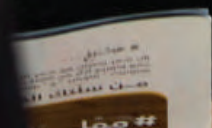




Gender Based Violence Annual Report - 2020

UNFPA Lebanon



EXECUTIVE SUMMARY



Economic contraction, skyrocketing poverty rates, and civil unrest have compounded needs among Lebanese and non-Lebanese communities in 2020.

Lebanon hosts an estimated 1.5 million refugees, the largest number of displaced people per capita in the world, and most of them (80%) live below the poverty line. Growing COVID-19 transmission is straining the country's health systems and increased the challenges to access affordable health and social services.

The Beirut port explosions have introduced new vulnerabilities and exposed women and girls to heightened risk of violence and exploitation, already significant before the explosion because of the lockdown and the economic crises.

The compounded crises currently affecting Lebanon increased the protection risks, especially for women, girls, and marginalized groups such as persons with disability, undocumented women and girls, and members of the LGBTIQ community.

OVERVIEW OF THE 2020 RESPONSE



15 Safe spaces supported for women and girls



7,200 People receiving specialized gender based violence services (legal assistance, psychosocial support, case management)



31,100 People reached with gender based violence risk mitigation activities (safety audits, awareness, raising activities, community outreach, peer-to-peer support)



108,000 Women and girls receiving dignity kits



19 Health facilities receiving post rape kits



4,500 People receiving psychological first aid sessions after the Beirut Port Explosions



100 Frontline workers trained on gender based violence

GENDER BASED VIOLENCE RISKS IN LEBANON



Domestic Violence:

69% of gender-based violence (GBV) incidents reported through the GBV information management system (GBVIMS) in 2020 are incidents of domestic violence (GBVIMS Lebanon Annual Overview, 2020). During lockdown, tensions can easily mount within the household as families are confined to their homes. The dire economic situation also contributed to the rise of stress and anxiety, leading to an increase of the risk of domestic and intimate partner violence.

Sexual exploitation and abuse:

The increased levels of debt are more likely to expose women and adolescent girls to sexual exploitation.

The percentage of cases of GBV perpetrated by landlords are increasing according to the GBVIMS reports, and 4% of refugee women mentioned in the 2020 Vulnerability Assessment of Syrian Refugees (VASyR) are worried about the risk of sexual exploitation in relation to access to food.



Child marriage:

An alarming rise in child marriages has been observed among the most vulnerable Syrian refugee population in Lebanon. Estimates vary, but some show child marriage rates to be four times higher among Syrian refugees today than among Syrians prior to the Syria crisis in 2011. This indicates that displacement, instability, and poverty continue to increase the risk of child marriage (Making Sense of Child Marriage among Syrian Refugees in Lebanon, ABAAD Resource Center, 2018).

In 2020, the prolonged school closures due to COVID-19 have also increased the risk of early marriage (COVID-19, A threat to progress against child marriage, UNICEF, 2021).

Harassment:

Women and girls continue to be subject to sexual harassment especially while walking in the streets, at work, but also while using social media platforms.

GBV incidents that occurred online have significantly increased following the outbreak of COVID-19. Case managers working with survivors reported that since the beginning of the lockdown, more women, and girls, especially among refugees are being exposed to online sexual harassment and blackmail (GBVIMS Annual Overview, 2020)



MOST AT RISK CATEGORIES



Elderly women:

Elderly women in Lebanon suffer from the disparities experienced over a lifetime and are more likely to experience poverty and violence. The pandemic has exacerbated the challenges elderly women face and have limited the support they usually received in their community, exposing them to further risk of mistreatment and violence.

The struggles of the elderly, including women, have been underlined in the Study on the Impact of the Multi-layered Crisis of 2020 on older adults in Lebanon carried out by UNFPA Lebanon with Makassed NGO and University for Seniors (AUB).

Women and adolescent girls:

In Lebanon, gender norms and stereotypes justifying inequality, and several legal and institutional impediments limited women and girls' full enjoyments of their rights.

Women and girls are disproportionately at risk of GBV as according to the GBVIMS 2020 Annual Report, 98% of cases reported to organizations using the information management system (IMS) are female. The limited livelihood opportunities and services during the pandemic have further increased the risk of GBV, especially exploitation, for women and adolescent girls.



Persons with disabilities:

Approximately 15% of Lebanese people (Situation of persons with disability in Lebanon, July 2018) and 22% of Syrian refugees (Disability Assessment among Syrian Refugees in Jordan and Lebanon, Humanity Inclusion, 2018) are estimated to be living with disabilities.

Women and girls with intellectual disabilities are particularly vulnerable to sexual violence and are often prevented from accessing a range of services and face un-adapted facilities, poverty, inadequate behavior of service providers. This exclusion only increases the vulnerability of women and young persons with disabilities to discrimination, mistreatment, and violence, including GBV as mentioned in the preliminary version of the Situation Analysis on Persons with Disability in Lebanon, supported by UNFPA in collaboration with the Ministry of Social Affairs (MOSA), and the United Nations Economic and Social Affairs (UN-ESCWA), in 2020.

MOST AT RISK CATEGORIES

(Cont'd)



LGBTIQ+:

Women, girls, boys and men with diverse sexual orientations and gender identities may be among the most isolated and at-risk individuals in a community due to discrimination and threats of family and community rejection and harm. They face challenges entering the market labor and are often the most at-risk group in case of dismissal, but they also experience diverse forms of GBV, such as physical violence, sexual harassment, and sexual assaults.



Migrants:

The lack of legal protection and dependence upon the employer put female migrant workers at high risks of all types of abuse, including GBV.

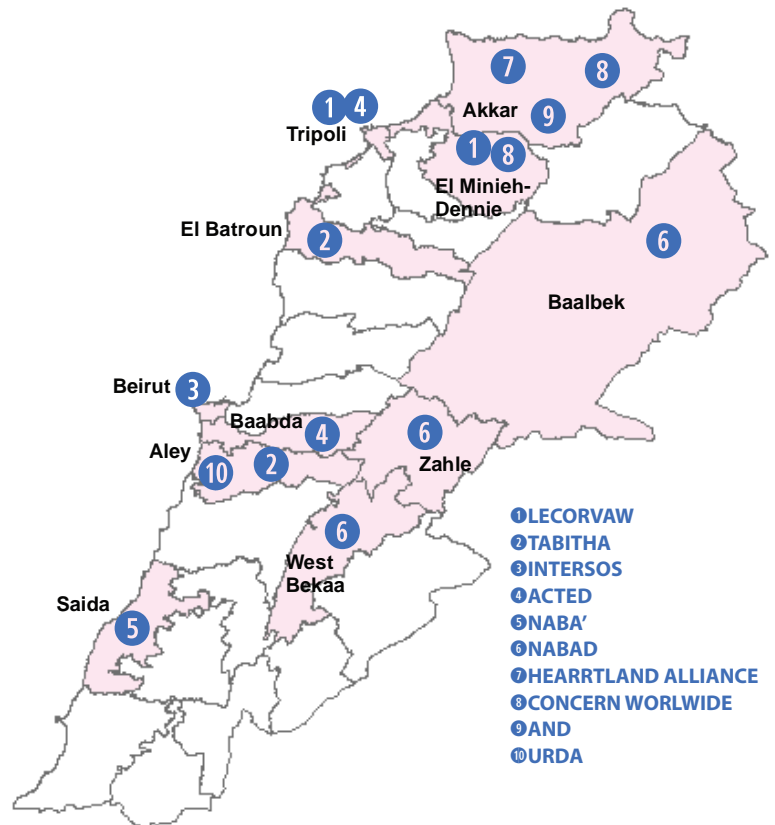
Exploitative working conditions faced by female migrant workers have a devastating impact on their health and well-being. Frequently, they are isolated and lack social and community support and do not speak the local language. When they are subjected to GBV or other harms, they may be misled to believe that they cannot report incidents or access essential services.

SUPPORT TO SERVICE DELIVERY & COMMUNITY ENGAGEMENT

In view of the multi-layered crisis facing the country in 2020, UNFPA Lebanon scaled up its programmatic interventions to assist survivors of GBV and individuals at risk with lifesaving specialized services, including psychosocial support (PSS) and sexual and reproductive health (SRH) services. UNFPA also worked to strengthen the capacity of service providers to provide inclusive, quality assistance to survivors.

UNFPA, in partnership with ten NGOs, provided GBV services in five Governorates of Lebanon over twelve districts.

Despite the challenging context and the extended lockdowns, UNFPA managed to reach more 7,200 people with GBV specialized services (case management, PSS and legal advice) and supported 15 safe spaces where community members can access information and services such group and individual PSS including case management and information and counselling on SRH related issues.



"After benefiting from the case management services, my nightmare came to an end. I got a legal consultation with a lawyer and I decided to get divorced from my abusive husband. I started a new life in a new home with my kids. I will be working to become financially independent because my kids deserve a better life. The most important part is that my daughter will be attending life skills sessions where she will get the chance to learn about her rights and how to protect herself".

Ahlam, receiving case management services

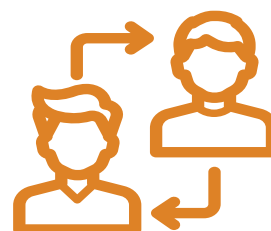
SUPPORT TO SERVICE DELIVERY & COMMUNITY ENGAGEMENT

(Cont'd)



More than 31,100 people were reached with GBV risk mitigation activities including safety audits, information, and awareness sessions on GBV and sexual exploitation and abuse (SEA) and on available services.

UNFPA adopted a peer-to-peer approach in community outreach activities, with particular emphasis on the engagement of men and boys with more than 100 men and boys trained and engaged in GBV risk mitigation activities. During lockdowns, UNFPA continued to support outreach activities using social media platforms to conduct GBV awareness raising activities to maintain social networks for women and girls as some of them no longer have regular access to the safe spaces.



UNFPA procured and distributed dignity kits to more than 38,180 women and adolescent girls, within the GBV interventions. The distribution of dignity kits serves as an important opportunity to listen to women and girls' primary concerns and becomes a possible entry point for introducing services for survivors of GBV. The dignity kits also allow budget substitution for families to purchase other important items, such as food, which is incredibly important in times of economic crisis.

"Just like I would want my girls to be fed, I would also want them to have these basic hygienic needs"

Fatima, a mother of three adolescent girls affected by the Beirut post explosions.

UNFPA procured and distributed 15 post rape kits to the 19 prioritized health facilities under the Ministry of Public Health (MOPH). UNFPA also supported MOPH in assessing the continuity of clinical management of rape (CMR) services during COVID-19 to identify any challenges in service provision including clinical care, availability of PEP drug, access to the forensic doctors' services, and referral for follow up care.

H

RESEARCH & EVIDENCE GENERATION

UNFPA continued to lead and contributed to evidence generation activities to influence both advocacy and program decisions.

As part of the implementation of the National Action Plan (NAPs) of UNSCR 1325 on Women, Peace and Security, UNFPA in collaboration with the Ministry of Social Affairs (MOSA) and the National Commission for Lebanese Women (NCLW), conducted an assessment on safe shelters and has updated the GBV Lexicon, unifying terms, and definitions in consultation with key stakeholders for all practitioners (Police, judges, prosecutors and lawyers, health, and social services providers).



UNFPA conducted a study on the adoption of Cash and Voucher Assistance within the GBV service package where a cash intervention pilot will be rolled in 2021 and tailored to the needs of GBV survivors to mitigate the protection risks for marginalized women and girls.

UNFPA also conducted a study on the Impact of the multi-layered crisis of 2020 on older adults in Lebanon in collaboration with Al Makassed Association and the University for Seniors (AUB). The study consisted of a sample of 580 persons and resulted in several key findings and recommendations that were captured in the finalization of the National Strategy for Older People in Lebanon.



POLICY/STRATEGY DEVELOPMENT & STANDARD SETTINGS

UNFPA developed a series of guidance notes and technical tools and contributed to the development of national strategies and new approaches for services delivery, as follows:

- The Guide to GBV-SRH integration models that include a quick-reference tool that provides field-level guidance on the main fundamental principles of GBV-SRH integration in health care facilities at primary health care level. The Guide is directed towards health care practitioners and social workers working in health care facilities providing SRH services.
- UNFPA in collaboration with the United Nations Economic and Social Affairs (UN-ESCWA) supported the Ministry of Social Affairs (MOSA) to conduct a Situation Analysis on persons with disability in Lebanon (PWD). This report will lay foundation to the development of Lebanon's first national strategy on PWD. The situation analysis addresses many gaps and concerns concerning PWD including protection issues in general and GBV in particular.
- The Guidelines on Safe Distributions that sets standards to improve safeguarding and reduce protection risks during In-Kind Distributions developed on behalf of the PSEA Network.



CAPACITY DEVELOPMENT & SYSTEM STRENGTHENING

- UNFPA continued to support system strengthening and capacity development activities. In 2020, UNFPA focused on strengthening the capacities of selected partners and national institutions to provide quality and comprehensive GBV, especially in times of COVID-19, reaching more than 100 front-line workers among health practitioners, social workers, and community outreach workers.
- UNFPA also contributed to system strengthening and capacity building efforts by developing, piloting and rolling out guidance and tools such as the manual for the provision of remote case management and training manual for health care providers to provide remote health services to GBV survivors.



COORDINATION

- UNFPA played a key role in coordinating the GBV sector response to the different crises that the country was facing. UNFPA took the lead in coordinating the GBV response for the Beirut Port Explosions and contributed to enhancing the quality of GBV services and supported the revision of the service mapping and the referral pathway. UNFPA continued to co-chair the SGBV National Task Force which is the coordination mechanism that provides overall technical support to the GBV sector in Lebanon.
- UNFPA was also appointed Co-chair of the Protection from Sexual Exploitation and Abuse (PSEA) interagency network. In this role, UNFPA contributed to setting standards and complaint procedures and build the capacity of partners on SEA risk mitigation.



PARTNERSHIP

UNFPA GBV work in 2020 was closely associated with relevant governmental entities, namely the MOSA, MOPH and NCLW, local and international NGOs, academic institutions, local authorities and the United Nations system.

UNFPA RESPONSE TO THE BEIRUT PORT EXPLOSIONS



The massive explosions that shook Beirut's Port on 4 August 2020 devastated large parts of the city and caused more than 200 death, over 6,000 injured and the displacement of more than 300,000 people, including 81,000 women in reproductive age and 48,000 adolescents.

UNFPA immediately initiated the distribution of more than 17,000 dignity kits and collaborated with 23 partners to reach those mostly affected through provision of GBV and SRH services.

The explosions exposed families and individuals of all ages to post-traumatic stress, UNFPA reached more than 4,500 women and girls and with psychological first aid and strengthened actions to mainstream mental health in SRH and GBV services, including with training on for frontline workers.

From August to December 2020, more than 3,500 women and girls, marginalized individuals including migrant workers and members of the LGBTIQ community were reached with GBV services such as groups and individual counselling both in supported safe spaces and through door-to-door visits by mobile teams.

UNFPA also contributed to the Gender assessment of the Beirut Port Explosions to ensure that the humanitarian response adapted to the different needs of women, girls, boys, men, and marginalized groups.

ADAPTING TO THE COVID-19 PANDEMIC & THE SHADOW PANDEMIC



When the first lockdown was imposed in March 2020, UNFPA swiftly adapted to the remote modality of service delivery and developed tools to help partners provide effective services such as the guidelines for remote case management and the training manual for health care providers to provide remote health services to GBV survivors.



Implementing partners have piloted innovative ways to engage women and girls during lockdowns, using different social media platforms. UNFPA partners learned how to adapt to provide groups psychosocial support to women via WhatsApp using a mixed approach that include chats, voice messages and live calls. All the sessions were combined with information on how to use the different media platforms in a safe way and how mitigate the risk of online harassment.

UNFPA partners continue to target men and boys with community engagement activities and discussions around social norms and gender equality. Engaging community members through social media platforms proved to being an efficient way to involve male community members as more men and boys felt free to speak up because of the privacy ensured by the remote modality.



"Before attending the life skills online sessions, I was not participating in social events because I was afraid to be judged in a negative way when I express my feelings or my opinions. I was not able to speak aloud because of the fear of being ignored. But recently, after attending the online sessions, I started talking to girls of my age and noticed the way they were speaking. This helped me feel less scared of social interactions. I decided to break the chain and start talking even when I am not sure about the reactions of the others. Now I know I need to first appreciate myself to make others appreciate me".

Razan 15 years old attending girls psychosocial support sessions

PROMISING PRACTICE



Using arts to engage young people and raise awareness on GBV

UNFPA through its partners Concern Worldwide and URDA promoted the engagement of young people in arts competitions that had the double aim of raising awareness of GBV in targeted communities and provide opportunities for young girls and boys to discuss the drivers of GBV and foster their engagement towards eliminating gender norms that promote violence. The art competitions were also an occasion for young people to find creative ways to express their emotions during very challenging times.

Integration of GBV in SRH Service Package

Integration of GBV prevention and response into SRH services in emergency settings is a recognized essential, life-saving component of humanitarian response and fundamental to prevent further illness and trauma. UNFPA developed a guideline/reference tool that provides field-level guidance on the main fundamental principles of GBV-SRH integration in health care facilities at primary health care level. This tool is directed towards health care practitioners and social workers working in health care facilities providing SRH services.

In 2020 each UNFPA GBV implementing partner managing safe spaces and/or providing psychosocial support identified and partnered with institutions providing SRH services to ensure referrals of survivors in need of specialized health services, but also to provide information on SRH within the safe spaces to encourage the uptake of services. In addition, SRH practitioners were trained on , basic counselling and the referral pathway so that they could efficiently assist survivors of GBV. This approach has facilitated the uptake of services for survivors of violence and women and girls at risk and contributed to increase the number of referrals from the health sector to GBV actors.



PRIORITIES FOR 2021

- ▶ Ensure continuity of life saving GBV services and mitigating the increased risks of GBV.
- ▶ Scale up service provision of integrated GBV and SRH services to reach the most vulnerable and marginalized, with focus on mental health and psycho-social support.
- ▶ Pilot cash assistance within GBV response activities.
- ▶ Strengthen partnerships and collaboration with national institutions to improve service delivery.
- ▶ Lead advocacy efforts to further improve the policy and legal frameworks to promote women and girls' rights.
- ▶ Foster generation of evidence /research and knowledge management to better inform policies and programmatic interventions.
- ▶ Promote targeted economic empowerment initiatives within the GBV programme interventions for vulnerable women.
- ▶ Continue to support the inter-agency coordination of the GBV sector with a focus on regular mapping and monitoring the quality of available services.
- ▶ Support PSEA system strengthening, which includes improving feedback and complaints mechanisms adapted to women and girls of different ages and persons with disabilities.



UNFPA Lebanon, distribution of dignity kits

UNFPA's Donors



Norwegian Embassy
Beirut



Canada

UNFPA Lebanon wishes to thank all its donors in 2020 whose generous contributions made it possible to respond to the various crises by meeting urgent and life-saving interventions particularly for vulnerable women and adolescent girls.



United Nations Population Fund
Arab African International Bank Building
Riad El Solh Street
Beirut, Lebanon

P.O.Box: 3216-11, Beirut - Lebanon
Telephone: + 962566-1-961
Fax: + 962581-1-961

For more information, contact
Ms. Asma Kurdahi, Head of Office
kurdahi@unfpa.org

Ms. Joyce El Haykal, Communication Officer
haykal@unfpa.org