have damaged their self-esteem. Some women described how they have had to deal with their husbands' hostile attitudes, for example: 'Now, after women are working and going to organizations and doing all the work, they [men] start nagging and giving orders.'

**Men’s changing gendered roles**

Men’s traditional gendered role is principally that of provider for the family, and this concept of being the breadwinner is closely linked to men’s gendered identity. However, male respondents from most regions covered by the assessment indicated that they were now unemployed and could find no regular source of income in Lebanon. As well as financial hardship, FGDs with men heard of the psychological damage this had caused.

'I don’t feel that I am a real man after what has happened to me now, and to be honest, I can’t handle it anymore.'

'I am not beneficial, even my wife she can give, she gives her power for the house like cooking, cleaning but I… I do nothing. I just make demands.'

Some male respondents in FGDs regarded themselves as protectors and defenders of the land. The fact that they were forced to leave their homeland has damaged their feeling of self-worth. According to a Syrian key interviewee in Bar Elias, leaving Syria left them with a lot of guilt:

'When Syrian men go to Lebanon, they feel like they are not helping the Syrian people and they let them down.'

'My injury is the only impediment that prevents me from going back to Syria. I refuse to sit at home like women!'

This traditional view of masculinity was also reinforced by women in focus groups.

The assessment showed that men felt they had been put in an impossible situation by the conflict. They had to choose either to leave Syria and seek refuge with their families or to stay but be separated from them. They are worried about family members who remain in Syria and
how they can help the people still there. They also need to protect and provide for their own families in Lebanon, as well as the families of those that are left in Syria.

‘If there were someone to support my family then I would have gone to Syria instead of staying here. Because the men and youth [male] who are staying here are facing a lot of blame from society and questions like, “What are you doing here while your family [people] are dying in Syria?” This kind of attitude creates a feeling of guilt.’

Findings from a number of the focus groups revealed that lower self-esteem among refugee men has, in some cases, led to a negative expression of masculinity. Some participants told how violence towards women and children has increased as men abuse their power within the household. Within Syria and Lebanon, various human rights and women’s organizations have reported high levels of conflict-related violence, including sexual violence, as well as a greater prevalence of domestic violence and child marriage. So, while the crisis has resulted in many men feeling disempowered, abuses of power perpetrated by men over other men, and women and children, are also widespread.

According to a health worker in Tripoli, many ‘men here are unemployed and they sit all day at home, they feel a bit depressed, mad, and they release their anger towards their family and children.’

“When my wife asks me for vegetables or meat to prepare food, I hit her. She does not know why she was hit, neither do I.”

‘Before, we had to fight once a year over a major thing. But here in Lebanon, we fight in an aggressive way just because she said something that I found silly.’

A number of men and women in the focus groups reported that the changes in their gender roles and responsibilities, caused by the crisis, have led to a sense of deep unhappiness. Many women’s workload has increased while men’s has decreased. Both situations are leading to added physical and emotional stress.

According to a Syrian refugee interviewee in one of the Palestinian refugee camps, ‘Housework and chores are about 90 per cent done by women.’ Another women respondent agreed, saying: ‘We have the same responsibilities and now these are doubled because the kids are in the house and there are no schools.’

Compounding this, some women have had to assume the role of provider:

‘If my daughter needs a medical scan, I go round associations to get help because my husband can’t find a job until now. I try to get help for this and for diapers and milk for the young one, while my husband ignores everything.’

At the household level, while women have had to take on a greater role in providing for the family, the assessment revealed that men have not taken on increased responsibility for household tasks or caring for children and other family members. According to all categories of respondents, most male refugees (whether Syrians or Palestinian refugees from Syria) spend their days in Lebanon either looking for work or staying with their friends for support.

‘My husband goes out all day looking for a job.’

“What do you want me to do at home? I stay with men here and we support each other.”
Potential for increasing women’s empowerment

Although many women feel that they have lost their female identity, others felt that taking on a different role also created a sense of empowerment. Some Syrian refugee women in Lebanon are going to market, running errands, making decisions, and some are doing paid work (while, as noted previously, others felt it was too unsafe to leave the home or felt pressure from male members of the household not to go out alone). A number of women in focus groups felt that there were fewer such opportunities open to them in Syria.

‘She told me that right after she started working, she feels stronger than her husband, in a way that she is a woman of her words, she can give her opinion and it matters, she makes decisions and they are always taken the way they are said, she can go out. On the other hand, back in Syria, she could not do anything of what’s already mentioned.’

‘Now I am very free here. My husband tells me you are now going and coming without telling me.’

Women’s extended role can lead to them having more influence over household decisions, as one male respondent described: ‘I didn’t want to put my son in school but my wife insisted.’

However, the potential for longer-term changes to women’s lives resulting from the increased self-confidence that some women experienced is limited, as men still wield more power in the household and, as already noted, some men have reacted to the threat to their traditional gender role in negative and damaging ways, in order to reassert their power.

How humanitarian agencies can help

**Gendered identity**

- Mobilize and engage community stakeholders on gender roles and associated inequalities (e.g. religious leaders, faith-based groups, focal points in municipalities);
- Provide gender-awareness raising and training for all organizations working with refugee communities, including integrating gender equality priorities into all programmes designed to respond to refugees’ needs;
- Learn from local best practice to develop programmes that engage men to address notions of positive masculinities (e.g. men’s forums, sports-related activities);
- Design interventions to address issues of stress, including facilitating access to appropriate counselling services;
- Conduct community awareness-raising sessions for men and women on gender and the kinds of new tools and techniques that they will need to adapt to their hugely changed and challenging environment;
- Organize recreational and art-related activities depicting the perceptions and challenges of gender roles;
- Promote creative use of the media and information and communications technology tools for discussion on positive forms of gendered identity;
- Increase the number of interventions that provide safe spaces for refugees – whether women or men, girls or boys – to reflect on changes in their social identities.
CHANGES IN LEVELS OF GENDER-BASED VIOLENCE, PROTECTION, AND EMOTIONAL STRESS

Protection and security

Syrian families and Palestinian families living in Syria fled their homes because their lives were in danger. They were forced to leave, to escape the destruction all around them. Many focus group participants mentioned that girls and women were at risk from harassment and kidnapping by armed groups and other forms of violence in Syria. Widespread human-rights abuses have been reported by the UN and other human-rights organizations. According to one FGD with men, ‘a lot of rape occurred in Syria, but no one can tell anyone about them.’

Men also reported that the decision to leave Syria with their families was driven by their gendered role as protector.

‘In Syria, we all decided to come here because we could not protect our children and wives after the bombs started to get close, after it hit my neighbour. I could not bear the thought to see one of my children disabled for the rest of his life because of what’s actually happening.’

However, although they are now in Lebanon, participants in almost all regions covered by the assessment felt that their safety and security was still under threat. Although many Lebanese people have been very generous towards the refugees, during FGDs, many participants reported having experienced heightened racism, discrimination and hostility from some members of host communities.

Some women respondents felt that Lebanon is more secure than Syria, but they still face constant threats.

‘We don’t feel safe at all; we don’t know at what minute they might ask us to leave. Not just that… in the [Palestinian refugee] camp there is no safety.’

‘Everyone is armed, they usually shoot at each other, they fight each other… If any family problem arises here they go out with the weapons.’

Women in many areas also fear kidnap, robbery, physical attacks, and sexual harassment from Lebanese men. This is particularly acute for widowed or single women. In one FGD, in Middle Bekaa, a participant described how she publically faked calls from her husband – pretending to still be in touch with him – to protect herself from harassment. According to a case manager working with Syrian refugees in Middle Bekaa, ‘Syrian women refugees hide the fact that their husbands were killed or kidnapped. The reason behind this is that they fear being more vulnerable and being harassed by some members of the hosting community. Women tend to fake phone calls, pretending that they are still communicating with their husbands.’

The same issue was discussed in a focus group in another Palestinian refugee camp, where a widowed woman described her situation: ‘There is no safety here. If one of my girls is late, I worry a lot. There is no safety because we don’t have our men. Usually men provide safety and security for the family and my girls.’
'The hardest part of the journey was when I had to submit our papers to the Syrian soldiers at the final checkpoint. I had to take all my children, and they are all small, to see the soldiers. There was no one to help me. I was holding Abdallah (5) and the baby, while the other three held onto my dress. It was very hard, especially as no one knew each other on the bus and everyone was very scared and trying to take care of their own family. It was very hard, very tough, very crowded and there was no one to help.

'We were travelling through the night and arrived at the border at 4am. For a woman to leave Syria, she has to have a permit from her husband. I had no permit as my husband was in Lebanon. They kept asking me, “Where’s your husband? Where’s your husband?” I was too scared to tell them he was already in Lebanon and said he was in Syria. My cousin had written a letter like a permit but they wouldn’t accept it. I was really frightened that they wouldn’t let us cross the border and then a driver convinced them and we were able to cross. We were there for about three or four hours. At the Lebanese checkpoint there were no problems. It was very easy and smooth.

'I have five children, three boys and two girls. One of my children is disabled. We took him to hospitals in Syria, but they said there was nothing that could be done.

'The only thing that hurts me now is how we are living and the condition of my son, Abdallah. If I go out I have to carry both Abdallah and the baby. I wish I had a wheelchair for him.'

A 27-year-old woman in northern Lebanon told of her journey from Syria with her children. She has now received a wheelchair from Handicap International for her disabled son and cash towards rent costs from Oxfam in May and June 2013.

Many Syrian men that took part in the study have also suffered from the effects of constant uncertainty and intimidation.

'When we first came to Lebanon, no one helped us or told us what to do or where to go. I was literally like a little kid who lost his mother. We were terrified.'

One of the main concerns expressed by men participating in the survey is the sexual harassment their wives and daughters are facing, and that they have no protection from this.

'Some men are breaking into houses while the men of the house are not in, and harassing the girls and women living there.'

'This is not in our country and we can’t fight with anyone to protect our family’s honour, because if we do so we will be putting ourselves and the refugees in danger.'

As noted above, some women refugees (whether Syrian or Palestinian refugees who were living in Syria) avoid going out because of security concerns and fears of sexual harassment. The mobility of children and teenagers is also restricted for these reasons. In one Palestinian refugee camp, boys and girls in a focus group said that:

'No, we don’t go to the supermarket. You never know what happens. There might be a fight and they start shooting at people. There is always this terror in our hearts. We feel as if we are still in Syria.'

Girls are particularly vulnerable to sexual and verbal harassment. Many female focus group participants (both women and girls) from the Bekaa Valley in eastern Lebanon and from the Palestinian refugee camps talked about this problem, and explained that parents are reluctant to allow their daughters out, even to get to school. In one Palestinian refugee camp, participants described their feelings of insecurity.
‘It happens a lot to us girls and we don’t like to tell anyone because we are afraid, because they would talk bad about us in the neighbourhood. I told my mom but she told me not to go to these places. We don’t go out after 5pm.’

‘In Syria, [until the war started] I allowed my daughters to hang out with their friends, with their brother until 1am. In Lebanon, I can’t let them go outside the building alone because there is a lot of sexual harassment, especially against the Syrian female refugees.’

Refugee boys and girls are also being bullied and now fear hostility from some members of the host communities. People also fear that their children will be kidnapped or that they will get lost.

‘There are a lot of people who might hurt me, so I go out with someone, with my father if I want to go out.’

‘When we go out to run errands there are some people who curse and use bad language. For example, often, if a Syrian is walking, a Lebanese person would come up and cause him trouble, saying things like, “This is my country.” This happens a lot.’

Many male Syrian refugees and Palestinian refugees from Syria raised concerns about the harassment people face in Lebanon, but in the majority of FGDs, this harassment did not appear to be as much of a source of stress for men as it was for women.

‘There are some armed Lebanese people around the block here but they are not harassing us and we are not bothering them, so this is not causing a major problem, although this phenomenon scares us.’

Elderly men and men with disabilities are acutely vulnerable because of the unsafe environment they are living in.

‘I cannot sleep, I cannot work, for security reasons I can’t go out. There are weapons and all the men that you are seeing outside, they have weapons, and the Lebanese people in this area also they have weapons. How you want me to feel safe?’

Almost all respondents explained that before the crisis, Syria was a safe country. As one of the participants in a women’s FGD explained, ‘We used to go out at night in Syria before the crisis, and we came back at night, and we used to leave kids at home.’ However, since the outbreak of the conflict in Syria, refugees have been unable to find safety.

**Early marriage**

Entering into marriage, including early marriage, is seen by some as a way to protect women and girls in emergency situations. However, some respondents described how early marriage was a common practice in Syria even before the conflict. A Palestinian refugee from Syria who is currently staying in one of the Palestinian refugee camps told how a young woman would be considered a spinster if she had not married by the age of 18. Several of the focus groups discussed how early marriage of daughters has been used as a coping strategy by Syrian refugee families in Lebanon, who are struggling financially. One woman told of a case where a woman gave her daughter in marriage to a man so that he would pay her rent. Others described how some parents saw early marriage as a way to make their daughters safer.

‘...they are marrying them young to protect them. The parents no longer guarantee that they will live long so they say let’s just “nustur” [“protect the daughter’s honour”].’

An individual interviewee in Tripoli also described how a woman he knew had arranged for one of her daughters to marry a much older man and planned to do the same with her second daughter, so that they would be safe and to maintain the family honour. In one focus group with girls, participants reported of a case where a 15-year-old girl had married an older man so that he would help support her family; this was described as common practice by a focus group of boys and girls in the Bekaa Valley.
Mobility

Although security was good in Syria before the conflict, many women who participated in the research explained they had some restrictions on their mobility in their home communities in Syria (mainly rural areas and the outskirts of big cities, like Dora, Homs and Hama) due to cultural norms. They were generally only allowed to leave the house with permission and when accompanied by men. Although the picture is clearly mixed, movement of female refugees continues to have some restrictions in Lebanon, mainly because of insecurity and cultural norms. However, as previously noted, other women have gained more freedom as their household duties, and sometimes paid work, take them outside of the home.

Despite being afraid for their safety, some women have to go out, in order to collect aid coupons and exchange them for food and other items at local markets.

Among some refugee families in Lebanon, women’s mobility inside the household is restricted, such as when unknown men come to visit male family members. This was also the case in Syria, although women tended to go inside and stay in their rooms in those situations. Because houses in Lebanon are smaller and more crowded, they can no longer do that. Women tend to go to their female neighbours until men separate the room with bed sheets. Women can then stay unseen behind these dividers.

‘I want to tell you, when my brothers’ friends come over, we go to the neighbour’s. For them to have their space, so the same thing we did in Syria you are doing here. The only difference is the style of housing, it is small. There, we would just go to our room. But here we go to the neighbour’s. It is this thing to separate the space that is complicating it.’

For privacy, women and young girls, even inside the house, wear their headscarves (hijab). Respondents described how they were required to wear them all the time, even when sleeping, because of the overcrowded nature of their accommodation.

‘There is no privacy in the house. I always have to wear my veil all day long until I go to sleep, and the ladies sleep in a room and the men in another.’

Stress and anxiety

Stress and anxiety affects all Syrian refugees and Palestinian refugees from Syria, but the nature of vulnerability to stress and how people express and deal with it is highly gendered. Some female and male refugees are suffering in silence because they think that there is nowhere they can go to talk about how their feelings of stress and anxiety are affecting their lives. As one young girl in Taalabaya said, ‘Yes, people are bored and frustrated. But we are all keeping it in our hearts’. Other refugees described the informal mechanisms used to try to cope: ‘we try to find people that face the same problems and share with each other… so we support each other in one way or another.’

In fleeing Syria, women and men alike lost many things they used to take for granted, not least privacy in their own homes. Some women reported feeling this loss acutely because they prioritize the needs and wellbeing of their husbands and children above their own.

They are now more likely to face sexual and verbal harassment outside the home, which also increases the strain on them. Unmarried and widowed women or others travelling alone feel particularly vulnerable in their new environments.

Men’s vulnerability to stress is also multidimensional. They have lost their traditional role of provider and protector, and now also face threats and discrimination from host communities. The stress and anxiety they are experiencing sometimes erupts into anger.
‘There is tension and there is fatigue. When a person moves to another country, there are a lot of things that are missed, sleeping and rest and everything. If you are not mentally comfortable, you are not happy.’

During one of the FGDs in one of the Palestinian refugee camps, some men wept because they could not provide for their families. One man said, ‘On Mother’s Day, which is supposed to be a festive day, we were all sad and mad. I went out of the house because I had no money to buy my wife a gift. We are not getting decent work to keep our daughters and wives in appropriate decent clothing.’

Some respondents indicated that boys and girls aged between 11 and 16 are facing a number of problems. Refugee children are not going to school, and young boys and girls face harassment, especially when they try to find work in the informal labour market.

‘Kids have already been through very bad situations; they are already traumatized and are also being exploited at work. They are working at young ages where they shouldn’t be working but in school.’

Handicap International and HelpAge International, through their work in Lebanon and Jordan, have found that older refugees and those with disabilities often face specific risks and are in urgent need of humanitarian assistance. According to the UK Disasters Emergency Committee (DEC), the unaccounted deaths of people in Syria with diabetes, heart conditions, and other chronic illnesses mean that the true death toll of the war is far higher than reported.

Sexual exploitation and abuse

Previous research by the IRC and ABAAD conducted in Lebanon in August 2012 highlighted that some refugee women and girls in Lebanon have resorted to paid sex to earn the money their families need to survive, reflecting the desperate need to earn income. The research acknowledged that ‘survival sex, typically linked to women’s and girls’ desperate need to access income to cover the increased cost of living since arriving in Lebanon, was identified as a type of violence frequently experienced by Syrian women and girls.’

Experience has shown that sexual exploitation and abuse of vulnerable people is a global phenomenon, although the risks are exacerbated during humanitarian crises. FGD participants did not mention the issue explicitly, although one individual interviewee alluded to it. While the individual made no specific allegation, the comment is a reminder of the perceived unfairness in beneficiary targeting and of the risks that women may face when seeking support:

‘And if you want other help from other NGOs you should send you daughter or your sister or sometimes your wife… with a full make-up so you can get anything… I think you understand me. And I can’t sell my honour even if I will die from hunger, me and my family.’

How humanitarian agencies can help

**Emotional and physical security**

- Facilitate access to counselling services for men, women, boys, and girls, including mental health services targeted at men, such as anger and stress management workshops;
- Ensure efforts to draw attention to the situation of women who are forced to engage in paid sex in order to earn an income, or women who face exploitation or gender based violence, do not contribute to negative stereotypes of Syrian women
- Increase interventions that promote the active participation of women and adolescent boys and girls in community activities;
• Organize community awareness-raising activities, including the development of culturally sensitive information and education materials on women and girls’ rights (including protection from sexual harassment and early marriage) and other protection issues for women and men;

• Build the capacity of care providers on clinical care for sexual assault survivors, gender-based violence case management, and caring for child survivors;

• Promote joint activities with refugee and host communities (e.g. discussion sessions, summer camps, carnivals, etc.) to promote tolerance and non-violent dialogue;

• Conduct community safety audits to further assess the security situation. Establish community protection mechanisms, including support to women’s groups and capacity-building programmes for women to protect themselves;

• Sensitize and engage relevant community stakeholders and actors in the security sector to install appropriate gender-sensitive security measures, including mechanisms to control small arms proliferation;

• Work with relevant actors to promote the protection function of Lebanese law enforcement bodies towards Syrian refugees and Palestinian refugees from Syria;

• In coordination with local people, encourage local authorities to implement measures that will provide physical security to refugees in collective settlements, and ensure efficient implementation of security measures in public places such as markets, town centres and other areas frequented by both refugees and host community members;

• Strengthen access to justice for refugees by creating reporting systems, providing education on legal rights, building the capacity of service providers, and providing community outreach;

• Ensure that actors engaged in the delivery of aid receive training on gender equality and the elimination of violence against women, minimum ethical standards, and operating principles. All actors should systematically track reported incidents of sexual violence in conflict, and build capacities on documentation systems and tools;

• Guarantee that all aid agencies, including NGOs, adhere to the principle of zero tolerance on sexual violence and exploitation. They should establish confidential and trusted mechanisms for managing incidents and disclosures from survivors, including proper referrals to specialist service providers. Presence of such mechanisms should be communicated to all refugees;

• Develop and strengthen traditional conflict-mediation mechanisms, such as supporting local leadership bodies that women and men refugees can seek help from regarding harassment and/or inter and intra-community conflict, particularly those related to aid and settlement of refugees in host communities;

• Encourage the UN and national authorities to work together to develop clear policies and guidelines for the protection of refugees against arbitrary eviction from settlements and rented accommodation.
CHANGES IN GENDERED CONTROL OVER RESOURCES

Employment and income

Most male participants indicated that in Syria, before the crisis, they had supported their families by working in trade or agriculture. But, since the uprising and conflict began, their livelihoods have been severely disrupted. According to the most recent data available, unemployment has increased almost threefold, from nine per cent in 2010 to 25 per cent in 2012. Women’s participation in the labour force in Syria has traditionally been low, at 13.5 per cent in 2011, although a huge range of care was provided mainly by women and such figures can mask the true extent of women’s paid and unpaid work, particularly in agriculture. The scale of the conflict, with widespread destruction of livelihoods, is contributing to high, ongoing levels of unemployment.

Lebanon is a middle-income country. According to the most recent data we could obtain, the 2004 Living Conditions of Households Survey reported that unemployment stood at eight per cent, disaggregating to 9.6 per cent for women and 7.4 per cent for men. However, the conflict in Syria and regional instability this has created have had a negative impact on the economy, with annual gross domestic product (GDP) growth falling from 9.3 per cent in 2008 to 1.4 per cent in 2012. More up to date data is unavailable but the economy has deteriorated significantly due to the conflict.

Refugees, whether women or men, have very limited work opportunities in Lebanon. Jobs are scarce and even if people do find work, conditions are poor, with low wages and long working hours, often exacerbated by discrimination against refugees. Participants in the assessment described their experiences of this. One elderly woman told how ‘… my brother found work the other day and at the end of the month, they paid him half of the salary and at other times, he wouldn’t get paid at all. This happens a lot.’

‘Back in Syria I was a car mechanic but I also worked as a taxi driver and we had a small shop selling grilled meat. I was always busy doing something. It’s very hard not being able to work and provide for my family, especially when they are suffering so much. I’ve been looking for work but there are no jobs here. The humidity… it’s not like this in Syria. And the smell! This place smells horrible. I get up at 4am and come out of the room because I can’t take the dampness and smell any longer. I’m not sleeping anyway so I might as well come outside.

‘Even if we look for somewhere else to live it will be too expensive. Anything better would be $350-450 a month. How can we afford that? Even though we are trying very hard to find work, we can’t. It’s an impossible situation. We get water from the tanks outside. We don’t use it for drinking. We were collecting drinking water from a nearby spring but the children got diarrhoea so now we buy bottled water.

‘Our future is in God’s hands: whether we stay here, whether we move, whether we will return to Syria, whether we will die.’

Man in northern Lebanon, living in one room with his wife, his son and daughter-in-law and their four children, for which they pay $150 a month. They received cash-for-rent assistance from Oxfam in May and June 2013.
During the assessment, many refugees talked about how unemployment harms men's self-esteem because providing for their families is an intrinsic part of their assigned gender role. Their feelings of ignominy are intensified by the need to ask for assistance from aid agencies. Many men who participated in the research said they felt ashamed to ask for help, and so collecting aid items and coupons has become women's responsibility. Men want to find jobs rather than ask for aid, and when they cannot do so, they feel frustrated and helpless. As one key interviewee described:

‘... men are letting the women go pick up the food aid because they feel ashamed waiting for these boxes. They want jobs which would help with providing for their families. They do not want the food parcels, they want jobs, which are more important for Syrian men than a box of food.'

When men cannot find work, women and young boys are forced to look for work. They, too, find this difficult. Even people who had some assets to use when they first arrived have struggled to make a living, and have experienced discrimination:

‘I set up a restaurant here once to sell falafel and hummus, but the minute they knew we were Syrian, no one bought from us. I paid a lot of money for the property and opened it. I had some money when I first came. The restaurant was very clean and I'm very good at cooking, I thought it would be a good idea to stand on my own feet and not keep going to different aid organizations.'

Most participants in the assessment reported that control over household finances was traditionally a male responsibility in Syria, although some husbands (Syrian and Palestinian) allowed their wives to manage household expenses. One woman described her own experience: ‘I used to handle it, he gives me money and I divided it up between expenses.' In other cases, men would earn the money and also decide how it was spent. A girl in Middle Bekaa described her family's situation: ‘My father gives mother his pay, and [tells her] whatever we need, she goes and gets it.' However, in both situations, husbands retained the overall decision-making power, as they would choose how much control to give to their wives. Although family incomes are now much reduced, around 85 per cent of participants (male and female) in the assessment confirmed that men have largely maintained control over household incomes and decision-making. Financial assistance from humanitarian agencies is often paid directly to men as heads of household, and they decide how it is spent, although women are sometimes responsible for purchasing the items and may receive distributions of non-cash items.

‘We, as family leaders, we used to control everything – finance, permissions for children or wives – and we are the decision makers, even in Lebanon.'

**Food**

Most refugees participating in this research said they do not have enough food to eat. About 90 per cent of women participants in the FGDs confirmed that a common coping mechanism is for women to cut down on their own food intake to prioritize children and men's access to food.

‘Sometimes we cook and the food is not enough for everyone. In that case, the kids would eat first and the men too. We usually all eat together, but priority is for the kids. Priority is also for the men, and then we eat.'

Syrian refugees receive coupons from UN agencies with which to buy food, but many male respondents reported feeling embarrassed by this form of support. They also said that the coupons are insufficient and that their use is restrictive.
‘[C]oupons are not good because we don’t have access to all the markets and it is far from here, and we can use the coupons only in specific markets. We can’t buy meat or chicken from these markets and the stuff we can buy, it is so limited.’

Women told how they managed this situation by selling the coupons and using the money to buy what they need.

‘Without the social aid, we would be destroyed. I sell these cards to people and get 60,000 LBP [approx. $40] and I go to any cheap shop to get my stuff. I need to pay for kids’ school, electricity, gas, oil.’

In the areas of Lebanon where refugees from Syria are living, there are no major cultural differences in terms of eating habits. However, eating habits have changed because refugees cannot afford to buy the same quantity and variety of food as they did in Syria.

‘From what I know, usually in Syria, families used to make large amounts of food. But now women calculate what they can eat and cook to ensure they have enough food for the entire family.’

**Accommodation and housing**

Given the relatively small population of Lebanon, and large influx for refugees, there is increasing pressure on the ability of host communities and aid agencies to provide refugees with support. As a result, many refugees are being forced to rent garages, partially-built houses or rooms in shacks, or to share with other families in one room, with the inevitable discomfort and stresses such living conditions entail. Other refugees are forced to live in tents.

One of the biggest changes facing refugees is adapting to the conditions in which they and their families now live.

No respondents reported renting property in Syria. Instead people mainly lived with their extended families, with property ownership registered in the name of the husband or his father. As one said, ‘I used to own a house in Syria – five rooms.’ Women explained that houses were not in their own names: ‘… the house was in the name of my husband.’

As refugees who have lost their homes in Syria and live in rented flats, tents or other structures in Lebanon, they are no longer always able to have their children and grandchildren live with them.

In Lebanon, refugees are likely to be paying high rent for poor-quality accommodation or to be taken in by relatives or members of the host communities, especially in Tripoli, Middle Bekaa, and the Palestinian refugee camps. During an FGD with men in Tripoli, some described how they were renting rooms with no electricity and high humidity; FGDs with women in Middle Bekaa and Chatila heard how between 15 and 20 people were sharing one room.

‘We are living in one rented room, with my brother, and we are 20 people in the house.’

In Lebanon, high rental costs put an additional burden on refugee families who now find themselves impoverished. The rent is sometimes paid from remittances or by borrowing money. One 15-year-old boy described his situation, saying, ‘I work but my auntie sends me money to pay for the rent.’

Both women and men’s FGDs mentioned the need for boys (aged 12–18) to work to earn rent money, with one man saying, ‘The rental is paid by my son,’ and one woman explaining, ‘My son is taking care of the house expenses.’
Some men and women respondents indicated that aid agencies used to cover the cost of rent, but expressed concern that in some cases this support has been discontinued without explanation.

‘Previously, there was an organization that would help us out, but they stopped 3–4 months ago.’

The increase in rental prices is also affecting poor Lebanese families, many of whom are struggling to cope with rising costs.

All respondents indicated that the facilities they have access to as a household (such as drinking water and sanitation) are far more limited than they had previously in Syria. These issues are discussed in more detail in ‘Access to water, sanitation and hygiene facilities’, on page 26.

**How humanitarian agencies can help**

*Employment and income*

- Design programmes based on a mapping of local capacities among refugees, including assessment of women and men’s knowledge, education, skills, and livelihood needs. Share the analysis among humanitarian actors across sectors;

- Promote equal access to and benefits from income-generating programmes for women and men. Ensure that such programmes do not perpetuate gender-based labour discrimination but provide equal opportunities, including in non-traditional livelihood areas;

- Carry out gender-disaggregated monitoring and evaluation of all programmes and track the impact of programmes on women and men to enhance learning on increasing women’s economic empowerment and equal access to economic resources;

- When designing cash transfer programmes, incorporate learning from previous research on the impact of cash transfers on gender equality. Cash-transfer programmes should target women as well as men;

- Ensure that women are not overlooked in targeting due to levels of literacy, assertiveness, or restrictions in social structures;

- Ensure that there are special provisions for widows, divorcees and other groups of women (such as women with disabilities and female heads of households) who may be especially vulnerable in predominantly patriarchal societies;

- Ensure that livelihoods programmes integrate protection concerns for women, men, and children, including targeting income-generating activities at families at risk of adopting harmful coping strategies such as early and/or forced marriage of daughters, or sexual exploitation;

- Where possible, actively seek alternatives to the current coping strategies being used to address risks of sexual abuse or harassment of women and girls (such as limiting their movement outside the home and taking girls out of school), which reinforce conservatism;

- Work with women’s organizations and gender specialists to ensure community mobilization and participation in programme design. Work with communities to develop programmes and strategies for addressing the structural drivers of inequality and build on the positive drivers of change;

- Promote awareness, prevention, and confidential and trusted mechanisms for reporting on safeguarding of vulnerable women, men and children, including specific measures to prevent sexual exploitation and abuse of beneficiaries. The presence of such mechanisms should be communicated widely.
Rent and housing

• Increase funding for cash-for-rent programming, with special consideration for widows, divorcees, and other vulnerable groups;

• Urgently address housing needs and privacy concerns – for example, by providing financial and technical assistance for repairing those properties housing refugees. Mobilize international agencies and governments to develop mid- to long-term housing strategies to meet the needs of refugees likely to be in Lebanon for some considerable time;

• Work with the Lebanese government to regulate and monitor manipulation of prices and to standardize rent fees for refugees and Lebanese people;

• Work with the government to ensure equal shelter provision for refugees throughout Lebanon and to set regulations and procedures to ensure standardization within the framework of the House Renting Code.

GENDERED ACCESS TO AID AND SERVICES

Access to water, sanitation and hygiene facilities

Participants in the gender situation and vulnerability assessment reported that although most women had limited control over household finances in Syria, they were predominately responsible for the use of water for domestic purposes (e.g. washing, cleaning etc...). Most Syrian women refugees reported having had access to safe drinking water and modern washing facilities in their homes before the conflict began. In Lebanon, refugee families (whether Syrian or Palestinian refugees who were living in Syria) do not have access to such resources.

‘For me, I am currently staying in a house with furniture and a washing machine. But now, after the machine broke down, we have to wash our clothes by hand. In Syria, we had an automatic washing machine, and I didn’t worry about laundry.’

Most refugees have no washing machines, and the drudgery of washing by hand was a common complaint. One girl in Chatila refugee camp complained, ‘We are living in a place that is overloaded with mice and cockroaches. We do our laundry by hand no washing machines or even detergents for that matter.’

According to one female key interviewee, refugee women in Lebanon are now responsible for getting water for their families.

According to respondents, when they were in Syria, many families had free and unlimited access to a safe water supply.

‘In Syria, it was from water tank from the government. It was pure and clean.’

But now that they are living in Lebanon as refugees, they report that they often only have access to unsafe drinking water.

‘Water here is so bad, the artesian well water is calcareous water but in Lebanon the level of lime in the calcareous water is so high, plus there is a leak of sewage that pollutes and affects the artesian well water. Many times we got infected because of the polluted water. Now we are buying the drinking water.’
However, another respondent from the same region commented that, ‘even the water that we buy is bad and caused problems.’

Water and sanitation services and infrastructure in Lebanon, already in need of investment before the Syria crisis began, are struggling to cope with new demands. The lack of such services, together with poor hygiene practices, has serious repercussions. Many refugees, especially children, are falling ill and have limited access to health care and medicines. The refugees’ chances of moving out of poverty are further reduced if they are too unwell to go out and look for work.

Most Syrian refugee respondents in the areas surveyed in Akkar and Bekaa, as well as Palestinian refugees from Syria now living in camps in Lebanon, indicated that their households did not have improved access to sanitation facilities.

‘The houses we’re living in are in a very bad condition; toilets are always flooded and always stink.’

In the Palestinian camps, even before the Syria crisis began, many households are not properly connected to sanitary sewage systems and when they are, there are frequent failures. Aid agencies used to give vouchers for people to purchase drinking water supplies, but this has since stopped. Respondents described how, ‘…they used to give vouchers but now they aren’t giving any because they say it’s not sufficient’.

The situation is creating widespread health and hygiene hazards for children. There have been serious outbreaks of scabies and lice in some areas, including Middle and Northern Bekaa, due to the dire state of water and sanitation for refugees. According to the Lebanese Ministry of Public Health, more than 110 cases of cutaneous leishmaniasis (or the ‘Aleppo boil’) were diagnosed in clinics in May 2013. In Médecins Sans Frontières (MSF) clinics in Bekaa Valley, 84 cases of diarrhoea were confirmed in April.

Access to education

In Syria, 93 per cent of girls and 94 per cent of boys were in primary school in 2011, while 68 per cent of boys and girls were in secondary school. In 2012, the Lebanese Ministry of Education in Lebanon issued a memorandum instructing all schools to enrol Syrian students regardless of their legal status and to waive school and book fees. According to Save the Children, only 25 per cent of refugee children are attending school, due to space limitations, language barriers, and difficulty accessing school. Boys and girls are being denied their right to education.

In Syria, before the crisis, boys were raised to adopt traditional gendered roles and would usually be studying and working.

‘I was studying and I was in the 7th grade. I also used to work in wall painting and construction. I was never short of work.’

This was true for girls as well, though they would usually be working in the house.

‘We help our mothers to do the household chores like doing the dishes, laundry, cleaning the house, taking care of our siblings, and such.’

Despite becoming refugees, this pattern has continued, but with more boys entering the workforce to help provide for their families. One focus group participant in Tripoli described how she had experienced this in her family: ‘I have a sister who is attending [school]. My brother is 11 but he’s obliged to work.’ Some respondents also indicated that girls are more likely to continue with their education because of the pressure on boys to work.
‘...regarding access to education, there is a difference. Usually, girls learn more than boys because they feel that boys have to go to work after a certain age.’

Even the children who do attend school only do so until the age of 12, after which they may need to work. Although girls are under less pressure than boys to earn money, they still face many barriers to education, as one girl described:

‘Housework was less demanding in Syria. I had more opportunities to study there because the house was quieter and less people were living there.’

The need for many boys to work and, in some cases, support the household has changed the power dynamic between fathers and sons.

‘There is a huge change in the family structure. For example, a father who is 60 years old cannot find a job here. If he has a son who is 18 or 14 years old, then he [the son] has to find a job to pay the bills. In addition, this is something that is causing troubles in the family. The father is supposed to be head of the family, so he gets to a point where it is too much to have a kid paying the bills instead of him.’

Some girls who took part in the assessment were not allowed to go to school because of cultural constraints that prevent them from attending mixed schools. Parents, especially fathers, are reluctant to send girls to Lebanese schools.

‘I didn’t send my daughter because the school is mixed, her father didn’t let her go but she cried and wanted to go.’

Many children are not going to school at all, often because there are none for them to attend.

‘My son is in school. He’s in third grade [at a school] near our house. The other two aren’t getting educated because there are no schools.’

Even when this is not the case, parents are often reluctant to send their children to school because they feel it is unsafe and fear harassment from host communities.

‘Parents are extremely scared and the situation is not very good. Clashes can happen suddenly.’

‘Some Syrian families are not sending their kids to mixed schools in Lebanon, so they won’t have conflicts with the Lebanese kids.’

Those schools that do exist are frequently too far away for children to get to. Transport is limited and expensive, and respondents described how this affected their chances of continuing their education: ‘My school is a long way, so I need transportation as well as pocket money. And the transportation is so hard to find, I have to wait around one hour.’

In other cases, Syrian refugee children are not entitled to attend the schools near them. In some Palestinian camps, UNRWA (the United Nations Relief and Works Agency, who provide assistance, protection and advocacy for registered Palestinians in the Near East) schools are limited to Palestinian refugee children from Syria. Syrian refugees cannot attend them.

‘We are bored. We don’t go to school. We came late so we couldn’t enrol. The Palestinian-Syrian kids enrol in the schools here [in the camp] but the Syrian-Syrian ones don’t have schools for them.’

Some schools in Lebanon teach a different curriculum to those in Syria; as a result, of those children able to attend, some have been placed in lower grades or are struggling to keep up with their peers. One respondent explained some of the differences between the curriculum that students would have been taught in Syria and what they are experiencing in Lebanon: ‘Some schools were giving the students the Syrian curriculum. The problem many Syrian children have
Changing gender roles among refugees in Lebanon

with the Lebanese curriculum is that English and French are usually required and these languages are not taught and used as widely in Syria. Some children drop out because of this, but the majority who took part in the research said that they are not going to school at all.

Access to health care

From the onset of the crisis, the Lebanese authorities made efforts to ensure access to health care for refugees. Since June 2012, however, authorities have said that they do not have the funding to continue these initiatives, which has severely limited the ability of vulnerable populations to access emergency care.

In Syria, 88 per cent of women were receiving prenatal care in 2009 and 96 per cent of women were attended by skilled health staff when they gave birth. However, in Lebanon, Syrian refugees and Palestinian refugees from Syria have very limited access to health care facilities. They often cannot afford what medical care is available to them. According to a survey by MSF in December 2012, 50 per cent of the refugee population was not receiving the required medical treatment because they could not afford it.

This research found that as women are traditionally responsible for the health and wellbeing of their families, they bear the brunt of caring for sick children and other family members. Research participants shared that inadequate access to water sources and sanitation facilities affects them disproportionately and increases their time and work burden. Their personal hygiene suffers, as women bathe less often, prioritizing their children’s need for the limited water supply they have. Lack of access to WASH facilities also affects women’s reproductive health; some respondents spoke about experiencing menstrual problems and infections as a result of not being able to wash properly.

Refugees also have insufficient information about where they can get support. Some respondents indicated that their health situation had deteriorated in Lebanon because of the stress, tension, and anxiety they suffer from.

Aid organizations are providing some services but they cannot respond to all the refugees’ health needs. Pregnant and lactating women and children are among the most vulnerable members of the population and are in urgent need of free health services. According to one of the key interviewees, a health worker in the NGO Najdeh, care during childbirth is now a huge problem, since women cannot afford the cost. This was also raised by a respondent in Akkar:

‘… not all medical services are being provided. My cousin had a baby girl a few days back. We wanted to get medication. We didn’t know how to get it. We went to the dispensary, they said they didn’t have it and they don’t give medication.’

Children are also not receiving the medication and, in some cases, hospital care that they need.

‘In terms of health care, mostly the kids they need medication, glasses and others that are not being provided, and their parents can’t afford it.’

Psychological support is critical for women, men, boys and girls, but is not being provided at all.

‘We did not hear of any centres here that helps the refugees and listens to them or gives them psychological support.’

Another health worker told how common causes of sickness are blood pressure and diabetes.
‘Blood pressure and diabetes are problems seen on a big scale. UNRWA provides the medicines for diabetes. There is also the organization Doctors without Borders [MSF], who provide the medicines for adults.’

Many aid organizations are trying to cover the refugees’ health needs. UNRWA is working to cover the basic needs of many of the Palestinian refugees from Syria who are now in Lebanon, while UNHCR is mandated to support Syrian refugees staying in the Palestinian camps. This has created some confusion among refugees about which agency can support different groups that need medical care and other services.

As in many/most parts of the world, breastfeeding is a common cultural practice among Syrian women. However, it has become more difficult for many women, as due to stress, they struggle to breastfeed. One of the key interviewees, a health worker, told how ‘Many women can’t breastfeed because of the fear and anxiety. There is no difference between breastfeeding for baby males and females.’

**Access to and appropriateness of aid**

At the time of the data collection for this research, food and non-food items (e.g. mattresses and cleaning kits) are the only services that are being provided on a consistent and continuous basis to all refugees through UN coupons. Cash for rent and health services had also been provided, although not consistently. Since March the humanitarian response has expanded into other sectors, such as health and education. Vouchers are frequently collected by women, which they use to obtain food. ‘We, as women, go to the market but we are limited in quantity, quality, and variety. My children come to me asking for food and I cook them basic things like rice of a small quantity.’

Traditionally, Syrian culture does not find it acceptable for young, single women to live alone. However, in Lebanon there are more female-headed households because of the number of widowed or other single women. Two interviewees, both health workers, reported instances where widowed or single women had not received humanitarian assistance because of assumptions about reaching people via family units:

‘Usually, in the shelters, only families stay together. Usually they wouldn’t host single women, they would usually stay with relatives or friends. It is also because socially it is not accepted for a woman to be staying alone.’

‘I know two young women who came alone and they’re not getting any of these benefits. They weren’t able to get anything from UNRWA and they don’t have money to even get transportation and collect food distributions.’

It is usually men who receive cash for rent, as they are registered as heads of households. Single or widowed women sometimes do not receive aid because they are not attached to male-headed households. In other cases, either they or the younger women in their family receive financial assistance, although one focus group discussion participant in Tripoli described how she was not being registered for aid because she was a widow and there were no male members of their household that could be deemed the household head.

‘I’m a widowed woman; they [the aid distributions] are not benefiting me. They are not helping me because I don’t have a husband. My daughter is also a widow and she has five kids and we have no men.’

‘We haven’t received any help so far. I didn’t bring anything with me. How could I? I’m a widow with 7 children and some of them are still very small. It was hard enough travelling
with them with all the shooting and bombing going on. Even if I wanted to bring anything else I wouldn’t have been able to carry anything. I was just thinking of saving my children. ‘Here where we are staying there are many insects, it’s damp and the smell is so bad we can’t sit inside the room for long. When we lived in Syria, before the war, we were very happy but living in this situation is better than living in the middle of a war and all the fighting. Here at least I feel the children are safe.’

Widowed woman in northern Lebanon living with her seven children and two other families in roughly constructed rooms in an open car park area below an apartment block. The three families received help with rent payments from Oxfam in May and June 2013.

There is also a danger that assessments for non-food items, including clothes, are not rigorous enough and will therefore not meet the needs of the beneficiaries. At the time of the data collection in March 2013, respondents indicated that there was an urgent need for women’s personal kits (hygiene pads, underwear, etc.) and baby kits.

‘Most of the supplies are usually targeted for kids and the family. There was no distribution of anything specific such as women kits. It was only distributed once from one agency. But the rest is usually targeted towards kids.’

Female respondents from focus group discussions in Tripoli and Chatila told how the items they were given did not meet their needs. For example, sanitary pads and nappies were insufficient in quantity and also of poor quality, in some cases causing allergic reactions.

‘… the pads they give us are very bad. They tell you it’s more than enough. And be grateful for what we give you. Well, no, it is not good’.145

How humanitarian agencies can help

• Improve co-ordination in the provision of aid between agencies, the Lebanese government, and the UN;
• Strengthen access to services through information and communication mechanisms, including referral systems among aid agencies, to reduce the time beneficiaries spend looking for aid. Reinforce these efforts by continuous research and mapping of services. Consider establishing one-stop service centres (including mobile centres) that provide integrated services (such as legal aid, registration, food cards, health referrals, etc.);
• Promote inclusivity of provision of services, regardless of an individual’s registration status with UNHCR or UNWRA.

Water, sanitation and hygiene (WASH)

• Ensure that programmes are context-specific and meet the different needs of women, men, boys and girls;
• Increase access to WASH facilities, including access to clean water, in ways that have positive health and well-being outcomes for women and address their concerns about privacy, as well as reducing the burden for care and drudgery associated with domestic water use;
• Increase distribution and provision of culturally appropriate hygiene and dignity kits (e.g. to meet women and girls’ menstruation needs).

Health

• Increase information for men and women refugees about the availability of community-based psychosocial care;
• Design educational community outreach actions on sexual and reproductive health and maternal health, including developing information and educational materials, using communications channels such as local TV and radio. Design and delivery of health services must ensure equal access for women. Improved information channels and referral mechanisms must be suitable for both genders;
• Increase the number of mobile health clinics, with a focus on hard-to-reach communities;
• Facilitate special health provision for pregnant or breastfeeding women, older women, and women with disabilities;
• Support investment in basic infrastructure, equipment, and qualified staff for reproductive health services, including delivery and emergency obstetric care services, to meet the needs of refugee women;
• Build capacities of public health staff on: gender sensitization; the identification, prevention of, and response to gender-based violence; clinical care of sexual assault survivors; and first-line psychological aid;
• Lobby concerned stakeholders for the provision of chronic disease medication and resources for acute diseases;
• Standardize minimum criteria for health facilities.

Education and children’s rights

• Undertake additional research and analysis on the availability, access and affordability of education for Syrian refugee children and Palestinian refugee children from Syria (boys and girls), including the social determinants that are likely to affect their access to education (such as early marriage, need to work, and military conscription);
• Consider how resources can be co-ordinated to expand programming to include hard-to-reach boys and girls, with a particular focus on transportation and security.
• Sensitize communities to the importance of girls’ and boys’ access to education, especially in emergencies;
• Mobilize relevant stakeholders (government bodies and international NGOs) to provide an appropriate curriculum for Syrian refugees and Palestinian refugees from Syria;
• Explore effective ways of meeting young boys and girls’ needs through listening to their voices and promoting their participation in programme design. Provide proactive services specially designed for young people that are supportive and based on empowerment principles;
• Promote greater awareness of the risks of illegal child labour, which denies children opportunities to fulfil their other rights, such as education. Support proven mechanisms to promote children’s health, safety, welfare, education and right to play, in line with global law and standards.
4 CONCLUSION

The conflict in Syria continues to cause widespread destruction and human suffering. Since it began more than two years ago, Oxfam’s partners have reached more than 100,000 refugees in Lebanon, distributing vouchers for food and hygiene goods, helping with rent payments, and assisting with clean water, latrines and other public health activities. However, the crisis shows no sign of abating and the levels of need are enormous. The international community must come together to strengthen its efforts to press for a political solution to the conflict, but it must also do more to meet the needs of the estimated 6.8 million people affected by the conflict. It must also support host communities who have been providing generous support to refugees from Syria.

Syrians and Palestinian refugees, who were living in Syria before the conflict began, left everything behind when they fled to Lebanon. They lost their jobs, their homes and control over their lives, and they are still living in fear. Many are suffering from poor health, but cannot get the medicines and health care they need, while many children are no longer able to go to school. Women and men and their children have been subjected to violence and intimidation by armed groups and others, both in Syria and as refugees, and these experiences have led to considerable anxiety, stress, and feelings of powerlessness.

The crisis has led to huge changes in the family structure among refugees. Women, men, boys and girls have experienced and reacted to the crisis in different ways. If the international community is to make an effective response and enable families to recover from the crisis, programming needs to understand and deal with the changing gender roles caused by the conflict, and directly address people’s experiences as refugees.

SUMMARY OF RECOMMENDATIONS

The urgent need for more, and more gender-sensitive, aid

On 7 June 2013, UN humanitarian agencies made their largest ever appeal, calling on donor nations to provide $5bn in additional funding to help millions of desperate Syrians, including Palestinian refugees from Syria, both inside and outside the country. In order to deliver maximum impact through the response, it is imperative that women, men, and children in need of assistance have equal access to aid, and that, when given, that aid is appropriate to their different needs. Aid should also be provided to men, women and children living in host communities, who have often provided extremely generous support to refugees from Syria.

In all areas of the response, knowledge and learning about how to plan and implement effective resources must be recorded and shared among humanitarian actors, and lessons learned from past experience should be reflected in future work. The most effective programmes will be those that incorporate robust gender analysis and outcomes, and are equipped to recognize and respond to the needs of male and female refugees, whether adults or children. Donors must promote the use of gender-responsive funding mechanisms (including the use of effective gender markers) and hold implementing agencies accountable for delivering of programmes that incorporate robust gender analysis and outcomes and are equipped to register and respond to the needs of male and female refugees, whether adults or children.
Designing and implementing programmes for maximum impact

For the humanitarian response to have maximum impact for refugee populations in Lebanon, gender analysis should be built in to all stages of programming and across all sectors. There is a need for closer co-ordination of different responses between agencies, the Lebanese government and the UN, through sector groups and international NGO co-ordination.

Co-ordination mechanisms need a clearer focus on gender in emergency standards and best practices, which goes beyond the current co-ordination focus on gender-based violence. Emergency Gender Networks should be established at national and local levels, with representation from all sectors. There should be clear and attainable gender aims for each sector that are regularly monitored.

Gender specialists should be recruited to support the humanitarian response, including inter-agency resources as necessary. Similarly, the important role of women’s organizations (both Lebanese and refugee groups) should not be overlooked.

Planning and implementation should be informed by gender and diversity analysis, with specific efforts to collect and analyze sex- and age-disaggregated data. Commitment to a participatory approach is essential. Women and girls must participate directly in assessments and decision-making processes, including developing, implementing, and evaluating policies and programmes. Only by ensuring women’s participation can agencies be confident that the response will meet women’s needs.

There is a need to increase understanding of gender issues, including women and girls’ rights, not only among refugee and host communities and their leaders, but also within all organizations working with those communities. Agencies should ensure that all staff receive training on gender issues and that there is a genuine commitment to promoting gender equality through their programme activities. Competent staff members are needed to facilitate this process, which requires time and resources if staff are to be given proper opportunities to understand, question, and internalize learning and principles around gender equality.

Improving access to services through improved communication and referral mechanisms will reduce the time beneficiaries (especially women) spend trying to get assistance. Service provision should be based on an inclusive approach – that is, regardless of registration status with UNHCR – to ensure that the most vulnerable individuals and families receive help. The specific needs of vulnerable groups, including pregnant and breast-feeding women, elderly people, and people with disabilities, need to be taken into consideration in all interventions.

Responding to changing gender norms, values and identities

Programmes with Syrian refugees and Palestinian refugees from Syria need to engage women and men in efforts to explore how the crisis is changing gender identities (both masculine and feminine roles), building on local and regional knowledge and experience of engaging men in such activities. People’s fears of changing roles and gender identities need to be explored in a supportive way, which can be an entry point for changing attitudes to women’s participation in economic and political life and also for changing social norms, such as fewer restrictions on their social mobility.

Programmes should be informed by and utilize refugees’ skills and capacities as well as meeting their needs. Aid organizations, government bodies, and others involved in the response should promote equal access to income-generating programmes and other benefits for women and men. Programmes – including cash transfers – should target women as well as men and be paid to female beneficiaries where necessary to ensure that targeting mechanisms do not
overlook women’s needs due to their literacy levels, lack of assertiveness, or social restrictions on their activities. Special provisions should be made for widows, divorcees and other groups of women who may be especially at risk.

**Providing support to reduce physical insecurity, anxiety and emotional stress**

The appropriate actors and agencies should ensure that refugees from Syria – women and men, boys and girls – have access to counselling services to help them deal with their, often traumatic, experiences and the tensions that changing gender roles are giving rise to, for individuals, families and communities. Mental health services should be aware of men who are may be experiencing a loss of self-esteem.

Promoting joint activities that build understanding between refugees and host communities is important for increasing tolerance, but tools and methods to assess the security situation are needed and such assessments need to happen on an ongoing basis. Development practitioners need to work with others, including government authorities and local leaders, to enforce laws to protect refugees from Syria in Lebanon. Work is also needed to improve refugees’ knowledge of their rights and how they can claim justice.

Short-term interventions should be developed with a view to promoting longer-term empowerment. Agencies need to build the capacity of women and girls and men and boys to claim their rights, and of the government and other national stakeholders to deliver those rights. Assigning leadership positions to women and supporting them to maintain these in groups and committees in all response initiatives will help to create female role models, who will promote women’s immediate needs and also advocate for long-term positive change. Engaging women’s organizations in these and other relevant tasks is essential for achieving such change.

**Ensuring that access to aid is equitable and appropriate**

Distribution of non-food items must meet the different needs of women, men, boys and girls. Programme designers need to be aware of women’s specific concerns – for instance, about privacy – as well as designing solutions to WASH problems that reduce the burden of care for women.

Urgent attention is needed to enable refugee boys and girls from Syria now living in Lebanon to continue their education. Priorities include providing more schools, increasing security for refugees, and making transport more affordable; in addition, there needs to be more research into the factors preventing children from going to school, including the need to work to contribute to family income and coping strategies such as child marriage. Children’s voices must be heard and incorporated into all such programme design.

Protection work must be central to all interventions, from immediate responses (such as addressing housing and privacy concerns) to the longer-term work needed to help people re-establish their livelihoods. It is important to help families seek alternatives so that they can avoid resorting to harmful coping strategies; income-generating activities should be targeted to those who are most at risk of resorting to such strategies.

All actors involved in the response should promote measures to prevent sexual exploitation of refugees and establish mechanisms for safe and confidential reporting of incidents. Humanitarian agencies are also responsible for tracking possible incidents of sexual exploitation and working with survivors in a confidential and sensitive manner to ensure that they have the option of referral to specialist service providers.
NOTES

All URLs last accessed August 2013

4 World Bank data, ‘Births attended by skilled health staff (% of total)’, http://data.worldbank.org/indicator/SH.STA.BRTC.ZS/countries/SY?display=graph
10 ibid.
11 UN Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), ‘Syria Crisis Situation Update (Issue 57)’, http://www.unrwa.org/etemplate.php?id=1847
12 To co-ordinate their response, humanitarian actors and agencies in Lebanon divide refugees from Syria into three categories: Syrian refugees, Palestinian refugees from Syria, and Lebanese returnees. UNHCR is providing shelter for Syrian refugees, UNRWA is administering the response for Palestinian refugees from Syria, and the International Organization for Migration (IOM) has responsibility for assisting Lebanese returnees. Lebanese returnees were not included in this research.
14 UN Security Council Resolution, S/RES/2106 (2013), notes ‘with concern that sexual violence in armed conflict and post-conflict situations disproportionately affects women and girls, as well as groups that are particularly vulnerable or may be specifically targeted, while also affecting men and boys and those secondarily traumatized as forced witnesses of sexual violence against family members and emphasising that acts of sexual violence in such situations not only severely impede the critical contributions of women to society but also impede durable peace and security as well as sustainable development’. http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/2106(2013)
18 ibid.
20 ibid.
23 Social Institutions and Gender Index, op. cit.
24 ibid.
Changing gender roles among refugees in Lebanon


The research originally aimed to cover Muslim and Christian Syrians, but ultimately met only with Muslim Syrians and Palestinian refugees from Syria.

Christian Syrians make up a very small minority of the overall refugee population and, according to local reports, are not present in all areas of Lebanon. However, even in areas of the study where Syrian Christians are present, such as Middle Bekaa, none of the local NGOs who our research focal points contacted were able to provide links to Christian communities and informed us that they do not have any registered with them. This clearly reflects a wider challenge, with local media reporting, for example, that none of the 1,000 Christian Syrians that the Saydet al-Naja Church helps have registered with UNHCR. S. Dockery (2012) ‘Aid options scarce for Christian Syrian refugees’, The Daily Star, http://www.dailystar.com.lb/News/Local-News/2012/Aug-03/183223-aid-options-scarce-for-christian-syrian-refugees.ashx

Participant, FGD with women, Arsal
Participant, FGD with women, Arsal
Participant, FGD with boys and girls, Chatila
Participant, FGD with women, Middle Bekaa
Participant, FGD participant, Tripoli
Participant, FGD with women, Tripoli
Participant, FGD with women, Tripoli
Participant, FGD with women, Tripoli
Individual interview with an elderly man
Individual interview with a man with a disability, Akkar
Participant, FGD with men, Tripoli
Participant, FGD with men, Akkar
See, for example, IRC and ABAAD (2012) op. cit.
Individual interview, Health worker, Tripoli
Participant, FGD with men, Tripoli
Participant, FGD with men, Tripoli
Participant, FGD with women, Middle Bekaa
Participant, FGD with women, Ein el Helweh
Participant, FGD with women, Ein el Helweh
Participant, FGD with men, Tripoli
Key interview with a Syrian male in Bar Elias
Participant, FGD with women, Arsal
Individual interview with a disabled man, Tripoli
Participant, FGD with men, Middle Bekaa (exact location detail removed)
Participant, FGD with men, Chatila
Participant, FGD with women, Palestinian refugee camp (exact location detail removed)
ibid.
Widowed woman, Chatila
Participant, FGD with men, Chatila
Participant, FGD with men, Tripoli

ibid.
Widowed woman, Chatila
Participant, FGD with men, Chatila
Participant, FGD with men, Tripoli
Changing gender roles among refugees in Lebanon

61 ibid.
62 Participant, FGD with boys and girls, Palestinian refugee camp (exact location detail removed)
63 ibid.
64 Participant, FGD with women, Tripoli
65 Individual interview, Boy, northern Lebanon
66 Participant, FGD with boys and girls, Palestinian refugee camp (exact location detail removed)
67 Participant, FGD with men, Tripoli
68 Individual interview with elderly man, Tripoli
69 Participant, FGD with women, Middle Bekaa
70 Participant, FGD with women, Tripoli
71 Participant, FGD with women, Akkar
72 Participant, FGD with boys and girls, Chatila
73 FGD men in Tripoli
74 Individual interview with disabled man, Ein el Helweh
75 Participant, FGD with men, Chatila
76 Key interview with health worker, Tripoli
79 IRC and ABAAD (2012) op. cit.
80 ibid.
87 Individual interview, elderly woman, Arsal
88 Oxfam’s cash-for-rent programme ran for two months only, due to funding constraints. Cash-for-rent was one of the first programmes after Oxfam’s Winterisation distributions and funded by the Appeal and DEC. It commenced in April / May and after the two months, no further funding was available. Oxfam has now completed its cash-for-rent programme and its cash programming is now focused on hygiene and food vouchers only. This is for refugees who are not registered with UNHCR (so is mainly for new arrivals or those who do not want to register). It is possible that another agency may take on some of the most vulnerable people from Oxfam’s rent programme. This was being discussed with UNHCR at the time of publication.
89 Key interview, Bar Elias, Middle Bekaa
90 Individual interview, widowed woman, Chatila
91 Participant, focus group discussion (FGD) with women, Ein el Helweh
92 Individual interview, 11–15-year-old girl, Middle Bekaa
93 Participant, FGD with men, Tripoli
94 Participant, FGD with women, Chatila
Changing gender roles among refugees in Lebanon

95 Participant, FGD with men, Tripoli
96 Lebanese pounds
97 Participant, FGD with women, Akkar
98 Key interview, Najdeh
99 Participant, FGD with men, Tripoli
100 Participant, FGD with women, Middle Bekaa
102 Individual interview with 15-year-old boy, Akkar
103 Participant, FGD with men, Tripoli
104 Participant, FGD with women, Chatila
105 Individual interview with 15-year-old boy, Akkar
107 Individual interview, widowed woman, Chatila
108 Participant, FGD with boys and girls, Chatila
109 Participant, FGD with women, Akkar
110 Individual interview, elderly man, Tripoli
111 Participant, FGD with men, Tripoli
112 ‘Improved’ sanitation facilities refers to adequate access to excreta disposal facilities, that prevent human, animal and insect contact with excreta. See World Bank data, ‘Improved sanitation facilities, urban (% of urban population with access)’, [http://data.worldbank.org/indicator/SH.STA.ACSN.UR](http://data.worldbank.org/indicator/SH.STA.ACSN.UR)
113 Participant, FGD with men, Chatila
114 Participant, FGD with women, Arsal
117 UNHCR (2013) *op. cit.* p. 111
119 Participant, FGD with boys and girls, Akkar
120 Participant, FGD with boys and girls, Chatila
121 Participant, FGD with girls, Tripoli
122 Key interview with health worker in Tripoli
123 Key interview with 15-year-old girl, Middle Bekaa
124 Key interview with Syrian male health worker
125 Participant, FGD with women, Middle Bekaa
126 Individual interview with disabled man, Tripoli
127 Key interview with health worker, Ein el Helweh
128 Participant, FGD with men, Tripoli
129 Participant, FGD with boys and girls, Middle Bekaa
130 Participant, FGD with boys and girls, Ein el Helweh
131 Key interview with health worker, Ein el Helweh
Changing gender roles among refugees in Lebanon


134 MSF (2013) op. cit..

135 Individual interview with single woman, Akkar

136 Participant, FGD with women, Tripoli

137 Participant, FGD with men, Arsal

138 Key interview with health worker, Ein el Helweh

139 Key interview with male health worker, Tripoli

140 Participant, FGD with women, Ein el Helweh

141 Key interview with female health worker, Tripoli

142 Key interview with health worker, Ein el Helweh

143 Participant, FGD with women in Tripoli

144 Individual interview with Syrian social worker, Akkar

145 Participant, FGC with women, Tripoli

146 UN OCHA, ‘Syria Crisis Overview’, http://syria.unocha.org/

147 http://www.bbc.co.uk/news/world-middle-east-22813207

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