



**COUNTRY COMPARATIVE
RESEARCH**

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NORMS AND REFORM

**SOCIAL, ECONOMIC, AND PUBLIC HEALTH DRIVERS OF GBV
AMONG SYRIAN REFUGEES**

LEBANON, SYRIA, JORDAN, AND IRAQ

NOVEMBER 2022

PREPARED FOR ABAAD – RESOURCE CENTRE FOR GENDER EQUALITY BY JAY FEGHALI

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Norms and Reform: Social, Economic, and Public Health Drivers of GBV among Syrian Refugees in Lebanon, Syria, Jordan, and Iraq.

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ACRONYMS

3RP	Syria Crisis Regional Refugee and Resilience Plan
BML	Beirut and Mount Lebanon
DNK	Do Not Know
EVAWG	Ending Violence against Women and Girls
FGDs	Focus Group Discussions
GBV	Gender-Based Violence
GoS	Government of Syria
HH	Household
HOH	Head of Household
IDPs	Internally Displaced Persons
IPV	Intimate Partner Violence
ISF	Internal Security Forces
KI(I)	Key Informant (Interview)
KRI	Kurdistan Region of Iraq
LBP	Lebanese Pound
LGBTQI	Lesbian, Gay, Bisexual, Transgender, Queer, Intersex
MH	Mental Health
NGO	Non-Governmental Organisation
(P)SEAH	(Prevention of) Sexual Exploitation, Abuse, and Harassment
PSS	Psychosocial Support
PWD	Persons with Disabilities
RDPP	European Regional Development and Protection Programme
SRHR	Sexual and Reproductive Health and Rights
S&S	Shelter and Settlements Interventions
SOGIESC	Sexual Orientation, Gender Identity, Gender Expression, and Sex Characteristics
TOT	Training of Trainers
TVET	Technical and Vocational Education and Training
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNRWA	United Nations Relief and Works Agency for Palestine Refugees in the Near East
WASH	Water, Sanitation, and Hygiene
WGSS	Women and Girls Safe Spaces

GLOSSARY OF KEY TERMS

Gender-Based Violence: Ahead of launching data collection exercises, enumerators provided the following overview about GBV to respondents, including those who confirmed they were familiar with it. This ensured that perceptions were sourced from a uniform understanding: GBV takes on different forms, and can include rape or sexual assault, forced or child marriage, denial of education, IPV by spouse (physical, sexual, or emotional), family violence by parents or relatives, violence within collective living settings, economic violence (denial of resources, inheritance, or money, including confiscation of wages), sexual exploitation including sexual favours in return for basic needs or money, such as by a landlord, employer, relative, service provider), sexual exploitation within the humanitarian sector, physical assault, torture, forced pregnancy, abortion, or sterilisation, kidnapping or detainment, public humiliation (including forced stripping), forced prostitution, slavery, or human trafficking, harassment, and/or neglect.

Gender Role Transformation: In order to simplify the concept and unify understanding among respondents, enumerators explained it by providing an overview of the conventional roles assigned to each gender based on social customs and traditions (where women’s duties usually included household chores like cooking, cleaning, and caring for the children or older household members, while men were generally responsible for income-generation, making economic decisions, and disciplining children), and explaining that gender role transformation was any changes to these social constructs for different reasons; for example, women may become the breadwinners because their husbands are unable to find employment, are experiencing restrictions in countries of displacement, or have a disability.

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INTRODUCTION

REFORM PROGRAMME OVERVIEW

ABAAD intends, through its “*REFORM: Towards a strengthened quality response and inclusive and dignified durable solution for GBV survivors in Lebanon*” project, to strengthen national systems capacities to enhance protection and mitigation of gender-based violence (GBV) against women and girls in Lebanon among Syrian refugees and vulnerable host communities, and to contribute to supporting vulnerable groups in displacement situations to be capacitated and empowered to move out of dependency on aid and choose a durable solution, as appropriate.

SCOPE OF STUDY

BACKGROUND AND OBJECTIVES

Findings from a 2019 GBV Assessment conducted by ABAAD¹ concluded that while the patriarchal Syrian society in itself presents different types of GBV in both socio-political and family spheres, displacement and war conditions have exacerbated the risks to women and girls. The report also found that the main types of GBV perpetrated against women and girls in Syria were Child Marriage, Sexual Violence, and Physical/Domestic Violence, among others. In light of this prevalence of different GBV types within Syrian communities, it is important to understand the drivers of GBV that Syrian communities are at risk of before they seek refuge to best design prevention and response GBV programming in addressing contributing and risk factors. Furthermore, such baseline can inform behavioural change mass communication messaging in addressing misconceptions related to refugees and displacement.

The overall goal of this research study was to understand social norms and drivers, in addition to COVID-19 and economic factors associated with the perpetration of GBV among Syrian refugees primarily in Lebanon, while including a basic comparative aspect on the situation in Syria, Jordan, and the Kurdistan Region of Iraq (KRI).

In specific, it focused on:

- Formulating a comparative analysis of social norms and drivers of GBV in Lebanon, KRI, and Jordan versus Syria
- Investigating the effects of COVID-19 and the economic crisis in relation to GBV practices among Syrian refugees
- Understanding possible changes in GBV practices among Syrian refugees in Lebanon (including pre-departure situation), in comparison to practices in Syria (which aims to inform key target areas of programming)
- Scoping out whether and how shifts in gender roles and family dynamics affect GBV trends
- Formulating recommendations, informed by research findings, that detail key entry points and programmatic focus areas to address GBV among Syrian refugees, particularly women and girls.

¹ ABAAD, 2019. “*Gender-Based Violence in Syria: Rapid Needs Assessment.*”
<https://www.abaadmena.org/documents/ebook.1579886028.pdf>

METHODOLOGY

DATA SOURCES

The methodology for this research combined both secondary data review and primary data collection. Primary data was collected between September 10 and October 4, 2022, by 16 experienced field researchers (9 female and 7 male). Informed consent was collected ahead of conducting any interviews.

Desk Review: During the inception phase, the consultant conducted a secondary data review of relevant studies centred around refugees, GBV, and contributing factors in Lebanon, Syria, Jordan, and Iraq. Reviewed documents informed the development of the detailed research methodology and the tools to be mobilised. Some excerpts are also included in the report.

Household Surveys (311 interviews, 171 females and 140 males): This element of data collection relied on a mixed method tool, which was mainly quantitative supplemented by qualitative follow-up questions. A total of 12 researchers across the different target governorates in Lebanon (Bekaa, Beirut and Mount Lebanon, North, and South) completed 311 interviews, where 55% of the respondents were female (with 10% adolescent girls) and 45% were male (with 14% adolescent boys). The overall age range among females was 15 – 77 years old, with an average age of 35. Among males, the age range was 12 – 81 years old, with an average age of 36. The average age across both the female and the male adolescent samples was 16. Researchers conducted fully random sampling through door-to-door interviews with Syrian refugee households who consented to the interview.

Focus Group Discussions with Syrian Refugees (12 FGDs; 4 women, 2 girls – 4 men, 2 boys): This component relied on a semi-structured interview tool that aimed to obtain further qualitative information from women, girls, men, and boys to triangulate findings from the quantitative surveys and key informant interviews. A total of 47 women, 14 girls, 40 men, and 16 boys participated in the 12 sessions.

Key Informant Interviews with Local and Regional Stakeholders (23 interviews: Lebanon 11, Syria 5, Iraq 4, Jordan 3): This source of information applied purposive sampling and focused on collecting the feedback of GBV front-liners and stakeholders (17 female and 6 male). The research originally aimed to collect data from Lebanon and complement findings from secondary data review for the other three countries. However, during the inception phase, in order to obtain a comparative aspect with updated and new information, the consultant and ABAAD agreed on expanding the scope to also collect data directly from stakeholders in Syria, Jordan, and Iraq. It is important to mention that almost all Syrian refugees (99%)² in Iraq reside in the Kurdistan Region (KRI), so targeted stakeholders were exclusively from KRI.

Systematic Debriefing of Enumerators: Semi-structured conversations with field researchers, which aimed mainly to cover information gaps and allow them to share any feedback, observations, and limitations. This element was crucial to validate the findings of the research and the compliance of data collection with ethical principles.

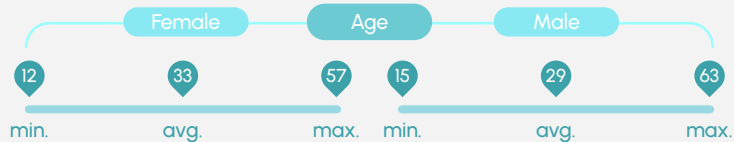
² ACAPS, 2022. "Iraq – Humanitarian Access Overview." <https://www.acaps.org/country/iraq/crisis/syrian-refugees>

Focus Group Discussion Sessions

12 Sessions

61 Female Respondents

56 Male Respondents



Social Status

Female

Male

Single 30%
Engaged 2%
Married 56%
Divorced 5%
Widowed 8%

Single 48%
Engaged 0%
Married 50%
Divorced 0%
Widowed 2%

Location

Female

Male

Bekaa 26%
BML 44%
North 18%
Saida 11%

Bekaa 29%
BML 16%
North 23%
Saida 32%

Occupation

Adolescent girls

Adolescent boys

Studying 71%
Working 7%
No occupation 21%

Studying 25%
Working 56%
No occupation 19%

Adult females

Adult males

Studying 6%
Household care work 83%
Tailors 6%
No occupation 4%

Studying 5%
Working 78%
Volunteering 3%
No occupation 15%

Key Informant Interviews

48%

22%

17%

13%

Lebanon

Syria

KRI

Jordan

Household Surveys*

311 Surveys

♀ 55%

Female (10% adolescent girls)

♂ 45%

Male (14% adolescent boys)



16

Average age across both the female and the male adolescent samples

134

Bekaa

47

BML

86

North

44

South

71 ♀

♂ 63

18 ♀

♂ 29

58 ♀

♂ 28

24 ♀

♂ 20

Female Respondents | Demographics

71 Bekaa

6% Minor

94% Adult

18 BML

33% Minor

67% Adult

58 North

3% Minor

97% Adult

24 South

21% Minor

79% Adult

Male Respondents | Demographics

63 Bekaa

16% Minor

84% Adult

29 BML

17% Minor

83% Adult

28 North

0% Minor

100% Adult

20 South

20% Minor

80% Adult

Social Status

Female

Male

Single 15%
Married 71%

Divorced 5%
Widowed 9%

Single 30%
Married 69%

Divorced 1%
Widowed 0%

*Further demographic details in relevant section below.

CHALLENGES AND LIMITATIONS

General survey fatigue among Syrian refugee communities. Several individuals who were targeted for interviews (both some who declined and others who consented) noted that they had grown weary of responding to surveys which “yielded no personal benefits” (such as an incentive or direct assistance) or results (such as interventions that would improve their living conditions).

Governorate	Research Targets	UNHCR 09/22 est.
Bekaa	43%	39%
North	28%	28%
BML	15%	22%
South	14%	11%

Door-to-door random sampling provided added value in extracting refugee perceptions, but created challenges in achieving set targets. The quantitative surveys aimed to target Syrian refugees based on UNHCR figures of residents per governorate. In an attempt to capture actual perceptions among households, the research team targeted respondents through door-to-door random sampling instead of using ABAAD beneficiary lists. While

this provided a crucial added value to extracting findings, it simultaneously posed some challenges: i) it was difficult to access informal settlements without using ABAAD as an official intermediary, and ii) numerous households declined participation, particularly in BML where residents had security concerns. The latter point was addressed through increasing samples in Bekaa and the South, taking into account time constraints and respondent willingness to participate.

Difficulty in reaching youth respondents. In adherence to child protection principles, all researchers attempted to obtain parental consent ahead of speaking to any minors below the age of 18. In general, a large number of caregivers refused to allow their children, especially daughters, to participate in the survey when they learned that it would be dealing with GBV. Accordingly, adolescent representation (ages 12 to 17 years old) is 10% of the total number of female respondents, and 14% of male respondents.

Some challenges discussing “taboo” topics. Quantitative surveys did not require the express mention of the LGBTQI community, and enumerators did not read out choices, so inclusion relied exclusively on being mentioned by the beneficiaries themselves. However, while there was a specific axis requesting details on challenges faced by LGBTQI groups in the community FGD tool, researchers in the North requested to exclude the component because they had faced challenges discussing it in the past. Additionally, during debriefing sessions, some enumerators mentioned that they had observed a certain level of discomfort when discussing certain GBV-related topics, particularly during the KAP survey section, where a sizeable proportion sometimes opted to remain neutral or to decline responding.

KI requests for anonymity limiting ability to attribute quotations across the research report. During interviews, several extreme issues and concerns were raised “off the record” and could accordingly not be included in this report. Additionally, a significant proportion of KIs requested that some or all their quotes not be attributed to them in order to avoid possible consequences due to the sensitive nature of the thematic areas of this research. In order to ensure the highest level of confidentiality and to safeguard respondents, none of the KI quotations across the report include staff positions or organisations.

Exclusion of cholera due to outbreak occurring following data collection. The Lebanese Ministry of Public Health reported the first cholera outbreak in nearly three decades on October 6, 2022, which came after the completion of data collection for this research. Accordingly, findings are restricted to COVID-19 as the main public health challenge nationwide. For information on “Protection, GBV, and Gender Considerations in the Cholera Outbreak in Lebanon,” please refer to the [relevant note published by UNHCR on October 31, 2022](#).

EXECUTIVE SUMMARY

Key Demographic Findings

Child Marriage

- The average age across the sample was 35 years old (range 12 – 81 years). Almost 40% of all respondents had been married below 18, at an average age of 15. The youngest age of marriage within the interviewed sample was 11 years old, reported by a 23-year-old female and a 34-year-old male. This suggests that early marriage practices have not decreased in recent years. In fact, KIs from Syria noted that while rates had begun to decline, following the crisis, a sharp rise in the practice was observed, largely as an economic or protection-based coping strategy.
- While 17% of the sample reported the marriage of females under the age of 18 in their households, only 7% reported the same for males who were under 18.

Child Labour

- While only 5% of surveyed respondents reported having minors engaged in work, 33% of the 30 youth under 18 who participated in FGDs confirmed they were working. The nature of work included high-risk environments or tasks such as operating dangerous machinery, driving scooters to deliver food (usually without a license), working in agricultural fields, or begging and selling items in the street, all of which expose them to potential violence, including sexual, emotional, physical, and verbal.

Livelihoods and Income Generation

- While the average household size was almost 6 persons, the majority of the sample (72%) reported only one HH member working, and 18% said no members had been able to secure employment. Even among those who had one or two members working, 25% still confirmed their households' main source of income to be humanitarian assistance or help from relatives and friends.

Return to Syria

- Only 9% of interviewed female respondents planned to return to Syria, as opposed to almost one-third of males. A possible justification for women's unwillingness to return was identified from FGDs: those who had gone back for a period of time found themselves in worsened living conditions, facing extremely difficult circumstances and different forms of GBV.

Key Findings

- **GBV familiarity and incidence:** 62% of respondents (65% of females and 57% of males) confirmed familiarity with GBV concepts, having predominantly learned about them through word of mouth (48%) or NGO awareness-raising sessions (41%). 83% reported that GBV was occurring in Lebanon versus only 54% confirming that it was taking place in their communities in Syria. However, a notable one-quarter declined to provide a response about GBV incidence in Syria. KIs from Syria suggested that refusing to respond or outrightly denying the existence of GBV could be attributed to fear of being questioned upon return to Syria, acting from a sense of self-preservation, fear of repercussions from their direct environment, and/or customs and traditions enforcing a culture of silence.
- **GBV incidence across assessed countries:** GBV is a severely underreported phenomenon in all countries, so no absolute conclusions can be inferred regarding the true extent of its incidence, or how it compares in Lebanon, Jordan, and KRI versus Syria. Based on community member and stakeholder reports, it can be safely assumed that GBV is extremely widespread in all target countries, but that refugee and IDP populations were at acute risk of certain forms that appeared with displacement (*particularly sexual violence and exploitation – including survival sex, economic exploitation, and denial of rights and resources*) or of other pre-existing forms which worsened as a result of challenges associated with their

new living conditions (*dropping out of school, child marriage, and child labour, particularly as a response to economic challenges*).

- The **most at-risk groups**, in order of frequency, were women and adolescent girls, followed by PWD, adolescent boys, and older persons (especially women).

KEY GBV CONCERNS PER POPULATION GROUP				
WOMEN	ADOLESCENT GIRLS	ADOLESCENT BOYS	ADOLESCENTS (BOTH)	ADULT MEN
IPV, sexual violence and exploitation, forced labour, economic violence and exploitation, honour killing	Child marriage (unregistered and including neglect, abandonment), Sexual violence and honour killing, Cyber-bullying and harassment, Domestic violence, kidnapping	Sexual exploitation and assault, physical violence	Child labour, denial of rights, resources, education, and opportunities	Sexual violence in detention, mandatory military service (Syria), political violence, denial of opportunities
LGBTQI	PERSONS WITH DISABILITIES	OLDER PERSONS	IDPs (SYRIA)	RETURNEES (SYRIA)
Arrest, torture, discrimination, harassment, physical and sexual assault, death threats. Limited data from the ground because members of the community tend to keep their SOGI secret.	Neglect (including by humanitarian actors who overlook their needs and do not have specialised capacities), sexual abuse and rape, exploitation, economic violence, emotional and psychological violence, security issues (generally among men with physical disabilities sustained from war in Syria).	Neglect (including by humanitarian actors and donors), denial of resources and care, Economic violence, Physical and sexual violence, Forcible labour	In addition to other forms of violence, also at heightened risk of bullying or lack of acceptance in communities of displacement. Have fewer protective resources to which they can turn.	Limited information because they avoid declaring their returnee status due to security issues. Re-entry to Syria through smuggling, which further exposes them to trafficking and other violence.

- **SEAH in the humanitarian sector** (particularly in aid distribution, but also in some cases of service delivery) were mostly reported to be an “unfortunately common” instance, noting that no official statistics were available, and reporting mechanisms were still underutilised and weak.
- Syrian refugees’ **GBV reporting practices** were similar in all four countries: they almost never feel safe reporting to formal infrastructures for a number of reasons such as fear of mistreatment, fear of racism or injustice especially if the perpetrator is a member of the local community, lack of documentation and fear of associated repercussions, and a general lack of trust in governmental structures. Additionally, due to cultural norms, they often avoid any reporting, even to informal structures and NGOs. As a result of the different organisations’ work, some women, girls, and LGBTQI are reporting, but at shy levels. GBV remains heavily underreported.
- While the relationship between **economic hardship and GBV** can in no way be considered mutually exclusive, the full sample of interviewed KIs affirmed their perceptions that economic hardship is a strong driver behind the incidence of GBV, and a key factor in exacerbating its different forms. Responses collected from individuals demonstrated that the financial crisis had heavily impacted their households, evoking negative coping challenges that included different forms of GBV.
- Restrictions, lockdowns, and the effects of **COVID-19** on mental health and the employment sector played a role in exacerbating violence. Furthermore, according to 55%, it also restricted their ability to seek GBV services. On the other hand, 11% believed COVID-19 had improved access to services, mainly due to an increase in service provision and/or the shift to remote service delivery.
- **Gender role transformation**, particularly as a result of migration, was largely believed to increase the incidence of GBV, mostly due to husbands wishing to re-establish their authority in the household after losing their breadwinner status, and also due to workplace exploitation of women and girls. On the other

hand, a significantly smaller proportion believed it resulted in decreased GBV because women became more empowered.

- KAP survey results demonstrate that more awareness-raising is required in order to improve communities' perceptions when it comes to patriarchal ideology (including among women) and normalising GBV. Responses also show that one of the most effective gateways to discussing GBV is through a religious perspective.
- The **key stakeholders to be engaged in GBV** prevention and response were religious leaders, civil society and NGOs, governments and political decision-makers, community mediators (including tribal leaders, family elders, mayors), prominent public figures (especially male), political parties (Lebanon), the Government of Syria, educational facilities, and families.

Recommendations

Civil Society and NGOs

- Precede programme design with in-depth community consultations.
- Amplify structured, recurring awareness-raising efforts, targeting different population groups with relevant, catered messaging.
- Engage and train religious leaders on promoting positive religious messaging that counters GBV.
- Train community mediators on concepts of gender and GBV.
- Train healthcare practitioners and specialists.
- Use indirect awareness-raising to address harmful practices which are “normalised” as religious.
- Dissociate “culture” from violence.
- Raise awareness on the importance of documentation in protection.
- Engage education service providers and caregivers in early prevention activities.
- Scale up MHPSS activities to improve refugees' and returnees' wellbeing; utilise sessions as GBV awareness entry points.
- Combat GBV and harmful gender norms through livelihoods, economic support, and empowerment.
- Invest more in building the capacities of Syrian women.
- Increase focus on “neglected” populations in programme design.
- Gender considerations should be a cross-cutting axis across all types of programming.

National and Regional Mainstreaming

- Strengthen and mainstream GBV capacity building efforts on a national level.
- Mainstream centralised national information management systems.
- Focus and organise national awareness-raising efforts (Syria).
- Syria and 3RP country stakeholders should coordinate and share experiences and tools.
- Regional actors should liaise to create Syrian women's support networks.

Government

- Create a safe and protective space for survivors through reporting and policy reforms.
- Modify custody laws to ensure they no longer exclusively favour men.
- Require formal justice personnel engaged in protection to undergo relevant training.
- Integrate gender and SRHR into national education curriculums.

Donors

- Ensure that gender considerations are a mandatory component of all types of programming.
- Ensure flexibility to accommodate grassroots-sourced approaches.
- Encourage regional knowledge-sharing and capacity building projects among supported entities.
- Provide more support for safe shelters that host different populations.
- Allocate more funding to prevention efforts.

LEBANON HOUSEHOLD SURVEYS: DEMOGRAPHIC OVERVIEW

LEBANON ARRIVAL DATES

Most interviewed households (92%) had come to Lebanon following the start of the Syria Crisis in 2011, with the most recent arrival date being 2022. Approximately 76% of the sample had come between 2011 and 2014, with the highest influx recorded in 2012.

The 8% who reported a date prior to the Syria Crisis had come to Lebanon between 1985 and 2010 (most in 2008-2010) and included one minor who was born in Lebanon. Some explained that they had come to Lebanon for work or after marrying a Lebanese citizen.

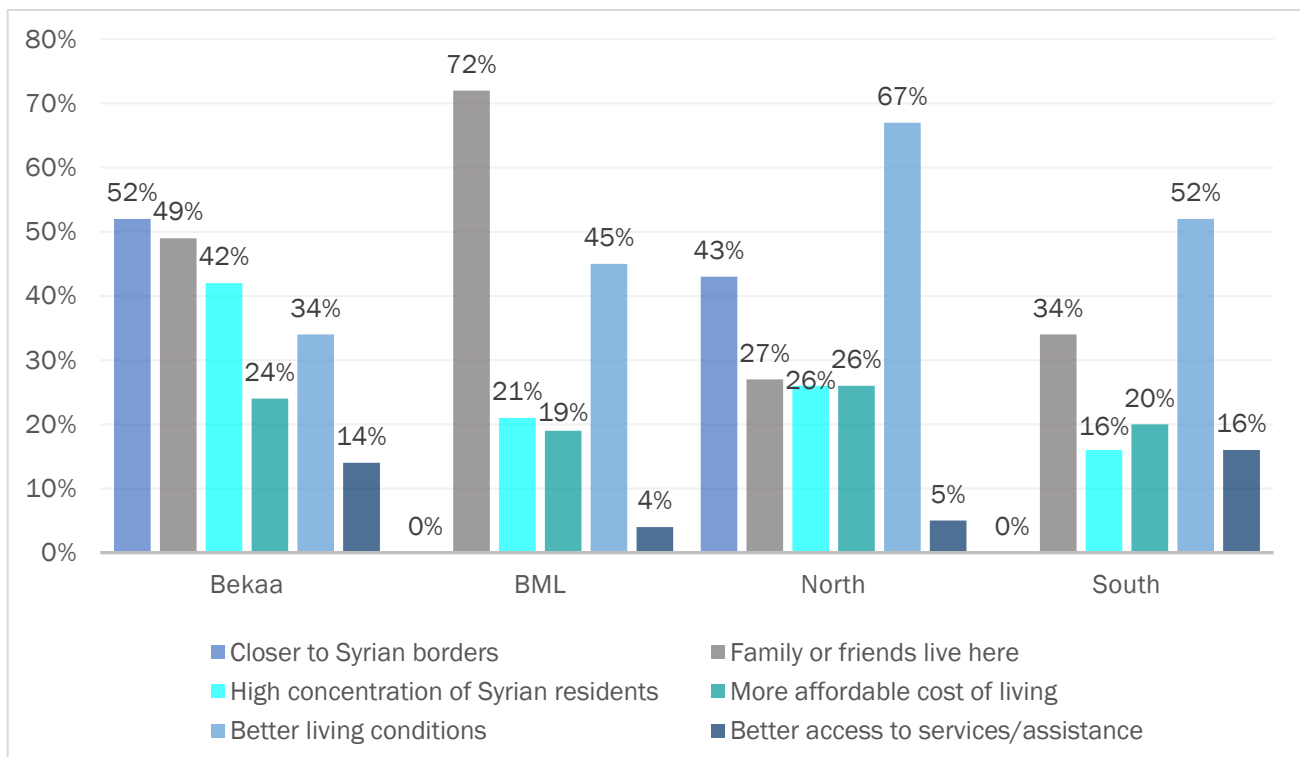
HOUSEHOLD SIZE

The average household size was 5.65 persons per HH, and ranged between 2 to 15 members. The largest reported sizes (between 10 to 15 HH members) were mostly residing in Bekaa, and were mainly originally from Daraa, Damascus, and Aleppo.

RESIDENCE SETTINGS

The majority of respondents lived in rented accommodation (86%). The remainder lived in informal settlements (6%), were hosted in local households (4%), lived in collective shelters (2%), owned property (2%, mainly married to locals), or resided in NGO-provided accommodation (1%).

Figure 1 - Key Pull Factors behind Selection of Governorate of Residence



The major pull factors to selecting their governorate of residence were better living conditions (47%, mostly North and South) and/or having family or friends already living there (44%, mainly BML and Bekaa). This was followed by the area being closer to Syrian borders (34%, Bekaa and North) or having a high concentration of other Syrian residents (31%, mainly Bekaa and North). Finally, 23% from all governorates said they had selected the area because of its affordability or because of better access to services or assistance (10%).

A minimal 3% cited other reasons, including Bekaa being the cheapest place to which the household could migrate from Damascus, having no resources to go to another country altogether, being married to a Lebanese man from their governorate of residence, or being closer to the place in which they had found employment. One 27-year-old widowed woman said she had escaped from Daraa because her deceased husband's family had been subjecting her to violence, and she came to the Bekaa where she is hosted at her father's house.

MARITAL STATUS

Over 78% of respondents were married, divorced, or widowed (85% of females, and 70% of males). While none of the 19 minor boys reported being married, 4 out of the 18 minor girls (or 22%) said they had been married at ages 15, 16, and 17. One 17-year-old had been married at the age of 16, and was now divorced.

A critical finding was that 38% of all individuals who had gotten married had done so under the age of 18 (*average 15 years old*). Approximately half of those were from Homs (47%), followed by Hama (11%) and Damascus (10%). Other locations appearing at values under 10% were Aleppo, Daraa, Rif Dimashq, Idlib, Ar-Raqqa, and Quneitra. **The youngest reported age of marriage was 11 years old**, and the respondents were a 23-year-old female from Rif Dimashq and a 34-year-old male from Homs. This data indicates that early marriage practices have not decreased in recent years.

Another finding was that **17% of the sample reported that there had been females in their families who had gotten married before the age of 18 years old, but of those households, only 28% confirmed that males in their HHs had also gotten married before 18**. When it came to boys, 7% of the overall sample said there had been males who got married under the age of 18.

DISABILITY

Almost one-fifth (19%) of the surveyed sample reported having between 1 to 3 members with a disability. Among males, 60% had a physical disability (largely as a result of war-sustained injuries), 18% intellectual, 12% visual, and 10% auditory. Among females, 36% had a physical disability, 28% intellectual, 20% visual, and 16% auditory.

INCOME-GENERATION AND LIVELIHOODS

i. Individuals Engaged in Work

When it came to engagement in income-generation activities, 72% of the sample reported that only one household member was working. This included 6 HHs who had a child working, 2 with one female under 18, and 4 with one male under 18. Another 9% reported two HH members working; 3 of those included a boy under 18. Only 4 HHs reported three individuals working (2 including boys under 18), and 1 had four people working, including a girl and a boy under 18.

An interesting note is that 25% of the sample of individuals who reported one or two members working still said that their main source of income was humanitarian assistance, and 8% said it was assistance from family and friends.

A total of 18% of the sample was not working at all, and their households' main source of income was humanitarian assistance. A few relied on financial support from family and friends, and one mentioned that prior to losing his job, his father had managed to save an amount from which the family was spending, while another mentioned the family was sustained by the pension of their deceased father.

While most women reported their husbands or fathers as the head of household³, 25% who reported being currently married and having adult males in the HH confirmed that they were the HOH themselves. The majority were from Homs and Hama, followed by Rif Dimashq.

Among men, only one 49-year-old from Aleppo said his wife was the HOH. All other married men either reported themselves or another adult male as their HOH.

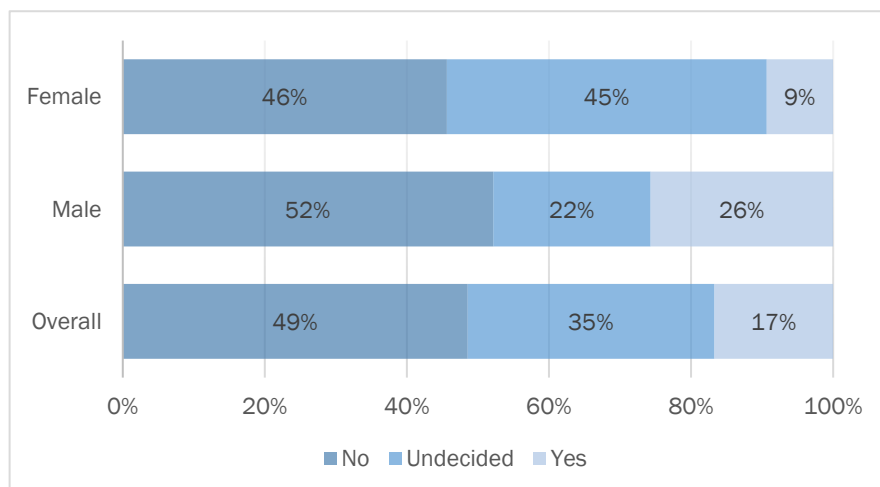
ii. Child Labour

Among the survey sample who had members in the labour market, a total of 5% had minors under 18 working (10 HHs reported boys, and 3 reported girls), mainly in wage labour, making handcrafts, or selling small items and begging in the street.

Additionally, of the 30 minors (aged 12 to 17) who participated in the Focus Group Discussions, 47% were going to school, 20% were neither going to school nor working, and 33% were working. Of the latter, one was a female who worked as a hairdresser, and the rest were males who worked as daily labourers in different fields, including dangerous ones⁴ (carpentry, sales in curtain shops, car mechanics, blacksmithing, food delivery, and portering).

HOUSEHOLD PLANS: RETURN TO SYRIA

Figure 2 - Intention to Leave Lebanon and Return to Syria in the Near Future



Almost half the respondents, more males than females, reported that they had no intention of returning to Syria, while 35%, more females than males, were undecided.

Of the 17% who said they planned to return to Syria in the future (26% of males and only 9% of females), the majority had come to Lebanon after 2011. The only

³ Defined to respondents as the individual responsible for controlling household finances and making decisions related to the household economy.

⁴ Noteworthy to mention is that one 18-year-old male said he had been working in a café lighting and serving arguileh, which entails consistent smoking.

exceptions were four male youths aged 12, 18, and 20, whose families had come to Lebanon before the Syria Crisis.

A possible justification for the limited percentage of females expressing a will to return to Syria comes from women and girl FGD participants: several had revealed that they or females they knew had attempted to return to their governorates of origin in Syria, but they had found themselves faced with extremely difficult circumstances, worsened living conditions, and different forms of gender-based violence. They added that this pushed them to come back to Lebanon, having made the decision that *“there is nothing for them in Syria anymore.”*

PARTICIPATION IN ABAAD ACTIVITIES AND SERVICES

Interestingly, despite all field researchers being unaffiliated with ABAAD in any way, and their having targeted completely random households, around 14% of the sample confirmed that they had received services or participated in activities provided by ABAAD. While respondents were residents of all governorates, they were largely in the North and Bekaa, and were 60% male and 40% female.

KEY FINDINGS

COMMUNITY AWARENESS OF GBV CONCEPTS

On the whole, 62% of respondents reported that they were aware of the concept of gender-based violence, while 38% said they were not. Familiarity was somewhat higher among females (65%) than males (57%), but at a variance of 8%, the difference cannot be considered too significant. When asked how they had learned about GBV, the top two sources were word of mouth (48%) and NGO awareness-raising sessions (41%). Around 11% had learned about GBV from public campaigns (15% males, 9% females), while a minimal number of females had learned about it at a WGSS, and males from a university course or a healthcare provider.

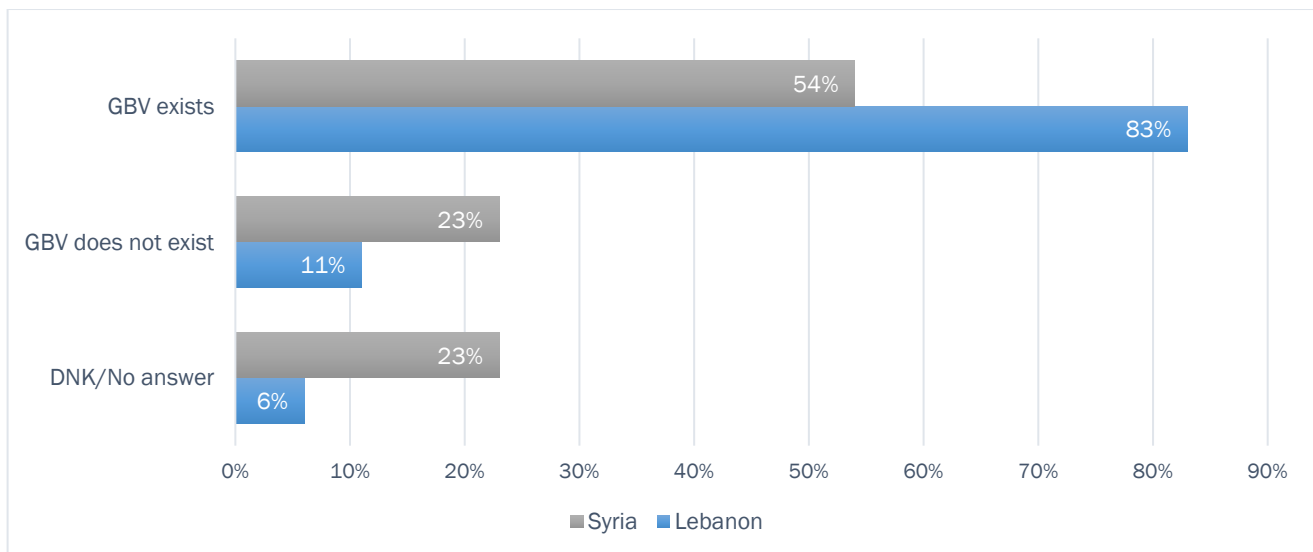
Among adolescents under 18, more males (37%) than females (29%) reported awareness of GBV concepts, while the majority among both groups did not know what GBV was.

INCIDENCE OF GENDER-BASED VIOLENCE: COUNTRY COMPARATIVE OVERVIEW

LEBANON VERSUS SYRIA

A large proportion of interviewed Syrian refugees reported GBV incidents to be occurring in Lebanon (83% overall, 59% female and 41% male), as opposed to a little over half stating that it had been occurring in their communities in Syria prior to their departure (54% overall, 58% female and 42% male) – however, it is also important to note that a significant 23% (50% each) declined to respond or said they did not know.

Figure 3 - Prevalence of GBV in Lebanon versus Syria according to Refugees in Lebanon



Given this clear discrepancy in responses compared to findings from previous studies conducted in Syria (by ABAAD and other humanitarian agencies) which concluded that GBV was extremely common across the

country, Key Informants from Syria were asked to provide possible explanations for the community members' denial of the existence of GBV. The suggested justifications included:

- Fear of being questioned, or “acting from a sense of self-preservation” in the event of returning to Syria.
- Fear of revenge, retaliation, or scandal – especially if the perpetrator was a family or tribal member, noting that a number of refugees had migrated to Lebanon with their entire clan.
- Fear of the husband or social environment.
- Customs and traditions, which either “enforce a culture of silence,” or make respondents regard certain practices as “normal,” when in fact they are forms of violence.

“As they migrated to neighbouring countries, some refugees started being exposed to new forms of GBV which previously may not have been common in their communities in Syria. Additionally, members of the host community or of the wider refugee circle may have been responsible for perpetrating different types of GBV (instead of an intimate partner or a relative). This may have affected their perceptions of the occurrence of violence, or may have encouraged them to speak out about it, since it did not entail dishonouring their family or clan.”

– KI, Syria

“Generally, Syrian refugees tend to talk about their current struggles, and avoid revealing much about their challenges and realities back in Syria. Furthermore, violence is not considered a priority; income generation and livelihood security take precedence above all.”

- KI, Jordan

Half the survey respondents as well as the relative majority of FGD participants said that the same types of violence existed in Lebanon and Syria because of the similarity of problems on the levels of security, economic conditions, ideology and traditions, and the public health situation. One 55-year-old male in the North said that the “*disorganised system, social deterioration, and governmental neglect were one and the same in both countries.*”

However, on the whole, opinions varied across the FGDs.

Some (in addition to 32% of survey respondents) believed that violence was more widespread in Lebanon, citing the following examples:

- Higher levels of poverty among refugees in Lebanon. “*Certain types of violence existed in Syria, but they were more minor such as verbal harassment. We were never exposed to so much exploitation there because we had our homes and did not need anything.*”
- Lebanon’s significant religious diversity and various social strata makes the country more prone to the presence of violence.
- Displacement-related challenges, particularly the reduced security in living conditions, which resulted in violent practices such as marrying girls to protect them from camp settings. Furthermore, local community contempt towards refugees exposed them to different types of (sometimes unprecedented) violence.
- The “cultural melting pot” created as a result of mixing Syrian refugees from different governorates with their own customs and traditions amongst each other, and with the Lebanese communities that have their own cultural values and beliefs. One woman from Daraa said that she was being bullied

by another woman from Damascus, as the latter considered her inferior since she was from a rural rather than urban area.

- In Syria, women and girls *“adhered more to acceptable customs and traditions than they do in Lebanon, so they faced less violence.”*

Others (in addition to 17% of survey respondents) believed that violence in Syria was more common:

- In Lebanon, as a result of NGO awareness-raising efforts, women and girls’ knowledge greatly increased. A couple of women added that *“men hate this, because they want their wives and daughters to remain ‘blind’.”*
- Some were of the opinion that poverty levels were worse in Syria than in Lebanon, as was stress and anxiety, especially since living conditions are better in Lebanon.
- In Syria, there was less access to justice and reporting services in comparison to Lebanon, where such support was available through NGOs.
- The environment in Lebanon is less conducive to violence, because men, being out of their own communities and country, feel less protected, and are aware that women have more options.
- Syria was reported to be *“more oppressive towards women because it was an Islamic country, unlike Lebanon.”*
- GBV existed at similar levels in both countries, but there were some more extreme forms in Syria such as an increase in organ trade, kidnapping, and human trafficking.

On the whole, based on community members’ responses, the predominant types of violence in both Syria and Lebanon were denial of education and forced or child marriage. Unsurprisingly, types of violence commonly associated with contexts of conflict (such as torture and kidnapping or detainment) scored higher in Syria than in Lebanon, while issues associated with displacement (such as economic exploitation and violence within collective living settings) were more frequently reported in Lebanon.

In both countries, IPV was reported at similar low rates, which is in line with the pervasive ideology that “household issues” should be kept secret, and that women should not speak out or “scandalise” their family.



Of the interviewed refugees who had confirmed that GBV existed in their communities in Lebanon, 40% said they had witnessed or heard about it first-hand, 36% noted that they were not directly privy to details of specific instances but believed it was happening, and 24% confirmed that they had personally experienced violence. Interestingly, while significantly more females than males confirmed the existence of GBV in their surroundings, those who stated they had experienced GBV were almost equally divided (52% females, 48% males).

Among youth, none of the adolescent girls outrightly denied the occurrence of GBV in their community. Of the 17 respondents, only two said they did not know, while the rest all believed that GBV was happening in their community either because they had witnessed it first-hand, or because they suspected it was happening, but none mentioned that they had experienced it themselves. **This included the 4 minors who had been married between the ages of 15 and 17, who while having denied personally experiencing GBV, still considered child marriage to be a pervasive protection concern in their communities.**

Of the 19 adolescent boys, 5 said that they had personally experienced GBV themselves in different forms, including deprivation of education, kidnapping or detainment, neglect, physical assault, economic violence,

torture, sexual exploitation, harassment, and different forms of violence in collective living settings. Another 8 believed it was happening because they had witnessed it or suspected it existed, 2 said it did not exist, while 4 did not know.

Figure 4 - Predominant Forms of GBV in Lebanon

FORM OF VIOLENCE (LEBANON)	OVERALL	FEMALE	MALE
Denial of education	43%	48%	36%
Economic violence	31%	29%	34%
Forced marriage or forced early marriage	30%	38%	20%
Violence within collective living settings	23%	28%	16%
Harassment	23%	31%	12%
Family violence (by parents/relatives)	23%	29%	14%
Physical assault	20%	10%	34%
Rape or sexual assault	18%	20%	14%
Neglect	16%	16%	17%
Torture	14%	14%	14%
Intimate Partner Violence (by spouse)	12%	16%	7%
Kidnapping or detainment	9%	9%	9%
Sexual exploitation (humanitarian assistance)	6%	7%	4%
Sexual exploitation (basic needs/money)	5%	3%	8%
Forced pregnancy or abortion	2%	2%	2%
Public humiliation (including forced stripping)	2%	1%	3%
Forced prostitution, slavery, or human trafficking	1%	1%	1%

According to refugees in Lebanon, the top forms of GBV occurring were denial of education (43%), economic violence (31%), forced marriage or child marriage (30%), violence within collective living shelters (23%), harassment (23%), and family violence perpetrated by parents or relatives (23%).

The top forms reported by female respondents were denial of education (48%), forced or child marriage (38%), harassment (31%), economic violence (29%), family violence by parents or relatives (29%), violence within collective living settings (28%), and rape or sexual assault (20%).

“We have heard of numerous cases where women have been forced into abortions they did not want, either because the family is unable to financially support more children, or because the husband wanted a boy.”

- Women FGD, BML

On the other hand, top forms reported by males were comparatively limited, and included denial of education (36%), economic violence (34%), physical assault (34%), and to a much lower extent, child marriage (20%). A number of interviewed men, including FGD participants, emphasised the host community’s racism as an issue which resulted in the perpetration of different types of violence against them, including physical

assault, harassment, and psychological violence which they were more commonly exposed to as men than women were.



As detailed in the comparative overview section, almost a quarter of refugees in Lebanon denied that GBV existed in Syria prior to their migration. A little over half the sample (54%) confirmed that it was happening: of those, 48% said they had witnessed or heard about it first-hand, 38% believed it was happening but had not personally observed it, and 14% (equal proportion of female and male) reported having personally experienced violence.

Among youth, the majority of girls (71%) and boys (68%) reported they did not know about GBV in Syria, which is logical given that the average age of both samples at the time of their families' departure from Syria was around 7 years old, reiterating that some had been born in Lebanon. That said, 3 girls and 1 boy denied its occurrence in Syria, while 2 girls and 5 boys said it existed.

Across the entire sample, the top forms of violence reported were denial of education (45%), torture (31%), forced or child marriage (28%), physical assault (26%), rape or sexual assault (24%), and harassment (20%).

Disaggregated by gender, while similar concerns were reported, forced or child marriage was significantly more of a concern reported by females (37%) than males (16%), while kidnapping or detainment was reported by 29% of males, as opposed to only 10% of females, noting that torture was reported at almost similar proportions by both.

Figure 5 - Predominant Forms of GBV in Syria

FORM OF VIOLENCE (SYRIA)	OVERALL	FEMALE	MALE
Denial of education	45%	40%	53%
Torture	31%	30%	33%
Forced marriage or forced early marriage	28%	37%	16%
Physical assault	26%	19%	34%
Rape or sexual assault	24%	28%	20%
Harassment	20%	26%	13%
Family violence (by parents/relatives)	18%	22%	11%
Kidnapping or detainment	18%	10%	29%
Economic violence	17%	16%	17%
Violence within collective living settings	12%	17%	4%
Intimate Partner Violence (by spouse)	10%	12%	7%
Neglect	9%	8%	10%
Sexual exploitation (humanitarian sector)	8%	8%	9%
Sexual exploitation (basic needs/money)	7%	5%	10%
Forced prostitution, slavery, or human trafficking	5%	7%	1%
Forced pregnancy or abortion	4%	5%	3%
Public humiliation	3%	3%	3%



Stakeholders working on GBV in Jordan noted that there are no official studies or statistics on the extent of violence in the refugee community. Furthermore, some said that they did not have much information about what refugees were facing before coming to Jordan for two main reasons: i) they tended to avoid speaking of their previous experiences in Syria, and ii) refugee camps in Jordan are not easily accessible to individuals or groups who are not living or directly employed there.

“Violence is inevitably present even in stable environments, so among refugees – which is a violent environment in and of itself – it absolutely exists. Many refugees, especially women and girls, are being subjected to the worst forms of violence and exploitation, but they are not willing to ask for help or confront the perpetrators in any way.”

- KI, Jordan

A KI said there were two main ‘faces’ of household violence among refugees, which she explained as follows:

- Families who have suffered from violence back home in Syria, including marital disputes and child marriage, but whose situation improved after they obtained asylum. In this case, violence can be considered a cultural issue that they carried with them, but that they were able to surpass with the change in their environment.
- Families resorting to certain types of violence as a response to their new situations of displacement. This form is unfortunately more common, because displacement “intensifies the worst in people” as a result of oppression, anger, fear, depression, uncertainty about the future, and humiliation when trying to secure basic needs.

One said that the incidence of violence is more common in camps than in urban areas, but this may also be as a result of the difficulty that refugees face in renting apartments in urban locations.



KI perceptions in KRI were somewhat differing. A couple noted that GBV was “*definitely more common in Iraq than in Syria. The very harsh living conditions in which refugees have found themselves have caused a great build-up of anger which has started to show through inter-family violence.*” A representative from another organisation explained that “*some refugees have told us they faced much more violence in Syria than they currently do in Iraq, while others have said that they did not face any GBV*

issues in Syria prior to their migration, but they are currently exposed to many of its forms in public spaces, workplaces, and service delivery points because they are in a foreign environment.”

Finally, one said that practices depended on residence settings: “*some refugees living in urban areas have integrated into Iraqi society, and have adopted the local values and customs, both the positive and the negative aspects. Those who are living in camps and who do not have contact with the local community uphold their own traditions.*” He added that “*while certain types of violence may have been carried with them from Syria, it is important to mention that as a result of displacement and heightened economic challenges, the violence may have intensified, and new forms have appeared.*”

COUNTRY COMPARATIVE SUMMARY

GBV is a severely underreported phenomenon in all countries, so no absolute or fully accurate conclusions can be inferred regarding the true extent of its incidence, or how it compares in Lebanon, Jordan, and KRI versus Syria. Based on community member and stakeholder reports, it can be safely assumed that GBV is extremely widespread in all target countries, but that refugee and IDP populations were at acute risk of certain forms that appeared with displacement (*particularly sexual violence and exploitation – including survival sex, economic exploitation, and denial of rights and resources*) or of other pre-existing forms which worsened as a result of challenges associated with their new living conditions (*dropping out of school, child marriage, and child labour particularly as a response to economic challenges*).

GBV AND PROTECTION CONCERNS

Numerous studies conducted by UN and global agencies concerned with migration and displacement have found that refugees are at heightened risks of violence during their voyages (especially when illegal and completed through smuggling), in temporary or collective accommodation, and in camps or informal settlements. Once they reach their destinations, they often find themselves experiencing intensified GBV in the form of cultural practices they have carried with them and which are exacerbated due to complex crises and daily pressures, as well as new forms of violence which emerge in their new environments, either due to adopting local practices, or as a result of third-party exploitation of their acute needs.

One general issue that most Syrian refugees who participated in quantitative and qualitative data collection activities brought up was facing significant levels of racism and xenophobia in Lebanon, and it was a particularly heavy focus area among men. Racism was not brought up by interviewed stakeholders in other countries, but since the research did not collect data directly from refugee populations in KRI and Jordan, no conclusion can be drawn on related experiences.

“The people and the government of Lebanon are very racist against holders of other nationalities, especially Syrians. But this is not how it was before the Syrian crisis. They did not discriminate against us before. On the contrary, they used to respect us.”

- Men FGD, BML

“Even among Syrian refugees, we are not all equal, and we face discrimination in the allocation of humanitarian aid. For example, those of us who are Palestine refugees from Syria do not get assistance from the UNHCR, because we fall under UNRWA’s mandate. UNRWA’s assistance is too limited to be useful.”

- Women FGD, South

The sections below provide an overview of the key protection concerns and forms of GBV considered **most critical** among each population group, as reported by interviewed stakeholders in each of Lebanon, Syria, Jordan, and KRI, in addition to information shared by Lebanon-based Syrian refugee women, girls, men, and boys participating in FGDs. As the reported forms are largely similar across the four countries, findings are combined, except where differentiations are required and thus flagged.

Important Notes:

- While all researchers and FGD facilitators began data collection activities by providing a brief explanation of Gender-Based Violence, there is no unified understanding of what violence is and what forms it may take. Furthermore, some respondents expressed an outright rejection of the concepts. For example, one male FGD participant noted, *“I disagree with the concept of violence that NGOs keep talking about. What happens inside a household is not violence. It is normal to have fights and to discipline. True violence is crimes of war, is when they kill children, when they deny us of living with dignity, when they force women into sexual intercourse under what religion calls ‘sexual jihad’.”*
- One organisation in KRI said they did not have sufficient data to respond about the types of GBV per population group, but noted that the lack of laws protecting refugees from being exploited is a concern which severely impacts all population groups.

ADULT WOMEN

Intimate Partner Violence (IPV): The key type of violence, according to KIs from all four countries, to which married women were subjected. This included emotional, physical, and sexual violence, in addition to economic violence including forced labour and confiscation of wages.

Sexual Violence and Exploitation: Faced by women of all ages regardless of marital status, but particularly common among unmarried, divorced, or widowed women *“who have no male protector.”* This can be perpetrated by a range of individuals such as random strangers from host or refugee populations, extended family members or other residents of collective shelters, aid workers, security personnel, members of armed groups, a *shawish*⁵, formal or informal employers, landlords, and public transportation drivers.

A study by UN Women⁶ found that almost 70% of a random sample of 540 women had experienced some form of sexual harassment in taxis in Lebanon, and almost 50% said that the fear of being harassed in public transportation had prevented them from going somewhere they needed to go [including work, education] at some point in time. Harassment was reported at extremely high levels by 78% of Syrian women, followed by 75% of Palestinians and 66% of Lebanese.

Most women FGD participants mentioned that in Lebanon, *“there appears to be a widespread mistaken idea that being refugees, Syrian women are open to doing anything in return for money, so many Lebanese men find it acceptable, even natural, to sexually harass or proposition them.”*

Forced Labour, Economic Violence and Exploitation: Due to the economic hardship facing most refugee households, including the economic crises in Syria and Lebanon, many women have been forced to work, including in precarious conditions. For example, working in agricultural lands exposes women to GBV not only at the hands of their employers, but also by other male workers who may assault them in locations that are “blind spots.” Additionally, most employment is informal and unregistered, which deprives workers of their rights according to the countries’ labour laws, and which also limits their ability to report transgressions. Employers can often threaten workers or force them into sexual relationships to which they may acquiesce

⁵ In informal tented settlements, a *shawish* is the person nominated by other refugees to act as the settlement supervisor and decision-maker. (UNHCR)

⁶ UN Women, 2021: *Women’s Experiences of Harassment in Taxis: A Case Study of Tripoli, Lebanon.*

https://lebanon.unwomen.org/sites/default/files/2022-08/Taxi%20Harassment%20Study_Eng_August2022Reupload.pdf

in order to avoid losing their livelihoods. Often, women's wages – including NGO-disbursed assistance – are confiscated by their husbands who spend the money however they please (on household necessities or even for their own recreational purposes) without including the women in the economic decision-making process. Another critical issue is women's lack of economic independence. Without husbands, they are at risk of sexual exploitation in return for economic benefits such as sexual services to keep living in rented accommodation or to receive help with household necessities. On the other hand, when a woman relies on her husband as the breadwinner and head of household responsible for economic decision-making, she usually has to accept anything he forces – having no other options, this also limits her ability to leave her household to escape violence. KIs from Syria flagged that women are also often deprived of their wages, resources, and inheritance, and are mistreated by their in-laws following their husbands' deaths. Some women are being forced into sex work or are being trafficked, while others with no husbands or breadwinners have turned to survival sex themselves in order to secure their households' basic necessities. This opens the door to numerous more violations against them.

“If a woman is a sex worker and lives in a camp, the camp authority may expect or force her into sexual acts because of her job. If she has a husband and is keeping the nature of her work secret from him, this puts her at further risk of exploitation and sexual abuse. Even if she lives in rented accommodation, if word gets out that she is a sex worker, this will be used against her – she would be exploited and forced into sex. We have come across cases where men have filmed these women and have used the video against them.”

- KI, Lebanon

One KI in Syria mentioned that in some cases, women had a **fear of being killed**, which was especially an issue among IDPs. Adult male FGD participants in BML considered “*murder under the pretext of honour killings allowed by religion to be common in the Arab world, whereby a man has the right to stone a woman to death in case she commits a disgraceful act.*” They elaborated that such acts include having an extramarital relationship, ‘losing the hymen’ without legal marriage, or marrying in secret.

In Jordan, a KI noted that women often have **no freedom to move around** or to **decide with whom they associate** or what **services they are able to seek**, etc. (the cultural practice of requiring *mahram*⁷, which is very common in Syria and Jordan). Another issue being observed is **abandonment** by husbands who may leave the country (usually to Europe) in search of better living conditions with the promise of applying for family reunification – something that may never come.

ADOLESCENT GIRLS

Child Marriage: Reported by almost all KIs from all four countries, the most critical and omnipresent child protection concern among adolescent girls was child marriage. While child and forced marriage are a cultural practice in many Arab countries – for example, before the 2011 conflict, 13% of Syrian women aged 20-25 reported having been married before the age of 18⁸ – it had begun declining, especially in light of a certain level of legal regulation which requires judicial consent to register early marriages.

⁷ A male family member whom a woman is never permitted to marry, and who can escort her when she leaves the house.

⁸ NRC, 2019. “Child Protection: What you need to know about Syrian child marriage.”

<https://www.nrc.no/perspectives/2019/what-you-need-to-know-about-syrian-child-marriage/>

MINIMUM LEGAL AGE OF MARRIAGE ⁹			
LEBANON	SYRIA	JORDAN	IRAQ
No minimum age of marriage. Lebanon has 15 different Personal Status Laws set by religious courts, some of which allow girls as young as 9 years to marry with judicial consent.	The minimum legal age of marriage is 18 years for boys and 17 years for girls. However, girls are able to marry at 13 years and boys at 15 years with judicial consent.	The minimum legal age of marriage is 18 years. However, exceptions mean that individuals can marry at 15 years with judicial consent.	The minimum legal age of marriage is 18, but individuals can marry at 15 with judicial consent. However, the constitution enables sects to follow their own religious teachings, which thwarts attempts to standardise a legal age.

“Child marriage in Jordan is regulated. By law, it is illegal to marry below the age of 18, although Personal Status Law permits marriages to be registered in Sharia courts by a judge from the age of 15 under “exceptional circumstances,” and only if the adolescent satisfies certain requirements such as finishing school, obtaining parental permission, and going through counselling.

...But who’s following up?”

- KI, Jordan

However, the practice continues to increase in contexts of protracted humanitarian crises, conflict, insecurity, and migration, chiefly as an attempt to protect girls (from rape, harassment, dishonour, and kidnapping) and to secure them financially by marrying them to a groom who would be able to support them. On the other hand, child marriage is sometimes done for purely economic reasons, without any regard to the risks and impacts on the girls. A KI from Jordan said they had worked with cases of girls who had been married 3-4 times. She remarked, “*this is not even ‘just’ child marriage anymore. This is human trafficking masquerading as marriage.*”

One KI from Lebanon added, “**It is important to flag that child marriage is often not viewed as violent or harmful to girls, especially when the ages of 9 – 15 are considered acceptable and legal under a religious sect’s exceptions.**”

“We are unfortunately often having to deny our children their right to education because we need them to help us secure our household expenses. We are also marrying our daughters early – but what’s the issue with that? In the end, girls belong to their husbands, and – especially if he is doing well financially – he can help us a bit.”

- Men FGD, South

Additionally, attempts at regulation have created a new challenge: many households are not officially registering marriages, which leaves girls in a difficult position, especially if they later have children. One KI from KRI noted that in cases where women or girls are undocumented in their countries of displacement or have not registered their marriages, they are unable to register their children. **Some of them have resorted to registering their new-borns to relatives or neighbours.**

⁹ Girls Not Brides Child Marriage Atlas. <https://www.girlsnotbrides.org/learning-resources/child-marriage-atlas/regions-and-countries/middle-east-and-north-africa/>

“Before 2011, we were noticing that child marriage in Syria had begun decreasing. Unfortunately, due to the chaotic security situation including violence, rapes, and mass internal migration that were occurring, rates of child marriage shot up, as it became a reaction to the violence – an attempt to protect young girls.

Additionally, the economic crisis has also pushed many families to marry off their girls. In some areas, we started hearing that child marriage was being treated as a sales interaction. A wealthy 60-year-old man could go to a struggling household, give a large *mahr*,¹⁰ and leave with a 15-year-old bride.”

- KI, Syria

Another critical issue which has been on the rise, according to a KI from Jordan, is *misyar* marriages, where non-Jordanian men, particularly from the Gulf, are coming to marry young Syrian refugee girls and leaving them behind without returning.

When asked for additional background about this subject, a religious leader from Lebanon explained that there are several problems with *misyar* marriages, especially when done through unofficial and thus undocumented contracts. Generally, they force the girls into having to waive the rights afforded to them through marriage contracts (such as dowry, housing, and financial support or alimony). Often, the majority of men who opt for *misyar* marriages are seeking sexual benefits without having to fulfil the accompanying duties and rights dictated by marriage.

Sexual Violence and Honour Killing: Girls are at a very high risk of sexual abuse, according to KIs and community members alike. The glaring issue is generally associated with their leaving home for any reason, including going to school. This often results in their parents forcing them to stay indoors in order to protect them, but this deprives them of even their most basic rights of education and freedom of mobility. Additionally, this does not always ensure protection, especially since sexual violence is common in household settings (especially in collective shelters, unsafe settings such as unfinished structures, apartments shared by two or more families, and camps or informal settlements).

Girls pose a social burden to their parents, especially if they are leaving home to study and are exposed to harassment. For some, the solution is having them drop out of school and get married, which not only limits repercussions to the family’s honour, but also reduces financial burdens.

- KI, Jordan

During the FGD with men in the South, while the group was listing different forms of GBV, some mentioned verbal harassment. The facilitator later reported that at that point, one man paused, confused. He commented,

“I really did not know that catcalling girls was harassment. We say ‘a nice word’ to passing girls every single minute!”

Because there is a high cultural value placed around “virginity,” girls who have been raped are believed to have tarnished their and their families’ honour – this puts them at risk of honour killing. There are no official statistics on honour killing in any of the countries, noting that this phenomenon is severely underreported.

Cyber-Bullying and Harassment: Frequent social media use among adolescents is nothing new, but it significantly increased following COVID-19 and the adoption of online schooling modalities, in addition to being a key channel for keeping in contact with friends during lockdowns. Syrian refugee girls who are out of school and staying home all day doing unpaid care work are also frequent social media users. While this field is under-researched, several KIs reported that girls are facing online forms of harassment, violence, and

¹⁰ In Islam, a *mahr* is an obligation, in the form of money or possessions paid by the groom, to the bride at the time of marriage.

cyberbullying. This includes, among others, sexual harassment, exposure to inappropriate content, as well as hacking and obtaining personal information or photographs, which can later be used to threaten the girls – even if they are not compromising photos, merely appearing without a hijab is sometimes sufficiently scandalising for further coercion. A 2017 survey in Lebanon by SMEX¹¹ found that almost half of female adolescents expressed concern about their online privacy (as opposed to only 26% of males) and 24% had remained neutral.

Confirming the above, both girls and boys participating in FGDs brought up electronic violence as a widespread concern. They reported that there have been many cases of unknown persons approaching girls with fake accounts that appear real, and creating an emotional relationship. Afterwards, they begin threatening the girls with posting pictures and messages they have sent online, which gives them leverage to “turn her into their victim.”

Other issues reported by KIs included **kidnapping** in Syria, and a **lack of awareness on reproductive health**, including menstrual management, in Jordan. Some girls participating in FGDs also emphasised **domestic violence** not only by their fathers and mothers, but also by their (older or younger) brothers, with their parents’ encouragement.

“We have heard of cases of girls getting kidnapped in Zahle. This scares our parents and, in an attempt to protect us, they tell us we are no longer allowed outside the house without being accompanied by our brothers. But we know that if anything happens, our brothers cannot protect us.”

- Girls, FGD Bekaa

ADOLESCENT BOYS

In general, boys were reported to be at risk of sexual exploitation and assault in Syria and their countries of displacement, particularly when they had to drop out of school and work for employers who exploited them financially or sexually. KIs in Lebanon and Syria discussed cases of adolescent boys who were beaten for “*not working enough*.”

The types of labour in which they were sometimes engaged could also put them at risk of bodily harm (for example jobs that required handling dangerous equipment or heavy loads, or gathering plastic from landfills in Syria in which explosive remnants of war existed, etc.).

As “*they tend to be in the streets more often than girls, they are also at higher risk of falling victim to assault by strangers*.”

As with girls, they also faced denial of rights, resources, education, and opportunities. While child marriage was also listed as a concern, it was much more infrequent in comparison to girls.

¹¹ SMEX, 2017. “Youth, Internet, and Technology in Lebanon: A Snapshot.” <https://smex.org/youth-internet-and-technology-in-lebanon-a-snapshot/>

ADOLESCENT GIRLS AND BOYS

Denial of Education and Rights, Child Labour: Education for refugees in Jordan, KRI, and Lebanon, and for IDPs in Syria, is available, albeit to somewhat varying extents:

- In 2017, Jordan changed its government policy to allow all refugee children, including those who are undocumented, to join double-shift schools.¹²
- In 2022, the Ministry of Education of the Kurdistan Regional Government, UNICEF, UNHCR, and Save the Children, jointly launched the Refugee Education Integration Policy, which aimed to welcome refugee children to quality education in public schools. To note is that refugee children are also able to access non-formal education.¹³
- In Lebanon, the economic crisis has severely impacted the public education sector on a national level, including to host community children, leaving schools “only half-operational” due to COVID-19, lack of funding, the central bank’s practice keeping the majority of the value of humanitarian assistance through manipulating currency exchange rates, and teacher strikes.¹⁴ Another important barrier to refugee schooling is the registration requirements set by the Ministry of Education and Higher Education (such as legal residency and certified educational records which are difficult or impossible for Syrians to obtain). However, it is worth noting that UN and other humanitarian agencies are providing non-formal education for refugee children.
- In Northern Syria, numerous INGOs, in partnership with local implementors, have established non-formal educational facilities which offer free-of-charge education to IDP children. Based on data collected directly from teachers, children, and their caregivers, these schools have often been reported to be overcrowded and in need of increased funding to improve capacity, quality, and conditions.

In spite of having the option to enrol children in public schools or non-formal education, KI reports and assessments indicate that school-aged refugee children have either never been to school in their countries of displacement, or have dropped out. For example, in Lebanon, VASyR 2021¹⁵ results show that 30% of school-aged refugee children (ages 6-17) have never been to school, while only 11% of youth (aged 15 to 24 years) were enrolled in education. Dropping out of school and engaging in child labour was reported to be a widespread issue for both girls and boys by KIs from all countries, flagging that in Lebanon, stakeholders working with children said that since the onset of the economic crisis in 2019, they had begun witnessing significant increases in cases of child labour.

Additionally, in all countries, KIs explained that even when free-of-charge education was available:

- i. The cost of education materials and transportation was a financial burden that many refugee households could not bear. VASyR 2021 confirmed these costs as the most prominent hindrance to refugee child education.
- ii. Due to financial scarcity, refugee households often preferred to withdraw their children from school and send them into the labour market to supplement household income.
- iii. In girls’ cases, parents may opt to withdraw them from school out of security concerns. Some girls participating in Bekaa and BML FGDs mentioned that they have been verbally harassed on their way to and at school – while some of the harassment was racist in nature, they noted that they “*believed this harassment is more associated to their being girls rather than to their Syrian nationality.*”

¹² <https://theirworld.org/news/jordan-lets-undocumented-syrian-refugees-in-state-schools/>

¹³ <https://reliefweb.int/report/iraq/back-learning-campaign-launched-kri-improve-access-quality-education-out-school-children-and-welcome-syrian-refugee-children-public-school-system-enarku>

¹⁴ HRW, 2022. “Lebanon: Credible Plans Needed on Education Crisis.” <https://www.hrw.org/news/2022/05/06/lebanon-credible-plans-needed-education-crisis>

¹⁵ 2021 Vulnerability Assessment for Syrian Refugees in Lebanon (VASyR). <https://data.unhcr.org/en/documents/details/90589>

“Many Syrian households do not believe in dedicating resources to girls’ education, while boys get to go to school. This is because parents think that girls ‘belong to their husbands’ houses,’ and any wages they make as a result of their education will go to their husbands, not their parents.”

- KI, Syria, and Girls FGD, Bekaa

A 2021 assessment¹⁶ conducted across the different governorates of Northern Syria showed that while most education services were offered for free, the associated costs (clothing, stationery, books, transportation, allowances, and occasional tutoring), which increase as a child grows older, are equivalent to a full month’s food budget for an average household of 7 members. Interviewed children and local stakeholders reported that the number of children in school has been decreasing as a result of safety concerns (continuous attacks on schools, dangerous conditions when travelling to and from school) and the increasing level of poverty which is requiring more HH members, including children, to join the workforce. Furthermore, the low quality of education and lack of teachers’ commitment have been a contributing factor to children leaving school to learn a technical skill on which they could rely for income generation. Another issue which played a role in leaving school, mentioned more commonly by girls, was the rise in kidnapping cases.

When it came to child labour, several KIs noted that there are no official or accurate statistics that reflect the ages and extent to which girls and boys are involved in work, but FGD participants from across the different governorates said that most refugee children had to participate in income generation activities, with most revealing that they themselves had young children who were working. While the average age of entering the labour market was reported at around 14, many families were sending children as young as 7 years old to work.

“We are all forced to send our children to work. At the very least, every household member needs to be responsible for themselves, because one person cannot support an entire family.”

“My husband is sick and cannot work. I have 8 children under 18. They are all out of school, and I have sent them all to work. We need to pay rent.”

- Women FGD, BML

“If they do not want us to send our children to work, let them hold recreational activities that provide us with some financial incentives so that we can afford to send them there instead.”

- Men FGD, South

KIs said that boys’ labour is often more visible than girls’, but that does not mean that girls are not working: while boys can often be found working in carpentry, car mechanics, construction, bakeries, factories, smaller restaurants, portering, sanitation, delivery driving, and begging, wiping windshields, or selling items on the road or in roadside kiosks, girls more frequently work in agricultural fields, handcrafts, hairdressing, and, similar to boys, begging or selling items in the street.

A KI from KRI mentioned that school dropout rates are rather common in urban areas, but they are currently reducing in camps because residents have increased access to facilities providing education and assistance.

¹⁶ December 2021, unpublished study. “Attacks on Education in Northeast and Northwest Syria.”

She added, “while UN agencies believe that refugees can be integrated into local schools, the language barrier is a very real challenge for Syrian children.”

“Many young girls are working in agriculture in the Bekaa. Often, they accompany and help their mothers, so they do not even get paid for their work. When they go unaccompanied, not only are they exposed to sexual harassment by the landlord, employer, or other male workers, but also to two-tiered economic violence: being exploited and underpaid by the employer, and having their wages taken from them to pay for household expenses.”

- KI, Lebanon

“In general, loss or unavailability of documentation among refugee youth hinders their ability to seek education, so they often start working. Among boys in KRI, child labour is very widespread, and we have heard of some cases of child marriage forcing the boy to work to secure his family’s income. At work, many boys are exposed to economic and sexual exploitation by their employers.”

- KI, KRI

ADULT MEN

KIs from all countries had limited to no information about violence against men, which validates the notion that men avoid reporting GBV incidents. Interviewed GBV stakeholders from KRI said that they had not worked with any cases of men who had experienced GBV. In Jordan, two KIs mentioned that there have been no specific cases of violence discussed, only difficulties associated with securing employment, while one said that the main form of violence reported by men is **sexual violence** in detention back in Syria (including by armed groups). KIs from Syria said that sexual violence exists, but it is at an extremely low percentage, likely due to underreporting. One KI from Lebanon said that men who have been subjected to sexual violence do not report it, “often out of shame or of how it would reflect on their manhood.”

A 2017 study conducted by UNHCR¹⁷ with Syrian refugees in 3RP countries found that men and boys were subjected to sexual violence and torture by multiple parties to the conflict. The study quotes a Syrian refugee woman in Lebanon who explained that they had left “not out of fear of shelling and bullets, but for our honour – the fear of being abused, all of us, our daughters and our men.” Additionally, findings showed that males who had experienced GBV avoided speaking out or seeking services. A Syrian man in the Kurdistan Region of Iraq (KRI) noted that “a man would never speak of this. Why should he? We know that everyone in jail is raped. It is normal.”

A couple of KIs from Syria flagged that **mandatory military service** can be considered a form of GBV because it only targets men. Due to the crisis, even men who have completed their military service are being recalled to serve for a duration of approximately 8 years. Not only is the period too long, but the wages they receive are extremely low. This forces their wives and sometimes children to work to cover household expenses in the absence of their main breadwinner. Men in the army can sometimes face harassment. Those who do not wish to join the army are forced to go into hiding within Syria, or to emigrate.

Limited access to labour markets and livelihoods leads men to seek **employment** in informal markets. This automatically implies a lack of labour rights, unfair wages, and even physical violence. A KI from Lebanon

¹⁷ UNHCR, 2017. “We Keep it in Our Heart: Sexual Violence against Men and Boys in the Syria Crisis.” <https://www.refworld.org/docid/5a128e814.html>

recounted a case where some men were captured, tortured, and abused by the landlord while cherry-picking in the North.

Also in Lebanon, a small number of KIs mentioned that **political violence** – “especially in light of the state’s recent move to facilitate the voluntary return of Syrians back to Syria” – has increased. As a result of heightened tensions, Syrian men are sometimes facing physical assault by the local community, and their tents are being burned or threatened, which also affects women and girls.

OLDER PERSONS

The key issues reported among older persons were neglect and denial of resources and care, especially healthcare and medication – this neglect could be perpetrated by their own children, but was also an issue among humanitarian actors, which often overlook elderly populations. Even when they do run programmes that offer them free and accessible services, they are rare, too basic to be truly useful, and are regularly interrupted with no continuity. In Lebanon, one KI added that “in light of the current crisis, older persons’ uncountable needs (medication, assistive devices, hospitalisation, mental health support) are extremely difficult to access, and there are no people to provide care. Many are begging merely to secure food. This shows that on the family level, even if they have children, they are unable to help or do not want to.”

Another risk was economic violence, such as their children confiscating their resources or not providing them with financial support. In many cases, they are not always mobile and stay home, which either exposes them to violence (especially in camp/informal settlement settings), or results in the expectation of being required to care for their grandchildren while their children are outside the home working.

A KI from Syria said that older persons placed in hospice care were sometimes at risk of physical (women and men) or sexual (usually women) violence by service delivery staff and guards.

One KI from Jordan said, “elderly women are sometimes being forced to look for employment – which is violence to begin with – and the types of informal employment they find further exposes them to risks. They are not even safe when they attempt to seek out supportive services.”

PERSONS WITH DISABILITIES (PWD)

PWD are a particularly vulnerable group when it comes to the perpetration of GBV in general. This can include:

- **Neglect**, lack of prioritisation of needs, or inadequate care (sometimes because of lack of awareness)
- **Lack of integration into the community** out of embarrassment, fear of stigmatisation, or protection concerns (especially among girls). A KI from Syria mentioned that families are sometimes afraid that having a child with a disability might affect their other daughters’ chances to find husbands.
- **Denial or lack of availability of services** (especially healthcare) and assistive devices (usually because of a lack of specialised medical personnel who can deal with the specifics of the case, no coverage or free services, and/or the unavailability or prohibitive costs of the necessary care or devices). As with older populations, humanitarian service delivery often neglects PWD, and services tend to be very basic, non-specialised, and regularly interrupted.

- **Denial of education** in order to allocate resources to other priorities, lack of qualified or expensive learning facilities, or rejection by the schools.
- **Sexual abuse and rape**, especially if they are unable to protect themselves, cannot communicate or have no access to reporting mechanisms, or do not have a full understanding to what they are being subjected. While this type of violence can target all PWD, it is especially common among adolescent girls.
- **Exploitation** of the existing disability for financial gain (such as sending them to the street to beg).
- **Economic violence**, where workplaces may reject fully qualified candidates because of their disability, or accept them and pay them lower wages.
- **Emotional and psychological violence** including bullying and belittlement.
- **Security issues (Syria only)**: Some KIs mentioned that persons (usually men) who have sustained physical disabilities as a result of war usually face security issues.

A KI in Lebanon who works with refugee children with disabilities explained that when he asks them if they are going to school, the response is usually “No, because no school is accepting me.” While Lebanese law prohibits the denial of admission to education institutions based on disability, it continues to be a wide practice. Additionally, even when admitted, children with disabilities do not have the necessary reasonable accommodations or support to learn¹⁸.

“In Jordan, adolescent girls with disabilities were facing forced sterilisation. By law, this is no longer allowed, and a *fatwa* has been issued against it. However, the practice continues.”

- KI, Jordan

An important consideration is that the nature of the disability sometimes plays a critical role in regard to the form and extent of the violence. For example, girls with intellectual disabilities are more commonly targeted by perpetrators of sexual violence because “they may not understand what is happening to them,” or because the aggressor feels more secure about the possibility that the girl would not be able to report, or would not be believed even if she does.

Service providers have often said that they do not have the necessary training or skills to communicate with PWD, and further limitations are faced in cases of auditory disabilities: personnel often have no knowledge of sign language, and interpreters should usually be brought in and paid for by the PWD themselves. During COVID-19, even individuals who could lip-read were no longer able to do so as a result of mask-wearing.

A few KIs from all countries noted that “even host community members with disabilities face issues obtaining free or subsidised services, and generally have to resort to extremely expensive private institutions, which are almost always unaffordable to Syrian refugees.”

LGBTQI

With the exception of Jordan, which decriminalised homosexuality in 1951, the Penal Codes of Lebanon, Syria, and Iraq still criminalise homosexuality and transgender expression, which are punishable by imprisonment. LGBTQI individuals, especially gay men with feminine expression that does not adhere to social constructs of what a “man” should be, and transwomen are at highest risk of arrest, torture,

¹⁸ IFES, ABAAD, LUPD, 2022. “The Status of Women with Disabilities in Lebanon: A Snapshot of Socio-Political and Economic Impacts from an Intersectional Lens.” <https://www.abaadmena.org/documents/ebook.1658233221.pdf>

discrimination, harassment, physical assault, and rape. Many have faced death threats, some of which were actually carried out – including via execution by extremist groups.

In Lebanon, most KIs were absolute in affirming that LGBTQI refugees faced some of the harshest types of violence. Due to the conservative nature of their communities, most avoided living in camps and had to rent private accommodation. Some cases have gotten evicted, while others faced exploitation such as being forced to provide sexual favours – this is observed quite often among transwomen, who usually cannot find employment due to their appearance, and are forced to turn to survival sex to secure their needs. One KI mentioned that *“queer women and men can be forced to get married and have a family, and their refusal can lead to physical violence.”* Finally, having an intersectional identity of being a Syrian refugee who is LGBTQI *“leaves them more exposed to legal and security troubles.”* One KI said that at some police stations, anal tests are still being conducted.

Only one KI in Syria reported a case of *“a lesbian women who was repeatedly kidnapped, imprisoned, and abused by different parties to the conflict, until one day she woke up to find herself in a street in Damascus.”* The rest mainly said that members of the LGBTQI community *“do not have the courage to face society’s prejudice, lack of acceptance, and violence, so they go through all their issues in secret.”* In 2020, Human Rights Watch was told by over 40 LGBTQI refugee survivors that they had been raped and had their genitals burned by government forces and armed groups (including the Islamic State) alike.

A KI in Jordan remarked, *“Sure, homosexuality is not criminalised, but this is not an indicator of acceptance, it is more of a ‘we do not need to ban something that does not exist’ approach. Instead, persecution of LGBTQI groups is conducted on the basis of public morality.”* She added, *“If you are an LGBTQI Syrian living in a camp, you find a way to get out. UNHCR can facilitate some relocation support when lives are at risk, and cases which are accepted are resettled. Some LGBTQI did not want to leave their families so they have stayed in the camps, but they live their lives secretly.”* Another KI said that Syrian refugees carefully keep matters of sexual orientation hidden, and when needed, the only type of support they seek is financial.

KIs in KRI did not provide much information, but one said that gay men faced the most instances of rights transgressions, discrimination, harassment, and rape.

INTERNALLY DISPLACED PERSONS (SYRIA ONLY)

In addition to the forms of violence that affect the different population groups, IDPs are also at risk of heightened bullying or lack of acceptance in their communities of displacement. They often feel weaker due to a lack of influential social connections and supportive networks, and this can impact their help-seeking behaviour.

CHANGES IN GBV INCIDENCE AMONG RETURNEES (SYRIA ONLY)

One of the elements this research aimed to understand was how GBV practices changed – if at all – among refugee households who had returned to Syria from their countries of displacement (*returnees*). This was addressed through asking FGD participants whether they had first-hand experiences or had heard stories from trusted acquaintances. Additionally, the five interviewed stakeholders from Syria were also asked to detail their GBV-related observations among returnee households that they may have supported within the scope of their work.

The only relevant information was gathered from the FGD participants. Syria KIs were unable to provide any insight into the situation of returnees, largely because they had no data. Some explained that the critical concerns facing returnees were security issues including detainment for questioning upon return. They were also not well-regarded in their communities, and faced a number of issues, “or were treated as outsiders at best.” In order to avoid these problems, any refugee families wishing to return to Syria from their countries of displacement are generally doing so through illegal smuggling, *“which of course poses risks of violence, human trafficking, and loss of life.”* Returnees also avoid declaring their returnee status if and when they seek help, instead pretending they are IDPs who were in other governorates.

While FGD participants in Lebanon had slightly differing responses, the pervasive opinion was that GBV increased following their return to Syria.

Most women and girls recounted significantly negative experiences following their return to their governorates of origin in Syria: their mobility was extremely restricted, and they could not move freely within or outside their communities because of the *“overwhelming incidence of sexual harassment and assault,”* there was a high level of child marriage, high tensions and violence as a result of financial hardship and the chaotic security situation, and prejudice and discrimination against returnees from Lebanon.

“The women we know who left Lebanon to Syria regretted it. There, their living conditions worsened, and they lacked the ability to secure even their most basic needs. Women were being forced to work in precarious conditions, girls were being married at the age of 12 years old, and violence was rampant because of the ‘loose’ security situation. Society viewed returnee women as ‘different,’ foreigners to the norms and traditions of the local community. They have returned to Lebanon and cannot imagine ever going back.”

- Women and Girls FGDs, BML

“Our neighbour returned to Syria and was not only unable to continue her education, but she was not even able to leave her home because of the way that people were looking at her and judging her clothing.”

- Girls FGD, Bekaa

“We are from Aleppo, and when we returned, my girls and I were under so much pressure from our family members because of how we were dressing, even though we are all still veiled. On the road, people stared at us as though we were naked. We had to give in and comply with the local dress code until we left and came back to Lebanon.”

- Women FGD, Bekaa

On the other hand, women in the North believed that *“The interventions of different NGOs in Lebanon raised refugees’ awareness during their stay in Lebanon, and prepared them in a way that led to a decrease in the incidence of gender-based violence, despite some continuing negative practices.”*

Another interesting finding emerged among women in the South, who also believed that GBV had decreased: *“Women in Syria now have more power, especially since many of them have become their household’s breadwinners. We have heard of several cases where they reported their violent husbands to members of armed groups or GoS checkpoints (using bribes). Women now pose a threat to men.”*

The relative majority of men felt that violence rose among returnees due to the difficult economic conditions and the increased hardships that families are faced with, including forced labour and associated exploitation.

On the other hand, the group in the South noted that the practices remained the same regardless of the country of residence, while the group in Bekaa believed that it decreased.

“Naturally, violence decreases when families return to Syria, but it does not completely disappear. It decreases because Syrian society differs completely from that in Lebanon – in Syria, most women stay at home. Religion strongly impacts social norms, and communities abide by and respect it. Thus, violence decreases. On the other hand, it also does not disappear completely because many members of the younger generation are carrying the cultural norms they have learnt in Lebanon, and so they do practice violence, to some extent, in their areas of return.”

- Men FGD, Bekaa

A possible explanation behind the ideology of the men in the Bekaa group, according to a GBV case management KI in Syria, is that *“GBV is extremely widespread across the country, but in the vast majority of cases, society is often unaware that their practices fall under the definition of violence or GBV; rather, they believe that they are following socially acceptable customs and traditions.”*

MOST AT-RISK GROUPS

Unsurprisingly, based on responses from across all data sources¹⁹, the top population groups who were most at risk of gender-based violence were **women** and **adolescent girls**.

Some KIs and FGD participants noted that women are at risk of GBV in general: if they are married, they can be subjected to IPV, while if they are without a male “protector,” they risk harassment, exploitation, and sexual abuse.

“Women are the weaker sex. Even when a woman is strong and able to manage her affairs, she remains the most vulnerable to discrimination, exploitation, and violence. As long as women are always striving to secure their families’ needs, they will always be exposed to mistreatment.”

- Women FGD, South

“The most at-risk group? Girls! Parents are always worried about their daughters, so they deprive them of so many things. On the street, at school, anywhere – a girl is always at risk of harassment, and she is constantly afraid of everything, waiting until she gets married... And then, she is more afraid of her husband and his violence.”

- Girls FGD, BML

An alarming justification for selecting adolescent girls as the most-at risk group came from adult men FGD participants in the Bekaa: **“adolescent girls are of a very attractive age.”**

They continued to explain that *“adult women are always searching for assistance and that exposes them to danger,”* while *“men are responsible for securing their households’ basic needs such as filling water and*

¹⁹ KIs from all four countries, as well as FGD and individual survey participants.

buying bread²⁰, which exposes them to the most aggressive types of verbal and physical violence, bullying, and being treated as inferior by the host community.”

Following women and girls, most interviewed stakeholders in Lebanon considered **LGBTQI** to be at high risk of GBV. Organisations working with the LGBTQI community further elaborated that while the entire community faces issues, the most at-risk groups were transgender individuals, gay men, and older members of the community. This was echoed by some KIs in Jordan and KRI.

On the other hand, all 5 KIs from Syria noted that LGBTQI individuals generally avoid revealing their sexual orientation, which they keep “shrouded in secrecy” out of fear of familial reactions, as well as social stigma, ostracism, and discrimination. Accordingly, any issues they face are unknown to service providers. In order to further illustrate her point, one KI explained, “*one mother participating in an awareness session asked how she could change her son’s ‘homosexual tendencies’ because ‘society will be merciless’.*”

Other groups reported to be at heightened vulnerability to GBV in all four countries included **persons with disabilities**, **adolescent boys**, and **older persons**, particularly women. In Syria, KIs also considered **internally displaced persons** to be heavily affected by violence.

SEXUAL EXPLOITATION, ABUSE, AND HARASSMENT (SEAH) IN THE HUMANITARIAN SECTOR

While a limited 6% of the total sample of survey respondents considered sexual exploitation in the humanitarian sector to be one of the top three predominant forms of violence in Lebanon, qualitative findings differed, as FGD participants from all governorates in Lebanon confirmed that **SEAH was a common and widespread practice** by some NGO distribution staff members.

The issue most frequently reported by women, girls, men, and boys was **male staff members requesting sexual favours in return for assistance**. The examples they provided included:

- Many cases of male distribution staff members who were giving more assistance (financial or in-kind, such as health and hygiene kits, food baskets, and school supplies) to women and girls who accepted having sexual relations with them, adding that older women and widows who refused received nothing.
- Male staff were asking women and girls for their phone numbers, telling them that if they go out with them, they ‘promised’ they would facilitate or speed up their receipt of assistance (which may or may not happen).
- Registering women who accept to provide sexual services on beneficiary lists without them necessarily satisfying the eligibility criteria, and removing those who refuse.
- Some women are entering into “*emotional relationships*” with aid workers strictly to secure assistance. Some added that “*women who are responsive to the approaches get anything they want.*”

²⁰ In recent months, due to the scarcity of bread in the local markets, several news stories emerged about bakeries “prioritising” Lebanese residents and turning Syrian refugees away from bread queues, particularly in the Bekaa. Related clashes and tensions were reported. [This report by Save the Children provides further details.](#)

“It happened to me twice, once in a Lebanese organisation and once in a Syrian organisation. A male staff member told me, ‘if you give me your number, I will help you.’ So, I have stopped asking for services.”

- Women FGD, Bekaa

This was followed by **fraud and bribery**:

- Shelter rehabilitation projects were reported to be *“hotbeds for corruption in which NGOs collude with landlords for financial gain.”* For example, at an assessed shelter which was provided with a rehabilitation grant of USD 3,000, the landlord only used USD 1,000 for repairs, and threatened the refugee residents with eviction if they complained.
- Some distribution staff members were registering households for assistance because they had personal relationships, or because they offered them bribes.

“Once, a staff member from an assistance programme for Syrians forced me to carry things to his house in return for one box of aid. He said if I refused, he would not register my name on the beneficiary list.”

- Men FGD, South

When it came to KIs, the vast majority reported that sexual exploitation exists in the humanitarian sector, albeit to varying extents. While some said it was *“unfortunately extremely common, especially in light of the acute needs which facilitate the abuse of power disparity”* others were more cautious, explaining that *“while we have (often) heard of such cases, there have been no official reports of figures or investigations proving the allegations, so at this point they can only be considered hearsay.”* A minimal number from different countries said they had not heard of SEAH incidents.

One KI in Lebanon simply said, *“If it were not common, we would not have had to create PSEAH networks and reporting mechanisms.”*

Several across all four countries noted that the practice of reporting remains uncommon for a number of reasons.

Among beneficiaries, it is mainly the culture of silence, personal safety concerns, and lack of trust in the system and its ability to mete out just punishment (fear of retaliation, of scandal, and of losing assistance), but it is also the lack of awareness of how, where, and to whom they can report.

“An adolescent girl who told me she had been sexually harassed by an aid worker also said, *‘There is no way I would report him because he knows my parents, and if they learn of the case, I am afraid of the scandal that will follow.’*”

- KI, Lebanon

“In a certain camp in Northern Syria, women are being exposed to various types of GBV, including sexual exploitation, by the staff and supervisors working there. However, they cannot do anything about it because while employees are civilians, they all have strong connections to the armed groups controlling the area.”

- KI, Syria

“It is an overly common phenomenon that we are diligently working to address. In camps, harassment and rape are common and can be perpetrated by humanitarian workers from outside the camp, police, or camp security members, and are sometimes in exchange for a promise of support in the future, not on-the-spot assistance. Often, beneficiaries can neither document nor prove these cases.”

- KIs, KRI

“Several women have told us that employees of some local organisations providing in-kind services and assistance, including a few Islamic charities, were trying to sexually exploit them by ‘bartering’ aid in exchange for services or relationships of a sexual nature. However, they did not believe anything could be done about it.”

- KI, Jordan

Among civil society actors, especially but not limited to smaller NGOs whose funding may be somewhat limited, there is also an unwillingness to launch investigations and report findings because of the worry it may count as a “black mark” against them, that they may lose funding, or that their reputation gets negatively impacted. A couple of KIs also spoke of an incident some years back, where a local NGO supporting LGBTQI refugees was accused of sexually exploiting some of its beneficiaries. They said that while there was an investigation, somehow the matter “was swept under the rug” and forgotten.

Another barrier to reporting SEAH by staff witnessing it was shared by a KI in Syria:

“There are no serious reports or legal repercussions when it comes to sexual exploitation in the humanitarian sector. This is because neither beneficiaries nor staff members know how to deal with this issue, to whom they can safely speak, and who could protect them. They are afraid of retaliation, revenge, or losing their jobs – if a volunteer or employee reports a manager for such misconduct, the manager usually escapes unharmed, while the person making the report may lose their position.”

REPORTING PRACTICES

“GBV actors in Syria have been stuck in the awareness-raising stage for over a decade and counting. Some good work has been done, and women are now much more aware of their rights and of the different types of GBV. But then again, no matter how much awareness-raising we all do, if there are no laws and no real support, what is the point? If they go to report and are told to drop the charges for their own safety, what is the point? If they go to a police station where the officers can easily be bribed, and from being the victim they suddenly turn into the perpetrator, how can anyone dare to report?”

It is not a surprise that formal reporting is very low – but of course, it depends on their situation. If they are well-connected and backed by dignitaries who will help, then they may report certain types of violence, whether they are locals or IDPs. If they are not, they will absolutely avoid reporting out of fear of the bad treatment and harassment that will follow.”

- KI, Syria

According to responses provided by all interviewed KIs, Syrian refugees’ GBV reporting practices were similar in all four countries, and can be summed up as follows: refugees almost never feel safe reporting to formal infrastructures, and would seldom or never turn to them for support for a number of reasons such as fear of mistreatment, fear of racism or injustice especially if the perpetrator is a member of the local community, lack of documentation and fear of associated repercussions, and a general lack of trust in governmental structures. While the ISF in Lebanon has a domestic violence hotline, “*with the current crisis,*” one Lebanon

KI noted, *“the police are even less reliable because they do not have gas to come deal with any reported cases.”*

Additionally, due to socio-cultural norms, they largely tend to avoid reporting GBV, and when they do, it is to hotlines, reporting mechanisms, Listening Centres, and WGSS run by NGOs. Some KIs also said that reporting has often taken place during or after awareness sessions, field outreach, and even unrelated activities such as WASH or S&S interventions to employees with whom they have built trust. In these cases, the employees make referrals to the necessary services or relevant partners. Sometimes the reporting is not done directly by the survivor, but someone else may report on her behalf, because she may be afraid to talk, especially in cases of IPV.

On the whole, all KIs agreed that reporting figures remain extremely low in comparison to the reality on the ground.

In Lebanon, the vast majority of local NGOs working on women’s rights, GBV, and protection have established reporting mechanisms that include hotlines and social media channels. Syrian women and girls in Lebanon are now generally aware of their availability, and many are using them to report as a result of intensive awareness-raising efforts through public campaigns, social media, and community outreach.

Recent research focusing on women with disability in Lebanon led by ABAAD, IFES, and the Lebanese Union for People with Physical Disabilities (LUPD)²¹ showed that reporting mechanisms are often inaccessible or unknown to women with disabilities (primarily but not limited to auditory and intellectual). NGOs and formal structures still have not integrated sufficient reasonable accommodation considerations into their response, which needs to become a critical cross-cutting programme design axis.

When it came to LGBTQI refugees in Lebanon, one KI said *“they do not report because they are afraid. They do not know when or what they should report, and even when they come to us for help, we have to decrypt the messages they are indirectly trying to convey.”* This was corroborated by another KI working with the same population: *“Our social workers have a list of questions they ask in order to completely widen the scope and understand what is wrong, especially given that many are afraid of divulging what has happened to them.”*

In Jordan, a KI said that the most commonly reported form of GBV is IPV, *“but there is a difference between what is most common, and what is actually reported.”* She added that *“each year, there has been an increase in the number of reported cases – however, this does not necessarily indicate an increase in GBV, it may be that people have begun to report more.”*

Some KIs in KRI said that refugees rarely report abuse, except in cases where it gets extremely severe due to concepts of honour. Another said that for a period, reporting practices had begun improving, but they have dwindled again:

“When Syrian refugees first arrived in Iraq, they did not report violence because of customs, traditions, and fear of the society to which they belong. They were also afraid of the police and detainment. After some time, as a result of NGOs’ rigorous awareness-raising and trust-building efforts, some women felt more encouraged to speak out about their issues. Our offices were always open in camps across KRI, and women could always

²¹ IFES, ABAAD, LUPD, 2022. *“The Status of Women with Disabilities in Lebanon: A Snapshot of Socio-Political and Economic Impacts from an Intersectional Lens.”* <https://www.abaadmena.org/documents/ebook.1658233221.pdf>

seek help. However, we are currently facing a serious challenge: because the country is shifting from an emergency context to a stable solution, organisations are reducing relief and emergency response interventions in favour of development efforts, and are handing over projects and safe spaces to the state. As a result, fear has once again increased, and reporting levels have naturally started dropping.”

- KI, KRI

ASSOCIATIONS: ECONOMIC CONDITIONS AND GBV

BRIEF OVERVIEW: REFUGEE ECONOMIC CONDITIONS PER COUNTRY

In 2019, as a result of years of state corruption and unsustainable financial policies, Lebanon began witnessing what would become an unprecedented economic crisis, deemed by the World Bank “one of the worst globally since the mid-19th century.” Over the past three years, Lebanon’s local currency has lost over 95% of its value, which has resulted in an inflation rate exceeding 200% in the import-dependent country. The compounded socio-economic crisis has affected all sectors nationwide, but has hit the most vulnerable Lebanese and refugee families the hardest. The preliminary findings of the 2021 VASyR reveal a dire situation among Syrian refugees, where nine out of ten families are living in extreme poverty.²²

Similarly, the Syrian conflict and its accompanying crises which include displacement, economic sanctions and extreme recession, and devaluation of the local currency have increased financial burdens and severely impoverished the population. Just as with Lebanon, Syria is also heavily import-dependent, and in the last two years, a hyperinflation of more than 800% has been recorded. Currently, over 90% of the population lives below the poverty line.²³

In Jordan, most refugees live in cities, while others reside in camps such as Azraq and Zaatari. According to the United Nations, 83% of Syrian refugees outside camps in Jordan live below the poverty line, with 60% in extreme poverty. Most Syrian families rely on humanitarian aid at a time of aid cuts and economic crisis, compounded by COVID-19.²⁴

In Iraq, information on poverty levels among Syrian refugees is lacking, but in 2020, the World Bank indicated increases in poverty and economic vulnerability in KRI among host communities (24%), refugees (21%), and IDPs (28%), especially as a result of COVID-19.²⁵

ECONOMIC CRISIS IMPACTS ON REFUGEE HOUSEHOLDS IN LEBANON

A total of 86% of surveyed households confirmed that Lebanon’s economic crisis had affected their family. Another 10% said that the crisis only somewhat affected them, and those were mainly families who reported relying on humanitarian assistance as their key source of income, adolescent girls, and the household who said they covered their expenses with their deceased father’s pension. Only 4% reported no effects, and

²² 2021 Vulnerability Assessment for Syrian Refugees in Lebanon (VASyR). <https://data.unhcr.org/en/documents/details/90589>

²³ Euro-Med Monitor, 2022. “Syria: Unprecedented rise in poverty rate, significant shortfall in humanitarian aid funding.” <https://reliefweb.int/report/syrian-arab-republic/syria-unprecedented-rise-poverty-rate-significant-shortfall-humanitarian-aid-funding-enar>

²⁴ ECHO, 2022. “ECHO Factsheet – Jordan, May 2022.” <https://reliefweb.int/report/jordan/echo-factsheet-jordan-10052022>

²⁵ World Bank, 2020. “Deepened and Prolonged Poverty Affects Syrian Refugees and their Hosts, Requiring Bold Action.” <https://www.worldbank.org/en/news/press-release/2020/12/17/deepened-and-prolonged-poverty-affects-syrian-refugees-and-their-hosts-requiring-bold-action>

once again, they were mainly adolescents and households who relied on humanitarian assistance or support from relatives and friends.

The key impacts of the crisis were salary reductions or devalued income which reduced households' purchasing power and ability to secure their necessities (65%) and loss of employment due to employee cuts or reduced opportunities in the labour market (61%).

Figure 6 - Key Impacts of Economic Crisis on Refugee HHs in Lebanon

ECONOMIC CRISIS IMPACTS ON HHs	OVERALL	FEMALE	MALE
Reduced/devalued income	65%	60%	71%
Loss of employment/employment opportunities	61%	58%	64%
Reduced access to humanitarian assistance	37%	40%	33%
Increased psychosocial pressures	30%	36%	23%
Reduced ability to cover basic HH needs and expenses	27%	31%	22%
Increased tensions in the household	17%	20%	14%
Reduced access to healthcare/medication	11%	16%	4%
Shifts in gender roles	3%	4%	1%

In addition to the issues in Figure 6, a limited number of respondents reported that the crisis forced them to withdraw their children from school, one male from the Bekaa said his and other households were “no longer receiving support from the UN,” and one female also said that all working members of her household had lost their jobs, and her *“family has broken apart; everyone is now in a different country.”*

Both KIs and community members flagged that since the onset of the crisis, tensions between host and refugee communities have worsened because of the competition for limited resources (bread, basic items, employment), in addition to refugees' receipt of financial humanitarian assistance, which some KIs believed *“was in USD and thus provocative to local communities with no access to dollars.”*

When asked about the main coping strategies adopted by households to deal with the crisis, responses included moving to a less expensive residence or informal settlement (45%), selling property and productive assets (38%), limiting or halting paid service-seeking including health and legal (29%), and moving in with other families or to collective shelters after having resided in single-family accommodation (21%).

Additionally, 29% reported deprioritising resources for women and girls including healthcare and medication, feminine hygiene products, and education in order to dedicate resources to other basic needs. Some KIs said that since midwives and gynaecologists are often the first gateway to reporting, avoiding medical consultations contributes to reduced GBV reporting and service-seeking.

To a lower extent, other reported coping mechanisms were removing children from school to send them to work, moving back to Syria or migrating to other countries with better economic conditions, increased violence and aggression to cope with stress, marrying children under 18 to reduce financial burdens, increasing workloads or working 2-3 jobs to supplement income, turning to illegal activity such as theft, and deprioritising self-care and recreational activity. A few respondents declined to answer.

CORRELATIONS BETWEEN ECONOMIC CONDITIONS AND GBV

While the relationship between poverty and GBV can in no way be considered mutually exclusive, the full sample of interviewed KIs affirmed their perceptions that economic hardship is a strong driver behind the incidence of GBV, and a key factor in exacerbating its different forms. One KI emphasised *“that while it is certainly a correlation, it is neither a justification nor a real excuse; a perpetrator will inflict violence regardless of the conditions.”*

“A few years ago, when the UN announced that cash assistance was going to be cut down, there was a spike in reported GBV cases.”

- KI, Jordan

The constant psychological and living pressures of being unable to secure livelihoods and basic needs manifest as tense relationships, whether in the home or outside it. Some KIs explained, *“Without healthy coping strategies and with no solutions in sight, family members can often turn to violence as an outlet to vent their frustrations. Within the family, husbands can be violent with their wives, mothers with their children, and children with one another. **Everyone becomes a victim and a perpetrator.**”*

Additionally, the dire economic situation can also expose all family members to different forms of violence, especially from external sources, because *“it becomes easy for perpetrators to exploit desperation.”*

“Economic pressures, the lack of job opportunities, and the high costs of rent and living increases men’s anger and aggression. A man’s anger is often targeted at the children, and the mother is always in the middle trying to protect them, which places her at the brunt of his violence. In many cases, in addition to all our responsibilities, women are often having to take on the role of breadwinner.”

- Women FGD, BML

A KI from Jordan noted, *“Women are being exploited and working for half the wage in dangerous places with unsafe conditions, and they are being subjected to sexual blackmail.”* This was also confirmed by a KI in Lebanon, who said that a study conducted in the North showed that women were earning one third of the amount that men were receiving, because of the belief that they are *“less productive”* than men, and more available to work, thus making them easier to replace. Sexual abuse was also reported to be widespread.

The same KI flagged an extremely important point related to **NGO income-generation interventions enforcing gender roles instead of empowering women** to realise that they can do whatever they want:

“Livelihood and TVET programmes are being implemented to support vulnerable people, and no one can deny they can be helpful. But many of these programmes do not accommodate gender considerations and women’s needs. Instead, they perpetuate gender inequalities through enforcing hegemonic gender roles. For example, one such programme in another Arab country engaged men in construction work, while women were asked to cook and serve the men.”

In KRI, a KI said that women are now more likely to find work than men, especially since NGOs are focusing on women’s empowerment and supporting them with job placement. Centres which have opened within camp settings began employing women, and they also found positions at schools and workshops, among others. This exposed them to economic violence, violence in the workplace, and, on top of that, intimate partner violence. He added that *“another form of economic violence we are witnessing is men taking second wives who are financially secure, and abandoning their first family.”*

In addition to IPV, violence against children in the form of child marriage and child labour increase. If caregivers are unable to pay for basics at the end of the month, or cover their children's education costs, they may send their children to work or marry their daughters in exchange for money.

Survival sex and sex in exchange for rent, compounded by the risks associated with such work, were also reported to be common among women by KIs in all countries, and among LGBTQI by three KIs from Lebanon. The latter explained that LGBTQI refugees were already facing economic challenges due to limited ability to find employment, and this worsened with Lebanon's crisis. Their economic dependency has exposed them to two main challenges: either being forced into sex work, or no longer being able to afford accommodation and having to move back in with their families, where, as a result of their SOGIESC, they are exposed to GBV.

ASSOCIATIONS: COVID-19 AND GBV

COVID-19 was declared a global pandemic by the WHO in March 2020. National response plans were set and adopted by countries all over the world. One key preventive measure applied globally was state-imposed lockdowns, which while intended to safeguard public health by curbing contagion, resulted in a long downward spiral of living conditions, inability to secure livelihoods, and restricted access to or suspension of lifesaving services. Among refugees, lockdowns also meant prolonged periods indoors with all members of the household, often in very tight spaces which reduced privacy and time to relax, and increased friction and tensions. Unsurprisingly, the situation disproportionately affected women: rates of GBV were compounded by quarantines, social isolation, and job and income losses exacerbating social stresses and negative coping strategies. Global research has indicated that these factors not only challenged women's ability to temporarily escape abusive partners and access emergency services, but they also placed them at heightened risk of violence due to increased societal stress. The lack of privacy and economic impacts also restricted women's ability to use phones or the internet to access remote support – either because they were unable to find private spaces, or because they did not have the means to secure credit to contact hotlines.²⁶

One KI from Lebanon said that *“at the beginning of the lockdown period, there was a rapid 140% rise in reporting, noting that GBV is always underreported, and many women were quarantined and could not even find the space to contact hotlines.”* Reports from Lebanon showed that the number and severity of GBV reports to the ISF domestic violence hotline, ABAAD's emergency hotline, and KAFA's helpline, among other GBV case management agencies, were all significantly higher in the first 5 months of 2020 in comparison to the total number of calls logged in all of 2019.²⁷

On the whole, key informants from all countries except Syria confirmed that the effects of the pandemic affected all people, refugees and host community alike, as a result of social isolation, the closure of public infrastructure and service delivery points, the difficulty in obtaining goods and materials, and labour-related issues and exploitation (such as termination, suspension, or reduction/withholding of wages). Most critically, being locked in together for extended periods of time increased family violence, and *“exposed children to things they should not have been seeing or hearing, and which became normalised.”* It also restricted victims' ability to escape their perpetrator.

²⁶ ABAAD, UNFPA, 2020. *“Mapping Gender-Based Violence Programmes, Services, and Policies in Lebanon.”*
<https://www.abaadmena.org/documents/ebook.1626097663.pdf>

²⁷ Ibid.

“Before the lockdowns, when things escalated with their husbands, women would leave and go to their relatives or neighbours until things cooled down. Additionally, perpetrators would also leave the house more often for work or recreation, which played a role in reducing tensions and slightly limiting violence. During quarantines, none of that was possible.”

- KIs, Jordan and Lebanon

A positive outcome of COVID-19 is that NGOs working with survivors had to rapidly adapt their operations in a manner that would limit interruptions to service delivery. Organisations that previously had no online or phone-based services had to adopt them, and others further expanded their remote assistance, adding web-based activities that allowed beneficiaries to participate even while in quarantine. A limitation to accessing these services was reported by individuals with no technological devices and older persons who did not know how to operate devices or online systems. However, they were the minority, as most community members felt these services offered a strong added value.

In Syria, KIs mentioned that it was impossible to really evaluate how COVID-19 affected the population and their practices, because the GoS only acknowledged the existence of the virus for one month. During that month, lockdowns were imposed, and all GBV stakeholders reported having witnessed a sharp increase in violence. One KI noted that *“this made the economic situation of households so bad that people were starving, so I believe that this could have been a main reason behind lifting all COVID-19 precautions and ignoring its existence.”*

COVID-19 PRECAUTIONS AND EFFECTS ON REFUGEES IN LEBANON

During the nationally imposed COVID-19 lockdowns, 91% of respondents said they had abided by the restrictions and stayed home with their families. The rest were 8% (mostly females from the Bekaa and the North) who said they had done so to some extent, and four respondents (one adolescent girl, two adult women, and one adult man from the Bekaa) did not stay indoors.

Approximately two-thirds of the sample said that COVID-19 had affected them (59%) or somewhat affected them (14%) personally, while 27% said that the virus had not had any effects on their lives. To note is that more females (60%) than males (40%) reported having been affected.

Among females, the effects considered most critical were associated with tensions and violence, stress, inability to relax, and the importance of privacy: increased tensions (56%) and reduced privacy (43%) due to family members being forced to be in the household for long periods, loss of employment and thus livelihoods due to the effects of COVID-19 on the employment sector (35%), reduced time and space for relaxation and self-care (32%), and increased stress and anxiety due to fear of contracting the virus, not being able to get treatment, and death (28%).

On the other hand, males placed heavier weight on loss of employment due to the virus, which many said required them to sell assets (38%), as well as the increased tensions due to lockdowns and being forced to stay home (33%), with some also highlighting certain municipalities enforcing curfews applicable only to Syrians. This was followed by physical effects due to contracting the virus (29%).

Figure 7 - Effects of COVID-19 on Respondents

COVID-19 EFFECTS ON RESPONDENTS	OVERALL	FEMALE	MALE
Increased tensions due to family members being forced to be in the HH for long periods	47%	56%	33%
Loss of employment due to COVID-19 effects on the employment sector	36%	35%	38%
Reduced privacy due to family members being forced to be in the HH for long periods	33%	43%	20%
Physical effects due to contracting the virus	27%	26%	29%
Reduced time/space to relax	26%	32%	18%
Increased stress and anxiety associated with the virus	23%	28%	16%
Effects on general health due to deprioritising seeking healthcare	18%	21%	13%
Continued health issues as a result of contracting the virus (long COVID, permanent organ damage, etc)	17%	16%	19%
Cyber-bullying and harassment due to increased reliance on internet	14%	15%	12%

COVID-19 EFFECTS ON RECEIPT OF SERVICES

Over half the sample of survey respondents (55%) noted that COVID-19 had also affected their ability to seek supportive services such as GBV response, PSS, and economic empowerment.

Effects were mainly perceived to be negative, where the main obstacles hindering service receipt, as reported by females and males alike, were i) reduced mobility due to lockdowns, curfews, and inability to use public transport (66%), ii) decreased or lack of availability of such services due to suspension of activities or lack of funding (48%), and iii) economic issues, such as being unable to afford or to dedicate resources to such services (38%).

Conversely, a much smaller percentage believed that their access to services had increased following COVID-19 as a result of the relevant stakeholders increasing their service provision (17%) or because many service providers shifted to online modalities (11%). In both cases, female respondents were around double the proportion of males.

Around 12% of the sample said that COVID-19 had not affected their ability to seek services in any way, while 30% said they had never tried to seek such services. The final 3% declined to respond.

CROSS-CUTTING EFFECTS OF COVID-19 AND ECONOMIC HARDSHIP

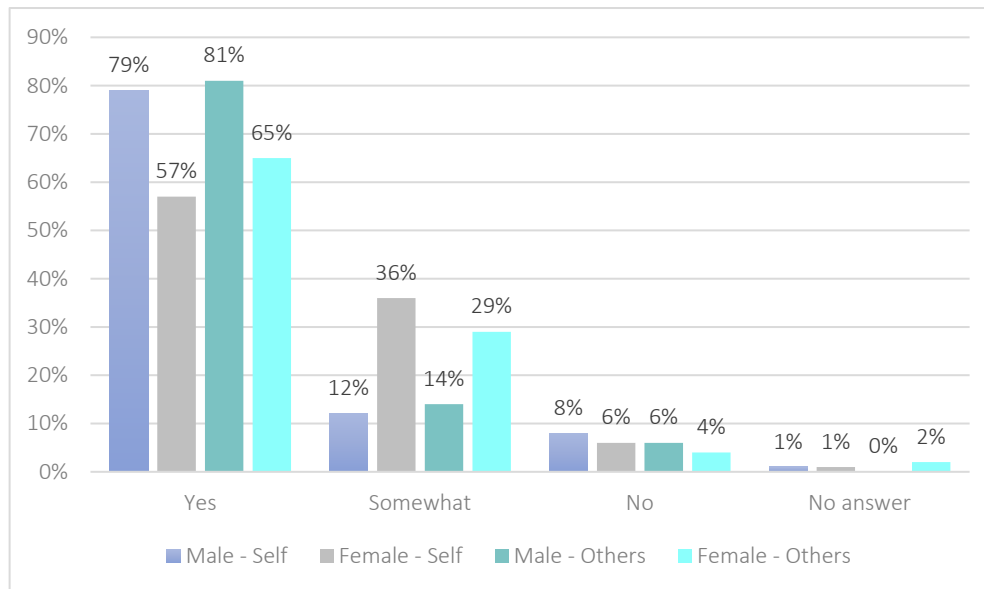
The humanitarian situation is still precarious in many conflict-affected areas, and the challenging economic situations among residents and IDPs in Syria and refugees in Lebanon, Jordan, and KRI, are exacerbated by the lasting impacts of the COVID-19 pandemic. The impacts of COVID-19 are directly interlinked with economic vulnerability.

The World Development Report 2022²⁸ noted that the pandemic “sent shock waves through the world economy and triggered the largest global economic crisis in more than a century.” The virus not only overstretched public services, but it also slowed development and decimated numerous businesses, greatly impacting the possibilities of employment and the ability to secure the basics (including food insecurity).

According to the 3RP,²⁹ “This situation also continues to lead to refugees seeking relocation to camps and not being able to cover costs related to multiple basic needs, such as renting adequate accommodation, purchasing food, ensuring children’s school attendance, and accessing adequate healthcare services.”

Effects of these cross-cutting issues have taken a huge toll on refugees’ psychosocial wellbeing, and the consistent pressures have created increased feelings of anger, aggressiveness, and tension, which have predictably played a role in creating negative household dynamics.

Figure 8 - Increased Anger in Self and Others due to Economic and COVID-19 Impacts



On the whole, the vast majority of respondents believed that the daily pressures and impacts of Lebanon’s economic crisis and COVID-19 had increased feelings of anger and aggression in themselves (92%) as well as in others around them (94%).

As shown in Figure 7, among males, 79% affirmed such feelings in themselves, with a

slightly higher proportion (81%) saying they had noticed it in others around them. As for women, a little over half the sample (57%) said they personally felt more anger and tension, while 36% said that they somewhat

²⁸ World Bank, 2022. “World Development Report: The Economic Crisis Impacts of the COVID-19 Crisis.”

<https://www.worldbank.org/en/publication/wdr2022/brief/chapter-1-introduction-the-economic-impacts-of-the-covid-19-crisis>

²⁹ 3RP, 2022. “Iraq Country Chapter.” https://www.3rpsyriacrisis.org/wp-content/uploads/2022/04/2022_3RP_Iraq_Country_Chapter_4apr22.pdf

did. When it came to others, a relatively higher proportion (65%) said they had noticed increases in anger in people around them, and 29% said that they had, to some extent.

Excluding individuals who had not noticed any differences and those who did not answer, half the respondents felt that anger was equally common among women and men, while 37% believed it was more widespread among men, and 11% said it was higher among women. The remaining 2% did not know.

Interestingly, based on their responses, males appeared to believe that anger and aggression were more common among men, where almost half (47%) said men felt more aggression and tension than women did, 42% said it was the same, and only 9% said it was more common among women. On the other hand, only 29% of females said it was more common among men, over half (56%) said it was the same among both genders, and 13% said it was more common among women.

ASSOCIATIONS: GENDER ROLE TRANSFORMATION AND GBV

In 2013, ABAAD and OXFAM conducted a rapid assessment³⁰ on the changing gender roles among Syrian refugees in Lebanon. Findings showed that migration had resulted in forcible changes to the core aspects of women's and men's identities:

As well as losing their traditional role as breadwinner, men seeking jobs and services also often faced threats and discrimination from some host community members. These issues manifested feelings of lower self-esteem, leading to a negative expression of masculinity and venting frustrations through abusing their power and increasing violent behaviour against women and children.

From their side, some women reported feeling that they had lost their femininity, as in addition to caring for their families, they now had to take on roles previously assumed by men: going to the market, running errands, making decisions, and working in paid informal employment. On the other hand, for some women this had created an increased sense of empowerment.

Interestingly, data collected for this research in 2022 validated these same findings. Some KIs from KRI did not believe that there had been any changes in gender roles, explaining that the majority of men are still the main breadwinners, and women are still at home handling household affairs and child-rearing.

However, KIs from the other three countries all voiced similar perceptions in regard to gender role transformation and GBV, explaining that the following different outcomes were possible:

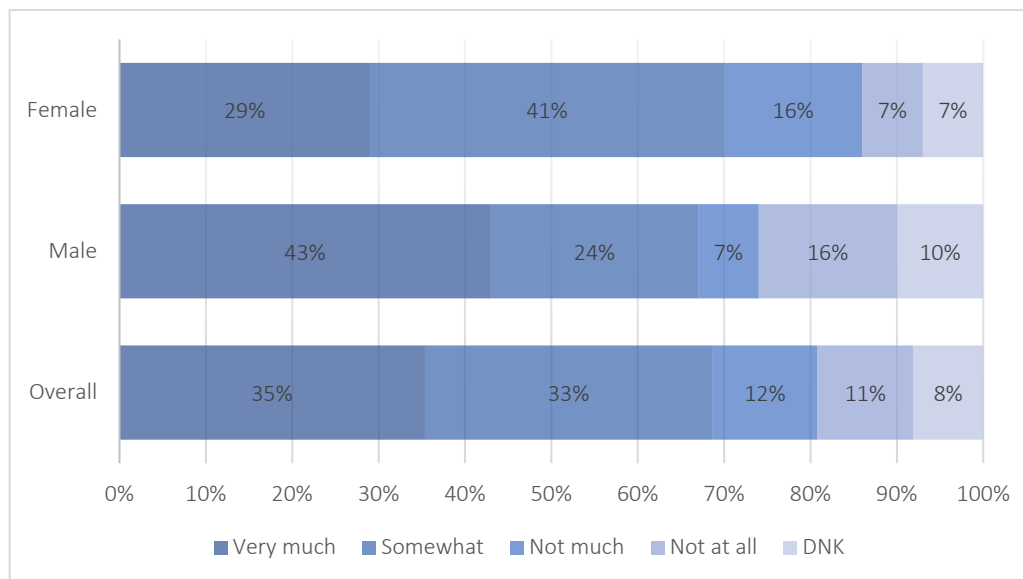
- **Positive:** Women having a breadwinning role and generating income has allowed them to become more active participants in managing affairs and decision-making at the family level. This, coupled with awareness-raising sessions led by NGOs, has made them stronger, allowed them to realise their rights, and to demand them, which has made their families respect them more. In some cases, while men are not “happy” about their wives working, they do not oppose their doing so because of economic necessity. Additionally, NGO awareness sessions with men have – in some cases –

³⁰ ABAAD, OXFAM GB, 2013. “Shifting Sands: Changing Gender Roles among Refugees in Lebanon.” <https://www.abaadmena.org/documents/ebook.1474622672.pdf>

succeeded in changing their mentality towards certain issues, which has created healthier dynamics in the household.

- **Negative:** Economic empowerment among women is not always well-received, and sometimes results in their husbands becoming extremely violent in order to assert their dominance and authority. In some cases, even if women entering the labour market do not experience consequent violence at home, they may face it in different forms in or on the way to the workplace.

Figure 9 - Belief that Shifts in Gender Roles Affect GBV Incidence



While only slightly more females (70%) than males (67%) believed that gender role transformation is associated with the incidence of GBV, almost half the sample of males (43%), in comparison to only 29% of women felt that the effects of these changes were *very significant*. On the other end of the

spectrum, while an equal proportion cited little to no effects (23%), more men than women said there were no effects at all. A total of 8% of the sample did not know.

Of respondents who believed that gender role transformation affected violence, 80% said it increased GBV, primarily because men became more aggressive in order to establish dominance. Some FGD respondents said that this is especially exacerbated when they view their women to be more “arrogant” as a result of increased levels of awareness and empowerment to demand their rights.

To a lesser extent, both female and male respondents said that men felt insecure about their wives and daughters being outside the household, afraid that their wives would become financially independent and leave them, or worried about social and community pressures that may reduce their self-worth because their “*wife is wearing the pants in the household,*” all of which contribute to increased violence in different forms, including economic, where they would confiscate any wages earned by the woman. Some KIs and FGD participants also said that in many cases, men have been confiscating humanitarian assistance earmarked for women’s empowerment, where “*as soon as the woman withdraws the amount, the man takes it and spends it as he pleases, without consulting her.*”

The 20% who felt changes in gender roles decreased GBV were almost equally divided at 51% male and 49% female. They justified their perception by saying that as a result of shifts in gender roles, men begin taking on more household chores and supporting their wives, are more engaged in childcare and unpaid care work, and become more aware of the daily pressures women face, which may make them less aggressive and more open to bearing responsibility.

“Men no longer have authority over women, because we have been freed from our dependence on them. In some cases, it is now the women who are abusing their husbands! Women’s work has made them stronger. However, these changes have led to many cases of divorce, because men are not accustomed to being the “followers” while their wife earns and spends money.”

- Women FGD, South

“I have been working in GBV response for 10 years. I have never, ever seen the displacement situation pushing men to appreciate women’s role, including when they are receiving more assistance or are the main breadwinners. In the informal settlements, the women would come back from the fields and have to do laundry, clean, and cook, while the men would have been spending the day drinking tea with other men. They always waited for the women to come and deal with chores.”

- KI, Lebanon

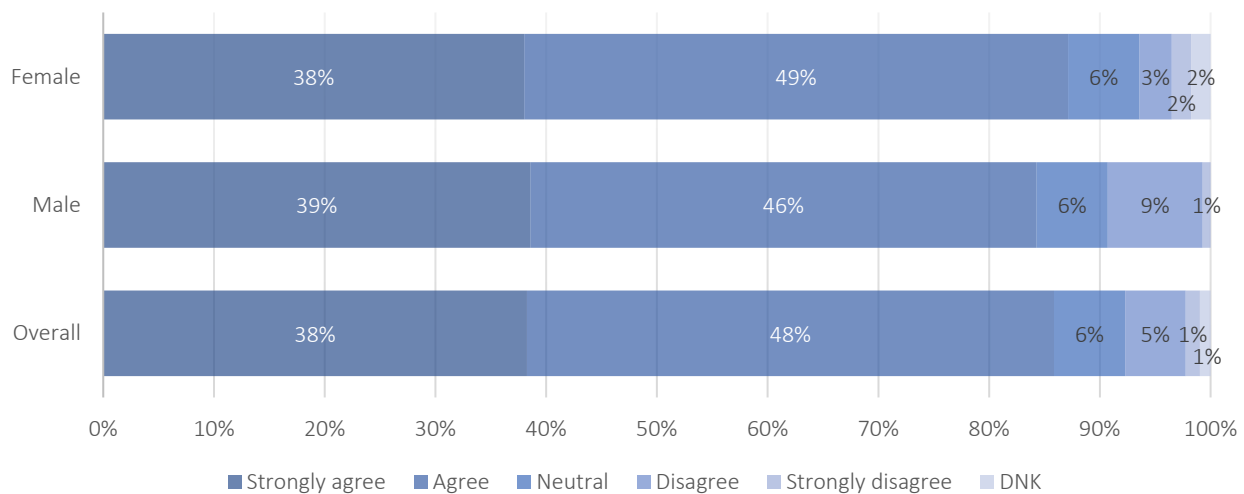
BRIEF KNOWLEDGE, ATTITUDES, AND PRACTICES SURVEY

As an additional exercise to scope out GBV-related attitudes and practices, the quantitative household survey included a brief list of ten questions covering key areas that were deemed of importance to future interventions with refugees who intend to remain in Lebanon and who are currently in pre-departure status, pending return to Syria or resettlement to other countries.

Each statement was read out to respondents, and they were asked to rate their level of agreement or disagreement on a five-point Likert scale. No qualitative elaboration was requested.

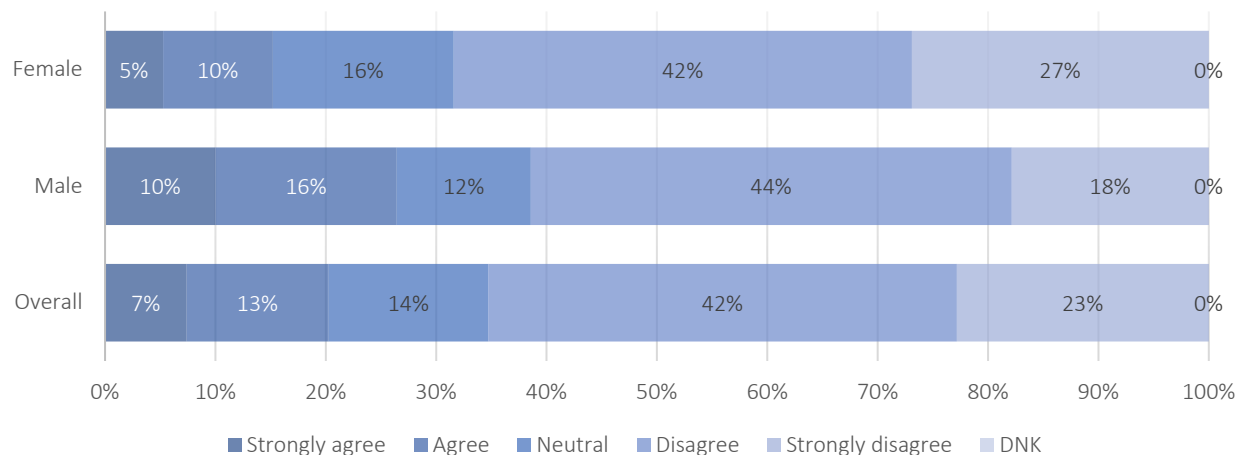
Note: Based on researchers' personal observations, it appeared that in several cases, respondents selected "Neutral" or "Do Not Know" when they were uncomfortable providing their response to a given question.

KAP 1 - Difficult living conditions make men more violent/aggressive with their family members.



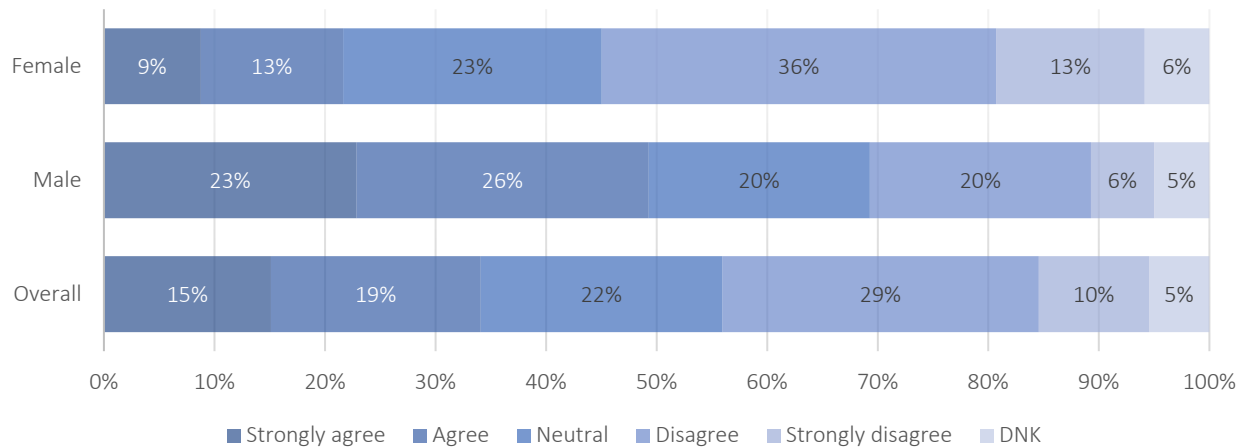
- 86% of the sample agreed (48%) or strongly agreed (38%) that difficult living conditions such as unemployment made men more violent and aggressive with their family members.
- Only a slight variation was recorded between females (87%) and males (85%) who agreed, noting that more men (10%) than women (5%) expressed disagreement.
- 6% remained neutral, and 2% of women said they did not know.

KAP 2 - A husband has the right to beat his wife if she provokes him.



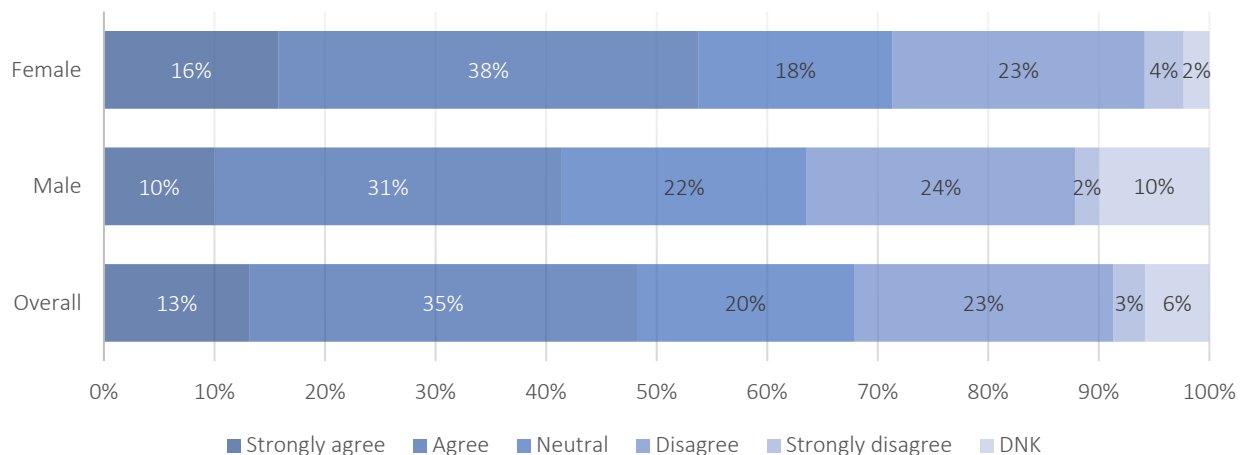
- 20% of the overall sample agreed (13%) or strongly agreed (7%) that a husband has the right to beat his wife if she provokes him.
- More men (26%) than women (15%) found physical violence justifiable in the event of provocation.
- A notable finding is that almost half the respondents disagreed, while only around a quarter, less men than women, expressed strong disagreement.
- Some of the 14% of respondents who expressed neutrality said it depended on what the wife had done, and whether it was “*inappropriate enough to warrant beating.*” None did not know.

KAP 3 - A wife does not have the right to reject her husband's sexual advances.



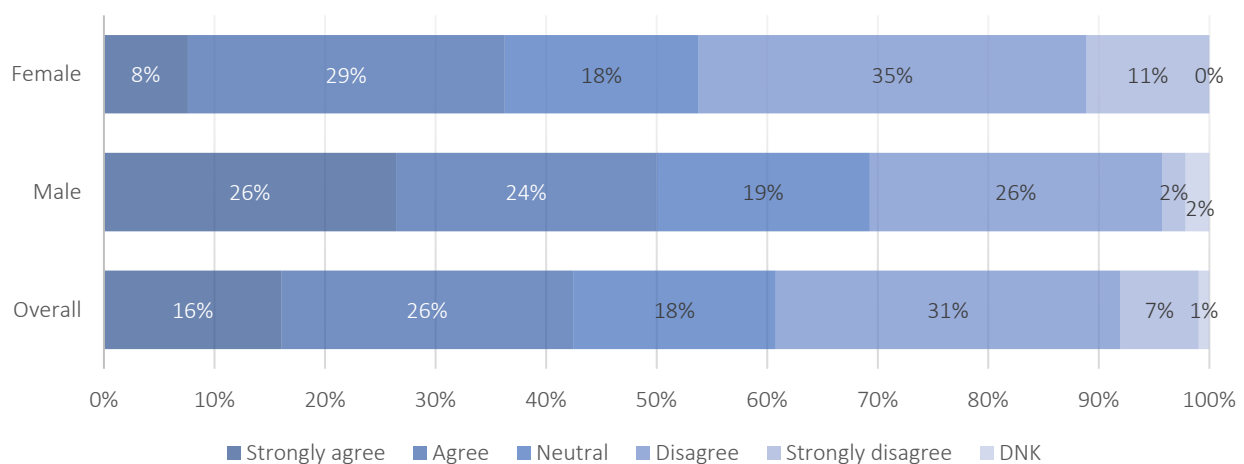
- 34% of the sample agreed (19%) or strongly agreed (15%) that wives do not have the right to reject their husbands' sexual advances. This is generally rooted in the Islamic teachings that “*it is a wife's obligation to fulfil her husband's sexual needs, and that refusing sex without a genuine reason or using it as a weapon is considered sinful.*”
- Almost half the men (49%) versus under a quarter of women (22%) expressed agreement.
- Only 10%, more women than men, strongly disagreed, in comparison to 29% who disagreed.
- 22% remained neutral, and 5% did not know or wish to answer.

KAP 4 - Married women are at higher risk of GBV than unmarried women.



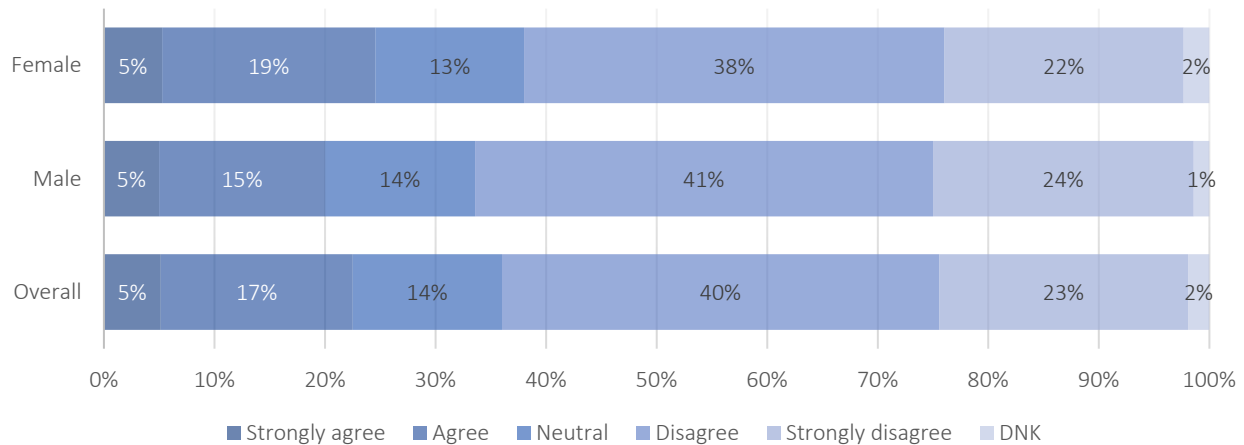
- Almost half the sample (48%) agreed (35%) or strongly agreed (13%) that married women were at a higher risk of GBV than unmarried women (including those who were divorced, widowed, or who had never been married). This is an interesting finding, particularly in light of the mere 12% (16% of women and 7% of men) who had considered intimate partner violence a priority concern.
- Over half the women (54%) and somewhat fewer men (41%) were in agreement.
- More men (10%) than women (2%) did not know, and similar percentages expressed neutrality, either because they were uncertain, or because they believed that marital status did not necessarily play a role in a woman's overall exposure to GBV.

KAP 5 - The man should control the household economy, including wages earned by his wife or children.



- 42% of the sample agreed (26%) or strongly agreed (16%) that men should be in control of the household economy and any money coming into the household, including wages earned by their wives and children.
- Only 8% of women strongly agreed, versus 26% of men, of whom an almost equal proportion (24%) also agreed.
- While 37% of women expressed agreement, almost half (46%) were in disagreement or strong disagreement, which echoes previous statements related to increased economic empowerment and awareness among women. The reversed perceptions among men may also indicate that women's suggestions that men are facing difficulties accepting gender role shifts are on point.
- A similar proportion of women and men remained neutral (18%). Only a minimal number of men said they did not know.

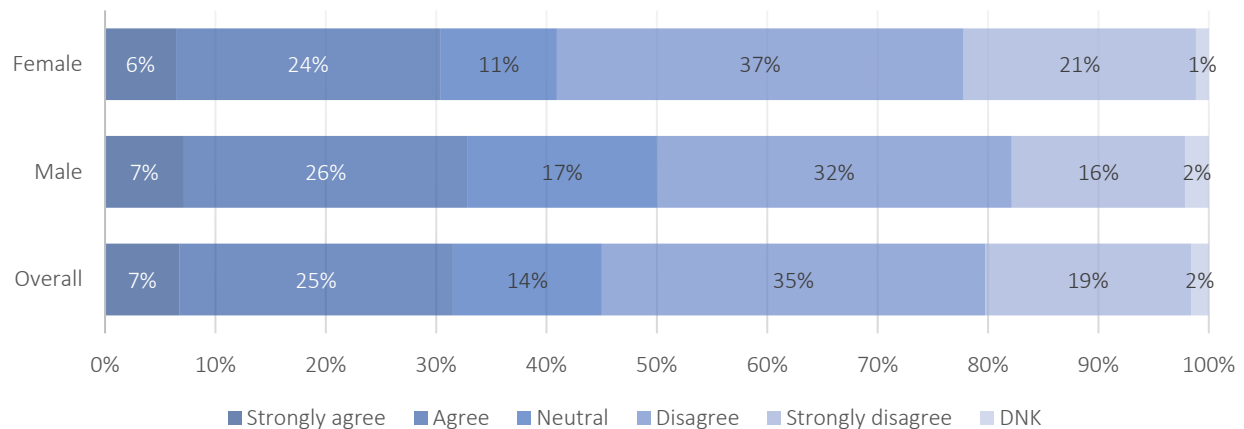
KAP 6 - It is acceptable for parents to marry their daughter under the age of 18 to secure her economically.



When it came to marrying minor girls in order to secure them economically if the family could not afford to support them, responses indicated a relatively positive trend, where 63% disagreed (40%) or strongly disagreed (23%). Surprisingly, fewer women (60%) than men (65%) disagreed; more felt child marriage was acceptable if done for financial security.

Approximately 14% remained neutral, either preferring not to express an opinion or explaining that it depended on each individual case, while 2% did not know.

KAP 7 - It is acceptable for parents to marry their daughter under the age of 18 in order to ensure her protection.

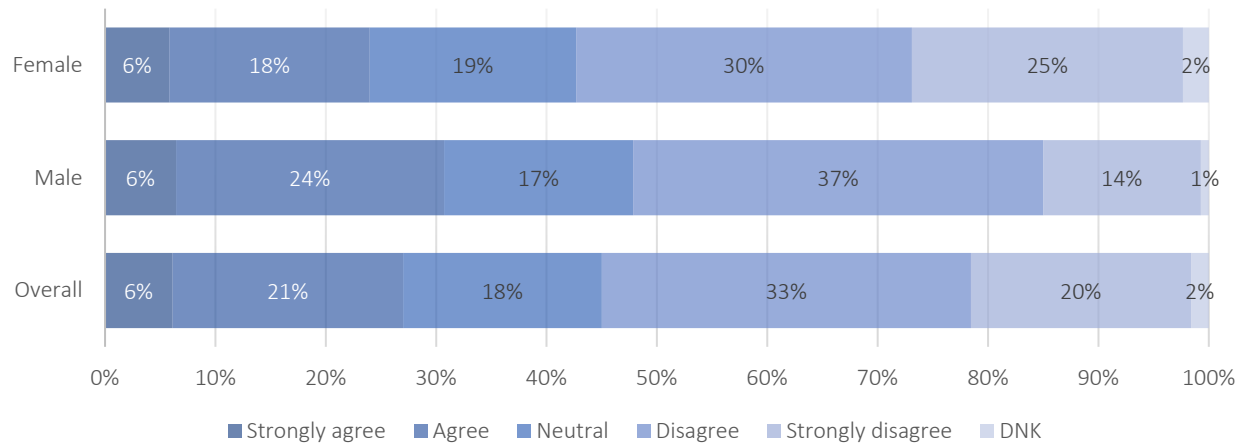


Interestingly, child marriage for the purposes of protection appeared relatively more acceptable to respondents than marriage for economic reasons. Where 24% of women and 20% of men found marriage to financially secure their daughters acceptable, 30% of women and 33% of men believed marrying girls in order to protect them (especially from insecure settings, collective shelters, camps, or any other crowded living conditions within which they could not ensure their safety) was acceptable.

Conversely to marriage for economic reasons where slightly more females agreed, marriage to ensure protection was reported at a marginally higher proportion among men than women.

Once again, approximately 14% remained neutral, while 2% did not know.

KAP 8 - It is acceptable for children under the age of 16 to leave school to work if the household really needs support with income generation.

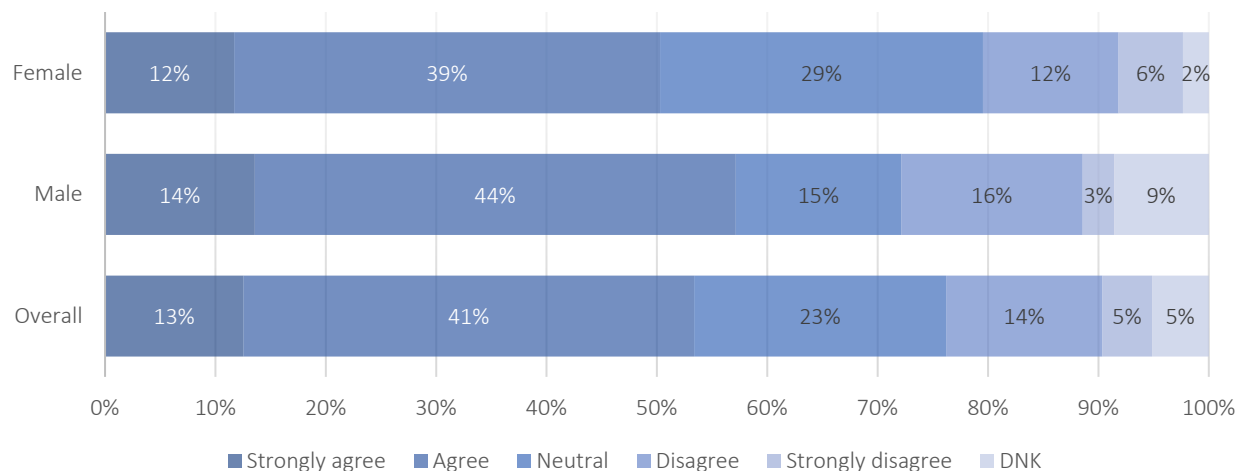


More males (30%) than females (24%) believed that it was acceptable for children under the age of 16 to drop out of school and participate in income generation if their household “really” needed support with income generation.

Over half the sample disagreed that children should be leaving school to work, noting that more females (25%) than males (14%) expressed strong disagreement, while more males (37%) than females (30%) disagreed. It is important to flag that despite their disagreement, interviewed community members were still withdrawing their children from school in order for them to work, because it was an “*unfortunate necessity*.” Additionally, some felt that when children entered the labour force, they were learning a skill which they could use for income generation in the future.

18% of the sample were neutral and 2% did not know. To note is none of these had reported any children under 18 working.

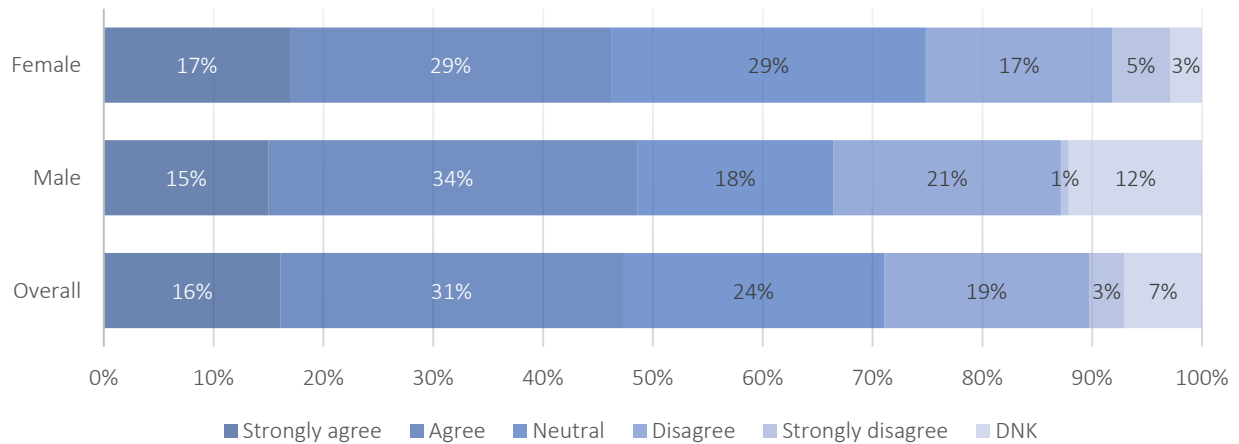
KAP 9 - Persons with disabilities are at higher risk of violence than persons without disabilities.



54% of the sample believed that PWD were at a higher risk of violence than persons without disabilities, and those were 58% of males and 51% of females.

- 23% were neutral, with almost double the percentage of females in comparison to males, while 9% of males versus 2% of females did not know.
- Among households who had reported members with disabilities, 70% agreed or strongly agreed that PWD are at higher risk of violence, while 13% disagreed. None expressed strong disagreement, and 17% remained neutral or did not know.

KAP 10 - Women with disabilities are at higher risk of violence than men with disabilities.



- Unexpectedly, not only did less than half (47%) of the sample seem to believe that women with disabilities were at higher risk of violence than men with disabilities, but slightly higher levels of agreement were reported among males (49%) in comparison to females (46%). A possible explanation may be the high security risks faced in Syria by men with disabilities sustained during war.
- A lower proportion of households reporting members with disabilities believed that the risk of violence against PWD was gendered: 58% had agreed or strongly agreed that women with disabilities were more at risk than men with disabilities, while 25% believed that the risk was equal. Again, 17% remained neutral. However, this cannot be considered a fully indicative finding, as among these households, the total number of individual men with disabilities was 50, while that of women was 22.

COMMUNITY-SOURCED RECOMMENDATIONS: KEY INTERVENTIONS TO ADDRESS GBV

ADOLESCENT RECOMMENDATIONS

There was a clear distinction between recommendations made by adolescent girls and boys: while the latter focused more on integrating social, entertaining, and recreational elements into awareness-raising and programming efforts, girls were clearly more impacted and burdened by GBV and patriarchal practices; their emphasis was on targeting awareness efforts towards boys and men, instating real GBV protection and response mechanisms, and making education available to them.

ADOLESCENT BOYS

- Hold interactive discussion sessions on the risks and negative impacts of violence. Use audio-visual materials (mainly videos) that present new information in an interesting way. Provide awareness brochures to which youth can later refer.
- Run recreational activities (outside of school hours and/or that do not clash with working hours), ideally in a youth centre established for boys. Some added that they would like the sessions to include refreshments, especially sweets.
- Ensure legal protections that adequately punish GBV perpetrators, which may deter others from violent practices in the future.

ADOLESCENT GIRLS

- Increase targeting of men in awareness activities – *“since women and girls are the main victims of violence, interventions should target the perpetrators who are almost always men.”*
- Ensure that awareness efforts also target boys – *“since they are in their formative ages of growing and maturing, boys should learn that women are not ‘punching bags’ and do not ‘exclusively exist for housework,’ they are equal humans who have rights and potential.”*

“As a result of awareness interventions, women and girls have learned about their rights – however, when we attempt to put what we learned into practice, we are often unable to do so because on the other end, men neither have the knowledge nor the willingness to accept our efforts to make change.” (Girls, BML)

- Put into place “real protection efforts” that are not restricted to hotlines, and raise awareness about their existence and about women and girls’ legal rights and options. *“When someone reports violence, there needs to be an effective response mechanism to protect any third-parties making the reports, as well as the victims of the violence.”*
- Work with caregivers and parents, including mothers, on protecting, communicating, and building trust with their children, especially daughters. *“Parents need to be aware of the harms of child marriage, and the fact that girls have equal rights to education and to a life.”*
- Raise awareness among youth, especially girls, on cyber bullying, security, and what precautions they should take when using social media. Specialised support to assist victims should be available.
- Make education to refugees, particularly girls, more available. Since parents sometimes do not allow girls to continue their education or go to university, especially when the facility is further from their homes (protection concerns), more options should be available. Another reason for dropouts is the lack of adequate curriculums, and not offering degree equivalence, so aptitude testing ahead of enrolment would improve registration rates.

ADULT RECOMMENDATIONS

Recommendations made by women and adolescent girls showed that they were largely subjected to the same issues. However, women's concerns also extended to child protection and livelihoods challenges. Interestingly, men's recommendations showed that some possessed a strong level of awareness that the perpetration of violence could be limited through working with men and boys. Additionally, they focused more on livelihoods and religion-driven awareness.

WOMEN

- Gear awareness-raising efforts towards women, men, and children.
 - **Women:** Sessions should cover women's empowerment, rights, and legal options. *"We hear about so many incidents of harassment, abuse, and murder, but we do not know what we can do."* Women should also be taught how to defend themselves.
 - **Men:** Awareness on women's rights, and men's rights and duties.
 - **Women and Men:** Awareness about children's rights, and especially the risks and negative impacts of child marriage and child labour.
 - **Children:** Awareness about the different forms of GBV, and how to act when subjected to violence, including harassment.
- Instate adequate protection mechanisms, especially legal, to which women being subjected to violence can resort.
- Ensure that education options are available to refugee students, especially children with disabilities or learning difficulties.
- Increase livelihoods interventions and job placement support, which women considered an important step to improve households' economic situation, which would in turn contribute to reducing violence *"to a certain extent."* Some believed that this type of assistance should target men primarily, while others were of the opinion that women's economic empowerment was the most critical. Another group believed that boys and girls who were not in school should be able to pursue vocational training opportunities, which would enable them to have a source of income upon their return to Syria.
- Make "spacious" public areas available to help refugee communities *"change scenery, because our 'tight and cramped' living spaces contribute to tensions and increased violence."*

MEN

- Hold mixed sessions for men and women to raise their awareness about violence and its consequences. Where sessions are separated for different population groups, make sure messaging is well-catered to each. For men, sessions should be after working hours or during holidays. For children, GBV and early prevention concepts should be integrated into educational curriculums.
- Hold moderated discussion and debate sessions. During the FGD with men in the South, they said that *"such sessions are the best way to discuss violence, women's and men's rights, and any ideological transformation."*
- Work with religious leaders to ensure that they explain to men the importance of their engagement in household duties.
- Engage refugees through offering financial or in-kind assistance. *"This not only creates feelings of comfort among us, but also increases organisations' credibility, and makes us more likely to listen and participate in sessions."*

"There is no way to effectively work on ending violence among returnees to Syria because the causes of violence remain the same, and in some cases get worse. Despite interventions done by organisations in Lebanon, if living conditions stay bad, change is very difficult to achieve." (Men, North)

KEY STAKEHOLDERS TO ENGAGE

The list below details the most impactful stakeholders to be engaged in efforts aiming to combat and address GBV, according to interviewed Syrian refugees.

Religious Leaders	<p>Considered one of the most important stakeholders, respondents explained that they held the influence to persuade men to end violence against women and girls. Not only are they highly respected figures (especially within Syria) but they can also explain religion in a manner that discourages violent practices.</p>
Civil Society, NGOs	<p>Different organisations, including rights, relief, and UN agencies were considered key actors in reducing violence because they could hold awareness campaigns and sessions (including providing incentives), make services and activities more accessible (especially through mobile units, safe spaces, and family support centres). The key activities flagged included awareness-raising through cultural, recreational, artistic, and discussion activities aiming to combat GBV, as well as through providing self-care and stress and anger management support.</p>
Governments, Political Decision-Makers	<p>The state's role in fighting GBV should be activated through issuing legislation that truly addresses and penalises GBV and "imposes" women's rights. They should also work with security forces and ensure they are trained to properly receive and support survivors who come to report, regardless of their background, in a way that makes them feel safe from mistreatment or deportation. Another critical role included preserving refugees' rights to protection, and regulating fair employment and labour conditions to reduce potential exploitation. Finally, some mentioned that gender equality in the workplace is also a key axis of focus.</p>
Community Mediators, Tribal Leaders, Family Elders, Mayors	<p>Both in Syria and in countries of displacement, Syrians tend to avoid turning to formal reporting mechanisms out of lack of trust in the system. Instead, they resort to mediation efforts by religious leaders, community leaders, tribal leaders or family elders, and mayors as the main conflict resolution method. Accordingly, these groups should be a primary target of awareness-raising in order to ensure that their interventions are fair and just, especially towards women and girls.</p>
Prominent Public Figures (especially men)	<p>GBV stakeholders should engage prominent and educated public personalities as change-makers who would support in awareness-raising efforts. Male visibility is especially important, because men are more likely to listen to messages shared by other men. Some adolescent boys also said that featuring success stories and testimonials by other Syrian refugees may serve to inspire them.</p>
Political Parties (Lebanon)	<p>In Lebanon specifically, given the issues that refugees reported facing with racism, they believed that working with political parties <i>"would go a long way in reducing violence, especially since they often spearhead racist campaigns which fuel violence against refugees among their followers."</i></p>
The Government of Syria	<p>Interviewed refugees as well as Syria KIs remarked that a main obstacle stopping many refugees from returning to Syria is the GoS's policies towards returnees, and the lack of supportive legislation that ensures the safeguarding of women, girls, and returnees. They believed that GoS should be actively engaged in working on better policies that ensure safety, thus encouraging return for those who desire it.</p>

<p>Schools, Educational Facilities</p>	<p>Schools are a strong gateway for early prevention activities among children and adolescents. Not only can they monitor children's behaviour with other children and cater messaging on a need basis (for example on bullying, non-violent games, communication and peaceful conflict resolution, etc.), but they can also raise awareness on violence and gender. Some suggested child awareness be made a part of formal and non-formal educational curricula.</p>
<p>Families (Spouses/Parents, Children)</p>	<p>Families need to be engaged in prevention efforts on several levels. Work with husbands and wives separately and together is critical to create healthier couple dynamics, including communication skills and mutual respect. As children mimic their parents, they will learn even from indirectly observing their behaviour, practices, and belief systems. Parents should also be made aware of children's rights and how to safeguard and positively discipline them. Good parenting skills would allow them to instil their children with a non-violent ideologies and values.</p>

CONCLUSIONS AND RECOMMENDATIONS

Gender-Based Violence continues to be one of the most flagrant human rights violations in all societies globally. In situations of conflict and instability, pre-existing patterns of discrimination and violence against women and girls are exacerbated, while men and boys can also fall victim to violence. Displacement can also result in migrant populations finding themselves exposed to unprecedented forms of violence during their journeys and in their countries of displacement or resettlement.

Findings from this research demonstrate that while awareness efforts in Lebanon have resulted in a relatively acceptable level of self-reported awareness of GBV, there is no unified understanding of its concepts: some continue to root their beliefs in hegemonic gender roles and normalise violence as cultural or religious practices and traditions; their responses indicate a deeply-ingrained mindset that women are weaker, need men as their protectors, and should be subservient to them. Others are aware of the risks of certain practices but apply them regardless as negative coping strategies to economic hardship.

Additionally, there appeared to be a strong conviction that without “radical” interventions that succeed in transforming ideologies and tackling prevention before response, it would be extremely difficult to ensure that refugees would uphold non-violent practices following their return to Syria.

While the weight of the work largely falls upon humanitarian agencies, the active engagement of key stakeholders and allies, especially governments and political decision-makers, religious leaders, and donor bodies, is vital to successfully gearing efforts towards ending gender-based violence against refugees.

Important Note: The list below cannot be considered exhaustive of all possible recommendations that can improve GBV response among Syrian refugees, but rather focuses on the most critical axes identified as a result of this research.

CIVIL SOCIETY AND NGO INTERVENTIONS

Precede programme design with in-depth community consultations. In order to avoid “provoking” beneficiaries in a way that would make them resistant to sessions, organisations should conduct community consultations to identify entry points that are of interest to participants themselves, and intervention modalities that would genuinely engage them, which would make them more open to discussing and accepting behaviour transformative concepts. Such consultations should take place periodically to ensure that project rationales and theories of change remain up-to-date and relevant to communities.

Amplify structured, recurring awareness-raising efforts, targeting different population groups with relevant, catered messaging. Awareness and education are critical preventive efforts that address GBV at its roots and build the foundation for social behavioural change. Messaging should be contextually aware and target different groups in a well-catered manner based on context, gender, age, interests, and existing levels of awareness. Well-facilitated, interactive debate should replace traditional sessions in which a trainer exclusively shares information and allows limited participation. Innovation would also play an important role in gathering participants – one example suggested by a KI was to hold men’s sessions in a recreational setting where they can play backgammon as they vent about issues and have discussions. Also in order to ensure participation, sessions should at least take into account daily schedules (*for example, work or school*), responsibilities (*for example holding them in a space that offers childcare so caregivers with young children can participate*), and accessibility (*easy to reach location or transportation allowances, access for persons with special needs, etc*). Facilitators can include a diversified group of guest speakers, including religious leaders, influential public figures, and refugees with impactful stories. Finally, “*knowledge does not necessarily translate into action,*” so the sessions should integrate components on how to practically apply what they have learned in their daily lives.

Engage and train religious leaders on promoting positive religious messaging that counters GBV. Primary data collected by both ABAAD and the consultant since 2011 has shown that within Syrian communities, religious beliefs remain a very important element of life, and thus a basis for many practices. Since religion is often used to justify GBV, it is critical that organisations engage, train, and work with religious leaders who would be able to clearly interpret and explain religious texts in a manner that halts their being abused to promote and justify violence against women and children, especially girls. Since religious leaders are largely well-regarded and thus extremely influential, partnering with them – especially in religious societies – is a strong step towards creating change. This recommendation is further cemented as a powerful entry point by the fact that interviewed community members repeatedly called for activities promoting religious education and culture.

Train community mediators on concepts of gender and GBV. When faced with issues (domestic violence, family rivalry, disputes, etc.), Syrians – both in Syria and in countries of displacement – tend to avoid using formal reporting mechanisms. Instead, they generally opt to consult with trusted mediators such as tribal leaders, family elders, religious leaders, mayors, or other influential figures who would support with conflict resolution. Raising these individuals’ awareness on concepts of women’s rights and GBV and ensuring their buy-in would not only support refugees in displacement, but would also contribute to upholding new rights-based practices rooted in gender equality.

Train healthcare practitioners and specialists as they are often the first gateway to reporting during consultations. Additionally, they can use such appointments to raise awareness, even if briefly, on important

topics including sexual, menstrual, and reproductive health, as well as GBV. This would be particularly useful for adolescent girls, who rarely receive this information.

Use indirect awareness-raising to address harmful practices which are “normalised” as religious. Certain violent practices such as child marriage or disciplining using physical violence may be rooted in religion. Accordingly, attempts to directly discourage such behaviour may be futile. A potential workaround is to conduct sessions about associated risks and harms, which may encourage participants to rethink the practices on their own. One good example of addressing child marriage is the [video](#) produced by ABAAD and UNICEF.

Dissociate “culture” from violence. Numerous respondents were of the opinion that social and cultural norms and practices should be upheld, especially in displacement, in order to preserve their cultural background and identity. When societies are patriarchal, their customs and traditions are some of the greatest drivers of gender-based violence. An important intervention is to show how culture changes over time, and how traditions have been created, adapted, and modified by different societies. Interactive sessions can give participants the space to think about how current practices and social concepts may be harming different population groups, and how they can be reformed into non-violent social concepts that do not necessarily mean “abandoning” their sociocultural identities.

Raise awareness on the importance of documentation in protection. Since the start of the Syrian crisis and the consequent waves of displacement, numerous refugee households have been of the opinion that registering themselves with the UNHCR was “useless” because of the limited benefits it provided. That, coupled with the difficulties in obtaining legal residency in some countries (particularly Lebanon), has often left many without legal status, exposing them to harassment and exploitation. Having valid documentation does not only protect refugees in their daily lives while in countries of displacement, it also serves to safeguard their legal status and rights, especially that of women and children. For example, women with no documentation cannot legally register marriages, and they are therefore unable to register new births. Stateless children will gradually face numerous difficulties when it comes to enrolling in school, securing legal employment, travelling, and getting married. Being aware of the risks of not legally registering marriages (loss of rights afforded by marriage contracts including *mahr*, housing, and alimony, among others) may dissuade women from accepting such arrangements for themselves or their children, and may even contribute to reducing child marriage in countries where the state does not allow marriage under 18, and where religious courts do not sanction an exception.

Engage education service providers and caregivers in early prevention activities. As previously mentioned, quality GBV response services for survivors are sometimes “*the difference between life and death.*” However, if not coupled with prevention activities, they are “*merely a band-aid,*” as they would not aim to address the problem at its root causes. This is what makes early prevention one of the most important interventions: it targets youth during their formative stages, when they are more open to listening and learning. Programming on the ground has shown that youth often respond to such activities, and have shown a willingness to become change-makers among their peers and wider communities. Along with youth, this type of programming should ensure targeting parents (both mothers *and* fathers) who would continue the work at home, and formal and non-formal educators/TVET trainers/activity facilitators, who would work with the children at school or during youth activities, camps, etc. The sessions should apply fun, creative, and memorable methods in order to make an impact, especially when working with younger children.

Scale up MHPSS activities to improve refugees' and returnees' wellbeing; utilise sessions as GBV awareness entry points. PSS activities, particularly when applied through an “*entertaining*” medium appeared to be welcome among refugee youth and women, while men found Stress and Anger Management sessions more appealing. KIs flagged the necessity of specialised mental health and non-specialised PSS interventions to assist refugees in dealing with violent and traumatic incidents experienced during the course of their migration to countries of displacement, or their return to Syria. Additionally, both specialised and non-specialised interventions can be used as important entry points that slowly unravel into work on the root causes of gender-based violence, namely masculinities, patriarchy, discrimination on the basis of gender, and unequal power dynamics. Individual followed by couples therapy sessions will also contribute to creating healthier dynamics between spouses and in the larger household.

Combat GBV and harmful gender norms through livelihoods and economic support and empowerment activities. Livelihood programmes are one of the most important interventions to refugee communities, particularly in countries where their employment is restricted due to government regulations or to a weak labour market, which exposes them to various forms of exploitation. Seed grants and small business support, loans programmes, supporting the creation of self-funded collectives/initiatives, Cash for Work, and job placement activities will all witness high levels of interest and participation. TVET and life skills trainings accompanying such initiatives should include certain elements focusing on gender and GBV. However, even more importantly, NGOs should always ensure that gender sensitivity and equality are a cross-cutting consideration when designing these interventions. For example, even if community consultations show that women are only interested in hair and makeup, sewing, handcrafts, and food preparation, facilitators can introduce new ideas and suggest other activities or skills that are not necessarily traditionally associated with a specific gender role. This would ensure that activities are gender transformative and avoid reinforcing the existing gender norms that are often strong drivers of GBV.

On another hand, women’s economic empowerment would support their ability to become independent, where they would have their own agency and not exclusively rely on a male breadwinner. Women who are being subjected to violence often do not leave the perpetrator because they do not have other viable options to support themselves (and their children). Building skills that can contribute to income-generation may give them the ability to establish themselves in a new role in their household, or to set the exit plan they see fit.

Invest more in building the capacities of Syrian women. NGOs delivering services to Syrian refugee populations, especially women and girls, should dedicate more resources to building the capacities of Syrian women, and engaging them more in certain programming aspects such as community outreach, awareness-raising, and change-making. This would not only create job opportunities that bolster income-generation for longer periods of time (in comparison to limited or one-off assistance modalities), but would also positively impact other women from the same community through increasing their self-confidence, participation, and possibly their willingness to listen to “*one of their own.*” However, this does come with challenges – for example, some women may not feel safe revealing issues to someone from their community out of fear of scandal and gossip. The ideal scenario would be to ensure that employees are mixed (refugees and “*outsiders*”) to allow beneficiaries the freedom of choice.

Increase focus on “*neglected*” populations in programme design. Information sourced from KIs across all four countries focused on the fact that NGO programming often “*neglects*” the LGBTQI community, persons with disabilities, and older populations. This can be due to lack of prioritisation in donor agendas, a gap in

specialised capacities and expertise, or social concerns³¹. Given the fact that these groups were confirmed to be at heightened risks of GBV, it is critical that NGOs, particularly those working on GBV response, consider intersectional identities (especially age, ability, and SOGIESC) and their various needs. This includes training personnel and recruiting experienced specialists who are able to communicate with the different groups (i.e. non-discrimination, sign language...).

Gender considerations should be a cross-cutting axis across all types of programming. Gender is a vital factor that affects all individuals in their daily lives. Accordingly, when setting different types of programming, NGO staff and advisors should ensure that they have adequately considered how their interventions affect target communities, especially women and girls. From in-kind and financial assistance, to shelter and settlements, to WASH infrastructure and rehabilitation, all types of support have different effects on women, and this is why gender audits are necessary prior to implementation. As a basic example, when installing latrines or water stations in camps or informal settlements, placement plays a critical role: if they are in remote areas, or are unlit at night, this can put women and girls at risk of harassment, assault, or kidnapping.

NATIONAL AND REGIONAL MAINSTREAMING

NATIONAL

Strengthen and mainstream GBV capacity building efforts on a national level. National GBV and Protection inter-agency working groups and taskforces should gear more efforts towards awareness-raising and training to different local actors, especially those who work with communities on interventions that are unrelated to GBV. Training should provide – at the very least – knowledge and skills on how to identify cases or receive reports, as well as how and to whom they can safely refer different types of cases. A national referral pathway which is regularly updated should also be shared with the various stakeholders. Such efforts should primarily target field staff (who are regularly in direct contact with communities), but should also include management staff who are responsible for programme design (*refer to the recommendation on cross-cutting gender considerations*).

Mainstream centralised national information management systems that collect data from a range of country-based actors to allow research and intervention-targeting based on facts and real statistics rather than exclusively on stakeholder opinions. The GBVIMS is a strong prototype of such a system, which can be nationally expanded in Iraq, Jordan, and Lebanon, and ideally instated in Syria, if deemed feasible.

Focus and organise national awareness-raising efforts (Syria). KIs from Syria flagged that *“for the past 10 years, the majority of GBV actors have focused their efforts on awareness-raising”* but that these have been *“irregular, disorganised, and unfocused.”* The result is random and periodic sessions with no continuity, *“meaning that participants may attend sessions about the same issue several times, rather than receiving structured cycles that build upon previous sessions and offer new and more advanced information.”*

³¹ More specifically, organisations working with groups who are often denied their rights usually prefer to avoid working with populations who are not socially accepted. For example, women’s rights groups may not wish to integrate LGBTQI, people living with HIV, or drug users into their service delivery or advocacy as *“this may make their work much more difficult.”*

REGIONAL

Syria and 3RP country stakeholders should coordinate and share experiences and tools. This would reduce time and resource-consuming duplication of work, align work, identify best practices, and improve response in countries of Syrian refugee displacement. Additionally, in case of voluntary returns to Syria, community members would be able to have similar safe spaces and response interventions. Some KIs noted that Syrian response cross-border programming has not focused much on behavioural change aspects, flagging that it would be important to consider integrating such elements.

Additionally, when it comes to working with men on EAWG, such interventions are still weak to non-existent in several Arab countries. In Lebanon, a small number of organisations have already been running male engagement programmes for several years. Accordingly, it is strongly recommended that organisations in Syria and 3RP countries liaise with these Lebanon-based organisations to exchange knowledge, training manuals, and receive TOTs.

Regional actors should liaise to create Syrian women's support networks. Key actors, especially INGOs and agencies based across the different countries can benefit from their presence to aid the creation of Syrian women's support networks that can have national and regional chapters. This would foster a strong sense of civil society and engagement, support the empowerment of women, and offer a space to share information and experiences.

GOVERNMENTAL ROLES

Create a safe and protective space for survivors through reporting and policy reforms. Individual awareness-raising is necessary, but it must be accompanied with reforms at the national level in order to ensure adequate response and protective action. Accordingly, governments must issue new legislation that provides survivors with:

- Adequate and accessible reporting mechanisms that employ well-trained personnel who can deal with all cases professionally, confidentially, and respectfully.
- The necessary protection and safety assurances. Particularly in the case of refugees, survivors often avoid reporting because of concerns over discrimination, mistreatment, and harassment, as well as deportation – particularly if they do not have documentation. This makes it vital for reporting mechanisms to be separate from other security bodies. In other words, there should be no connection between the reporting mechanism and the apparatus responsible for residency and deportation.
- Effective penalisation of perpetrators to ensure that justice is served.

Modify custody laws to ensure they no longer exclusively favour men. One of the main methods used to force women into accepting violence is threatening to deprive them of their children, particularly when custody laws favour the husband. A modification of custody laws to ensure a fair decisive trial would play a foundational role in working towards EAWG, and allowing them to leave aggressive spouses without fear of losing their children.

Require formal justice personnel engaged in protection to undergo relevant training. Training on communication and reception skills as well as on SOPs can be done in partnership with specialised NGOs.

Personnel that should receive training include forensic doctors, judges, lawyers, as well as law enforcement officers.

Integrate gender and SRHR into national education curriculums. While this continues to be a point of debate, education ministries should integrate such topics into national education curriculums. This would be a critical first step towards social behavioural transformation, which could be complemented by NGO-run primary prevention efforts.

DONOR ROLES

Ensure that gender considerations are a mandatory component of all types of programming. Gender should be made a mandatory cross-cutting component of all humanitarian programming, even among NGOs that do not work on gender and GBV, to ensure adherence to Do No Harm principles, and to avoid reinforcing traditional gender norms that feed into GBV. Furthermore, increasing scoring for projects that are able to include adequate reasonable accommodations for intersectional populations with varying vulnerabilities would be an excellent step towards encouraging the practice among different actors.

Ensure flexibility to accommodate grassroots-sourced approaches. It is important that donors allow some flexibility when it comes to accommodating target population needs and interests, or to rely on bottom-up information when setting agendas and priorities. The latter can be done through commissioning more research to understand the real needs among target populations in relevant countries, ahead of earmarking funds. Alternatively, research components such as baseline assessments can be integrated into project proposals, the findings from which should inform any adaptations to project scope to ensure consistent relevance to target communities.

Encourage regional knowledge-sharing and capacity building projects among supported entities. An excellent practice, already applied by some donors, is to encourage grantees to coordinate through hosting periodic meetings or even making it a requirement among organisations with similar supported projects. This would not only strengthen regional response, but would also maximise resources: if certain activities have already been piloted by other actors or in other countries where contextual specificities are similar, the minor adaptations needed would limit duplication of efforts and would also require significantly fewer resources than implementing everything anew.

Provide more support for safe shelters that host different populations. Safe sheltering options are often few, have limited capacity, and sometimes apply numerous restrictions (either resulting in survivors being rejected, or in their being discouraged to take up safe sheltering). Furthermore, there have been reports that available shelters are sometimes unsafe, or do not have the necessary qualifications or precautions to offer survivors the needed protection. Additionally, there are no real shelters for LGBTQI populations and not all women's shelters accept them. Thus, they often face extreme difficulty in locating safe accommodation that does not expose them to violence, which puts them at – sometimes life-threatening – risk of GBV.

Allocate more funding to prevention efforts. While funding for direct service delivery is undeniably important, donors should also focus on supporting prevention efforts, including awareness on SRHR, legal rights and options, as well as supporting work on the policy level when it comes to legal reforms and policy-making.