Follow-up assessment on gendered realities in displacement: Lebanon
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Follow-up assessment on gendered realities in displacement: Lebanon

One in four female-headed households earn less than LBP 2 million per month (US$1,327), compared to 35% in Beirut having household incomes of more than LBP 1 million a month (US$ 663), compared to 17% of male-headed households.

Women and girls (who make up 52% or 430,000 of Syrians in Lebanon), are disproportionately and differently impacted by humanitarian crisis, but the drivers and consequences of this is not always well understood. This report presents the findings and recommendations from a quantitative survey of 564 Syrian refugee women in Lebanon about the gendered realities of displacement. The survey covered Syrian refugee women’s role, responsibilities and experiences in displacement, particularly in the past two years dominated by COVID-19 and economic crises. The questions covered Syrian refugee women’s employment and economic situation, gendered impacts of coping strategies, changes in refugee women’s household roles and responsibilities, access to services, relationship with host communities, gender-based violence, and the impact of COVID-19.

1.1 Economy and employment

There has been a large drop in employment and wages for Syrian refugees and the Lebanese host community alike. Most survey participants stated that their householder income had decreased over the past two years. This was particularly the case in Bekaa (72%), which hosts a large Syrian population.

The vast majority of Syrian refugee women are not in income-generating employment. 83% of respondents described themselves as housewives, not working outside the home. However, the 15% of respondents who said they were in employment is a higher figure than the VASyR data of only 8% of working-age Syrian women being employed.

Nine out of ten respondents have primary school education or lower. Education did not have a major impact on whether or what kind of employment the respondents could access, as almost all the women who reported they were working characterised their work as temporary, precarious or inconsistent work. Self-employed women, however, were most likely to have secondary education.

Incomes are low across all education groups and regardless of the respondent living in an informal settlement or within communities. Regional differences matter, with 55% of respondents from Beirut having household incomes of more than LBP 2 million per month (US$1,327), compared to 35% in North and Akkar.

Female-headed households earn considerably less than male-headed households. While 38% of female-headed households earned more than LBP 2 million, this was the case for 47% of male-headed households. One in four female-headed households earn less than LBP 1 million a month (US$ 663), compared to 17% of male-headed households.

Work rarely provides enough income to cover basic needs, and more than 80% of households rely on humanitarian assistance. Male-headed households are slightly better able to access paid employment, while female-headed households rely more frequently on informal credit.

Negative coping strategies

The economic crisis has had such a severe impact in Lebanon that variations in vulnerability among respondents was relatively low – everyone is worse off. Almost all respondents (96%) had struggled to meet basic household needs in the past month. Vulnerabilities are high across the board, but large households used slightly more crisis and emergency coping strategies. There is also some geographical variety.

One third of respondents said children had been taken out of school – likely to have long-term impact of the children’s future livelihoods. Many household coping mechanisms affected men and women equally. However, boys were more likely to be sent out to work than girls.

Asked how they were coping with the effects of the COVID-19 pandemic, around 70% of respondents reported that their household had gone into deeper debt and reduced their food consumption. Not seeking necessary medical attention was the most commonly used coping strategy, used by 75% of households.
Women's decision making role

Almost eight out of ten women said they had taken on new responsibilities in the household in the past two years. Women’s marital status has a strong effect on her decision-making authority, with widows, divorced women and married women whose husbands were absent had much more decision-making power. Never-married women had the least authority in the household.

Married women living with their spouse were more likely to be responsible for engaging official bodies on behalf of the family (34%) than making financial decisions (20%) or family-related decisions (18%).

Women’s responsibilities have in particular expanded in the areas of making health-related decisions and financial aspects of the household, including making major or minor financial decisions, borrowing money, taking jobs and otherwise providing for the family.

A majority of women perceived that women’s role in the household and community had changed, and that women had more decision-making authority than previously. However, a majority of women also felt that changing roles and increased responsibilities had led to worsened conditions for women and girls. This was particularly the case in informal settlements, where 61% stated that conditions for women and girls had significantly (45%) or somewhat (16%) worsened. This may be linked to reactions and tensions due to women taking on new roles that go against prevailing gender norms and the burden for working women of working both inside and outside the house.

Few respondents perceived there to be significant consequences arising from lacking civil documentation such as marriage or birth certificates. The most frequently raised problems were registering children at school and accessing health services. While this was not raised in the survey, key informants noted that women missing marriage certificates can be left in a vulnerable position with fewer rights if the husband dies or she is divorced.

Access to services

Mobile phones: Almost all the women responding to the survey have access to phones and were able to use phones privately, although that was more difficult for women living in large households and for elder women. The high number is almost certainly related to the fact that the survey took place over the phone, thus skewing the sample towards those with regular access to phones.

Access to mobile networks was more challenging, with almost a third of respondents stating that they had insufficient funds for network charges. Among those reporting reduced access to phones and networks, more than half stated that this prevented them from accessing the services they needed.

Healthcare: Primary healthcare was top among the health services needed in the past six months, but only 40% of households who needed primary healthcare were able to access it. Women’s health services were more available, with 48% of those needing it saying they were able to access it.

40% of respondents stated that women in their household had needed psychosocial services, but of those who needed it, only 27% could access it.

Education: COVID-19, electricity cuts and economic crisis has affected access to education for everyone in Lebanon, refugees and Lebanese alike. Almost half of primary school-age children in the respondent households were out of school, a proportion rising to 81% for upper secondary school-age children. Boys are slightly less likely than girls to attend school.

For both boys and girls, cost was cited as the main reason for taking children out of school. For 12-14 and 15-17 year olds, in 5% of cases in each age group marriage was stated as a reason for taking girls out. For boys, apart from cost, most respondents stated
that they were taken out of school to work and contribute to the family income.

**COVID-19**

In terms of direct effects, 27% of household respondents had suffered health effects from COVID-19. Households in informal settlements were somewhat less affected than households within communities. Only around one third of respondents stated that household members who had caught COVID-19 were able to access the healthcare they needed.

Nine out of ten respondents reported worsened economic pressure on their household due to the pandemic. More than half stated that tensions within their households had significantly increased, with a further 25% saying they had somewhat increased.

Over half of the respondents said that the pandemic had significantly negatively affected the mental health of female members, while a smaller number (15%) reported that women and girls in their household were at greater risk of physical harm. Respondents with disabilities reported a greater risk of physical harm (33%).

**Safety and security**

More than a quarter of respondents reported safety issues occurring in the last six months. Of these, verbal harassment was most common (73%) and overwhelmingly directed at female members of the household.

Of those who reported safety issues, community violence (67%) and displacement/evictions (48%) were also frequently listed, which were also stated to affect women more than men. The safety issue reported to affect men more than women was detention and arrest (mentioned by 17% of those who reported safety issues).

Community violence was more commonly mentioned in the Beirut and Mount Lebanon region, but otherwise reports on safety issues did not differ across geographical or demographic groups.

**Gender-based violence**

Violence against women within the Syrian refugee community is seen as a big problem by 57% of respondents.

Women living among host communities are more likely to see violence against women as a big problem and to perceive that it happens frequently than women who live in informal settlements.

Respondents saw the main risk of GBV to be in open public spaces (45%) and at home (44%). Single women and married women whose spouses were at home saw ‘at home’ as the bigger risk, compared to women who were divorced, widowed or whose husband lived elsewhere.

Formal reporting of GBV incidents is not common. A third of respondents said incidents would never be talked about to anyone, while more would report to NGOs than to the police or authorities.

Sexual violence has increased in the past three years, according to a clear majority of respondents. Almost half the respondents regarded sexual violence to be common or very common.

Syrian sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC) community members are additionally vulnerable because they will often have lost their social connections and families due to their gender identity and sexual orientation and have limited access to other forms of support.
**Recommendations**

The report supports several recommendations listed here and described in more detail in the report’s conclusion:

- **Increase women’s economic empowerment interventions** that engage both individuals and households: Interventions should particularly engage men in the household to build their support for women’s economic activities and address the gender-normative barriers within households that hinder women’s ability to be economically active. Efforts to influence wider perceptions and gendered social norms that confine women and prevent them from seeking employment are also central.

- **Ensure that programmes are well targeted to avert harmful coping strategies,** particularly taking children out of school. Economic factors are the most-cited reason for removing children from school, so targeted support to improve affordability of transport and learning materials could help address this directly.

- **Economic empowerment interventions for Syrian women** could include consultations and assistance to identify and secure needed documentation, which could help secure decent work, reduce feelings of anxiety in engaging with authorities and encourage reporting of security or GBV incidents.

- **Provide interventions that support home-based businesses,** to include women who would find it difficult to commit to work outside of their homes.

- **Support women refugees’ engagement with government authorities,** for instance through the services provided by women-only centres.

- **Support government in strengthening its legislation on GBV** to ensure it is increasingly attuned to the rights, wishes and safety of survivors.

- **Cash assistance to Syrian households needs to be increased,** and programmes should be made ready to quickly scale up in times of acute shocks like those caused by the COVID-19 pandemic.

- **Women’s support organisations should contribute to and collaborate in labour market programmes,** including ‘decent work’ programming (such as that supported by ILO) that establishes workplace standards and works with the sector and employers to improve working conditions.

- **Ensure that the question of quality and affordable child-care support is considered for all livelihoods and economic empowerment interventions for Syrian refugee women.**

- **Develop enhanced referral and reporting assistance for Syrian GBV survivors,** as these women are often reluctant to report incidents to authorities, and there are significant risks to those who report.

- **Support the establishment of more women-only safe spaces where women in physical danger can seek help,** even in times of COVID lockdown. Multi-sector women-only centres would not only provide safe spaces, but also the opportunity to combine protection and empowerment interventions.

- **Extend psychosocial and mental health services,** as the need has increased and these services are currently difficult to access.
Introduction

Now in its eleventh year, the Syrian refugee crisis remains one of the largest in the world. In Syria’s neighbouring states, the number of refugees in need of some form of assistance is staggering. Of the more than 5.5 million Syrians refugees across the region, around 840,000 live in Lebanon. COVID-19 and economic crisis have worsened economic hardships at a time when many refugee families had already depleted their own resources and savings after years of displacement.

Women and girls are disproportionately and differentially impacted by humanitarian crises. Gender roles and the positionality of women within the structures of the family, community and society keep women and girls from participating equitably in the public sphere. While awareness of this has become commonplace, there is nevertheless a dearth of empirical research focused specifically on the refugee experiences of women and girls. This report presents the findings of a quantitative survey of 564 Syrian women refugees in Lebanon, supported by key informant interviews (KIIs) and a review of existing literature and data. It provides a gendered perspective on the challenges affecting Syrian refugee women in Jordan across a range of themes. The objective is to better understand women’s roles, responsibilities and experiences in displacement, including their experience of sexual and gender-based violence (SGBV), and how evolving gender roles are affected by and in return affecting the experience of displacement.

The findings of the survey show a steep deterioration of conditions for Syrian refugees – as has also been the case for the Lebanese host population. Lebanon’s multiple crises have made the economic situation facing Syrians especially challenging. Household incomes are low, with 96% of respondents reporting that they had difficulty meeting their household’s basic needs over the past 30 days. More than half the survey participants (56%) described resorting to emergency household coping strategies, such as taking risky or socially degrading jobs, removing children from school and/or sending them to work. Consistent with this, a high proportion of households were accessing humanitarian cash (85%) and informal credit (40%) in order to make ends meet.

The situation facing women is particularly concerning. The vast majority of survey respondents (75%) are married and not working outside the home. Among those who were employed (12%), most are working in temporary and precarious roles, and the level of respondents’ education has very little effect on their employment status. Female-headed households had lower incomes than male-headed ones. Respondents reported that women are taking on more responsibilities both within the home and in the community. However, this does not appear to have led to greater empowerment for women. Instead, respondents were more likely to report that increased responsibilities have been accompanied by worsening conditions for women and girls. Respondents also consistently identify female members of households as more affected than males by safety issues such as verbal or physical harassment, and high proportions of respondents recognise GBV as a major concern within the Syrian community, and one that is getting worse.

1.1 Themes covered by the survey

The survey findings cover the following themes relevant to the gendered realities of displacement for refugee women in Lebanon:

- Employment, economic security and livelihoods
- The use of negative coping strategies
- Women’s decision-making role in the household and the community
- Rights and legal status
- Access to mobile phones
- Access to services, in particular health and education
- Effects of COVID-19 on livelihoods and wellbeing
- Safety and security
- Social cohesion and host community relations
- Sexual and gender-based violence.

For each theme, the report presents the most significant findings from the survey in Lebanon. These are contextualised and discussed in the light of information collected from key informant interviews with UN and NGO stakeholders and a review of relevant literature and existing datasets. The focus across the survey, interviews and literature review is on the experiences of women refugees. The report covers the period since 2018.
1.2 Approach and methodology

This country report is part of a broader project on the gendered realities of displacement for Syrian refugees conducted in Iraq, Jordan and Lebanon. The findings in this Lebanon country report are based mainly on a quantitative survey conducted with refugee women in January and February 2022. The same survey was conducted in Jordan, allowing a measure of comparison between the situation of Syrian refugee women in the two countries. This comparison is presented in a separate briefing note.1 In addition to the survey, key informant interviews (KIIs) were conducted in all three countries, and an annotated bibliography of relevant literature created (see Figure 1).

The project follows on from research conducted in 2018, and the survey builds and elaborates on the questionnaire from this previous study.2 The objective is to contribute to evidence-based programming, advocacy and coordination based on a deep commitment to gender ethics and human rights across countries impacted by the Syrian refugee crisis. Placing gender at the forefront of humanitarian and resilience programming is essential to addressing the needs of all refugees in Lebanon, 52% of whom are women. Gender-sensitive data enables gender-responsive programming, which contributes to furthering both women’s access to services and women’s empowerment.

Country specific overview

The survey of 564 refugee women in Lebanon was conducted in January and February 2022. An overview of demographic characteristics of the women surveyed is provided in section 3.

To ensure the surveyed women are representative of the female refugee population in Lebanon overall, a stratified random sample of households was taken, with strata size proportional to the reporting by the UN High Commissioner for Refugees (UNHCR) on the geographical distribution of Syrians within Jordan. Survey respondents were recruited among refugees living both in informal settlements and within communities (cities and villages).

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1 Resource limitations made it possible to only do quantitative research in two out of the three country studies, so the research for the report on the Kurdistan Region of Iraq was based on qualitative methods: focus groups, KIIs and review of existing data sets.
The sampling plan is estimated to generate a standard error of 0.021 for measured proportions of 50% at the national level. This means that national-level estimates measured at 50% will have a 95% confidence interval of 4.1% (i.e., in 95% of multiple sampling efforts, the proportion would be estimated to be between 45.9% and 54.1%) and will narrow with measurements closer to 0% or 100%. Analysis of association between variables involved cross-tabulating categorical variables and examining the strength of association using Chi square.3 Graphs show cross tabulations where Chi Square measures were significant to at least a 95% level.
Background: The situation in Lebanon

The past three years have seen Lebanon impacted by compounded crises including the ongoing economic crisis, the Beirut port explosion in August 2020 and the COVID-19 pandemic, leading to the country’s ‘deepest political and socioeconomic crisis since the end of the civil war’. In spring 2021, the World Bank found that Lebanon’s financial crisis ranked among the top ten most severe global crises since the mid-19th century. In March 2021 it was estimated that 78% of Lebanese are now living in poverty (which is triple the 2020 estimated number), with 36% living in extreme poverty (a 23% rise from 2020).

The political crisis has been ongoing since protests broke out in 2019, with numerous caretaker governments attempting to respond to an economic crisis and health pandemic. The economic crisis is also threatening a breakdown in security, occurring as it is in an unstable and complex landscape of political, religious, and sectarian differences among Lebanese communities.

Lebanon hosts the world’s highest number of displaced people per capita, with nearly 840,000 registered Syrian refugees living in Lebanon. Around 437,000 are women and girls, 52 percent of the registered Syrian refugee population. The Lebanese government estimates that there are an additional 500,000 Syrian refugees living informally in the country. The number of registered refugees has gradually reduced since its peak of almost 1.2 million in 2015, when the government of Lebanon stopped the registration of refugees with UNHCR. Since then, it has become more difficult year by year for Syrians to obtain legal residency in Lebanon.

### Lebanon refugee situation (UNHCR data as of 31.01.2022)

<table>
<thead>
<tr>
<th>Total persons of concern by country of asylum / Registered Syrian refugees</th>
<th>839,788</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of female refugees</td>
<td>437,000 or 52% of the Syrian refugee population</td>
</tr>
</tbody>
</table>

1 United Nations High Commissioner for Refugees (2022), Operational Data Portal Refugee Situations, link
4 Human Rights Watch (2022), Lebanon Events of 2021, link.
6 Human Rights Watch (2022), Lebanon Events of 2021. Link
7 UNICEF, UNHCR and WFP, VASyR 2021: Vulnerability Assessment of Syrian Refugees in Lebanon, link.
**Lebanon’s ranking on the Global Gender Gap Index**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2018</th>
<th>2020</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Ranking</td>
<td>140/149</td>
<td>145/153</td>
<td>132/156</td>
</tr>
<tr>
<td>Economic Participation &amp; Opportunity</td>
<td>(Rank: 136) 0.432</td>
<td>(Rank: 139) 0.442</td>
<td>(Rank: 139) 0.487</td>
</tr>
<tr>
<td>Educational Attainment</td>
<td>(Rank: 110) 0.959</td>
<td>(Rank: 111) 0.964</td>
<td>(Rank: 113) 0.964</td>
</tr>
<tr>
<td>Health and Survival</td>
<td>(Rank: 122) 0.967</td>
<td>(Rank: 124) 0.967</td>
<td>(Rank: 82) 0.970</td>
</tr>
<tr>
<td>Political Empowerment</td>
<td>(Rank: 147) 0.024</td>
<td>(Rank: 149) 0.024</td>
<td>(Rank: 112) 0.129</td>
</tr>
</tbody>
</table>

Score of 1 = complete gender parity and 0 = complete imparity *

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*Gender gap indicators and ranking, 2018-2021*
Overview of women participating in our study

This survey in Lebanon included 564 female Syrian refugees. To be representative, a stratified random sample of households was taken, with strata size proportional to UNHCR reporting on the geographical distribution of Syrians within Jordan. Samples were also proportional to the situation in which Syrian refugees were living at the time of this study, with most refugees residing within communities. The sample included 410 Syrian women living in informal settlements and 154 Syrian women living within communities.

<table>
<thead>
<tr>
<th>Sample of respondents by age group and region</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governorate</td>
</tr>
<tr>
<td>Beirut and Mount Lebanon</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>North and Akkar</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Bekaa (Bekaa and Baalbeck</td>
</tr>
<tr>
<td>(El Hermel)</td>
</tr>
<tr>
<td>South and Nabatiyeh</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

A high-level summary of respondent characteristics is provided below:

- In Lebanon, most respondents had a primary level of education (58%), with illiteracy rates being highest among older respondents (74% of respondents aged 60+).
- The majority of respondents were married and living with their partners (73%). This was particularly the case for younger respondents aged between 18 and 29 (81%). 44% of respondents 60 years of age and older were widowed.
- 37% of respondents were from female-headed households compared to 56% from male headed households. 7% of respondents reported having shared leadership of the head of household role.
- There was a strong trend of female-headed households increasing with respondents’ age in Jordan, rising from 14% for those aged 18 to 29 to 69% for those aged 60 plus.
- 4% of respondents in Lebanon reported having a disability.
2. Respondent characteristics

2.1 Marital status by age

2.2 Gender of head of household

2.3 Level of education
Summary

There has been a large drop in employment and wages for Syrian refugees and Lebanese host community alike, and most survey participants stated that their household income had decreased over the past two years. This was particularly the case in Bekaa (72%), which hosts a large Syrian population.

The vast majority of Syrian refugee women are not in income-generating employment. 83% of respondents described themselves as housewives, not working outside the home. However, the 15% of respondents who said they were in employment is a higher figure than the VASyR data of only 8% of working-age Syrian women being employed.

Nine out of ten respondents have primary school education or lower. Education did not have a major impact on whether or what kind of employment the respondents could access, as almost all the women who reported they were working characterised their work as temporary, precarious or inconsistent work. Self-employed women, however, were most likely to have secondary education.

Incomes are low across all education groups and regardless of the respondent living in an informal settlement or within communities. Regional differences matter, with 55% of respondents from Beirut having household incomes of more than LBP 2 million per month (US$1,327), compared to 35% in North and Akkar.

Female-headed households earn considerably less than male-headed households. While 38% of female-headed households earned more than LBP 2 million, this was the case for 47% of male-headed households. One in four female-headed households earn less than LBP 1 million a month (US$ 663), compared to 17% of male-headed households.

Work rarely provides enough income to cover basic needs, and more than 80% of households rely on humanitarian assistance. Male-headed households are slightly better able to access paid employment, while female-headed households rely more frequently on informal credit.
4.1 Employment situation

The multiple crises hitting Lebanon have affected Lebanese and Syrians alike, and led to a stark competition for jobs and resources. Both Lebanese and Syrian workers are suffering income reductions by more than two thirds, mainly the result of layoffs and reduced work hours. The 2021 Vulnerability Assessment of Syrian Refugees in Lebanon (VASyR 2021) found unemployment for Syrian refugees at 30%. Only 9% of women were in employment, compared to 59% of men.

“You cannot look at Syrian refugee job access without looking at the socio-economic crisis in Lebanon, where there is [a large number of] jobs lost, huge inflation and depreciation of the Lira”

KII with INGO in Lebanon on the widespread effects of the Lebanese crisis

Before the economic crisis, Lebanese citizens had little interest in unskilled jobs like agricultural labour or garbage collection, which have been mostly filled by Syrian refugees. However, under the current economic circumstances, Lebanese are now seeking work in these sectors and are competing with Syrian refugees.

“If we say that 77% of the Lebanese are below poverty levels, we have to think of the Syrians at 20-25% further below that”.

KII with INGO in Lebanon

“The level of poverty among Syrian refugees has increased […], with the decreased attention to the Syrian crisis and the decreased level of funding”.

KII, local NGO

The survey found that 75% of respondents are married and not living outside of their homes. Far fewer respondents (15%) were employed in part-time or fulltime work, which is somewhat higher than the VaSYR 2020 data referred to above which showed only 8% of working-age women refugees in employment. The survey finds that the majority of this is precarious, temporary or inconsistent work (12%). Women aged between 35 and 44 are the most likely to be employed (21.1%).
The vast majority of respondents were educated at the primary level or lower (511/564 = 91%). More years of education does not appear to increase the likelihood of employment.  

The graph below shows that 18% of illiterate respondents were employed, which is a higher percentage than respondents with primary or secondary education.

Although the sample of women with diplomas or higher education was too small to discern trends in their employment level.
Furthermore, for the 86 respondents that were employed, their level of education seems to have little influence over the kind of employment that respondents can access. No matter the respondents’ level of education, the vast majority are working in temporary or precarious work. Those who are self-employed were most likely to have a secondary level of education.

Women living in informal settlements are more likely than those living within communities (in cities and villages) to be employed (20.8% in informal settlements compared to 13.2% in communities). Employment is lowest among respondents in South and Nabatiyeh (10%), compared to North and Akkar (17.4%).

**4.2 Household Income**

Household incomes are consistently low, with the majority (55%) earning under 1,000,000 LBP per month (US$ 663 at the time of the Survey).
There is not a strong difference between incomes earned by households located in informal settlements and within communities. There are differences in incomes among regions. 53% of respondents in Beirut reported household income of more than 2 million LBP (which was US$ 1,327 at the time of the survey) and 2% earned more than 5m LBP (US$ 3,316). Meanwhile in North and Akkar, only 32% earned more than LBP 2 million/US$1,327 and 2% more than LBP 5 million/US$3,316.

### Household Income by Situation and Region

<table>
<thead>
<tr>
<th>Situation</th>
<th>Household Income (% of Respondents)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban informal</td>
<td>22%</td>
</tr>
<tr>
<td>Peri-urban</td>
<td>21%</td>
</tr>
<tr>
<td>Rural</td>
<td>11%</td>
</tr>
</tbody>
</table>

### Household Income by Gender of Head of Household

<table>
<thead>
<tr>
<th>Gender of Head of Household</th>
<th>Household Income (% of Respondents)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>25%</td>
</tr>
<tr>
<td>Female</td>
<td>75%</td>
</tr>
</tbody>
</table>

There is not a clear relationship between a respondent’s education and household income. The survey finds that female-headed households earn less than male-headed households. Our KIIs revealed that women in general, and in the agricultural sector in particular, earn half the wage of men doing the same work. Additionally, there seems to be a hierarchy of “women’s jobs” as opposed to “men’s jobs”. While women and girls work in farms and young boys work in food processing factories, men tend not to. The reason given for this was that this type of work generate very little income (10,000 to 12,000 LBP per day, less than half a US dollar at the time of the survey).

“...and when asked why don’t you take the place of your child, the father said: I cannot work for 12,00 LBP for a day”

KII, with INGO in Lebanon reporting on a Syrian male refugees response to taking less well paid work

Most participants perceive that household incomes have decreased over the past two years. Our KIIs mentioned that Syrian labourers suffered greatly due to the devaluation of the Lebanese Lira, with one citing that “[b]efore the crisis their daily wages were at around 12,000 lira [LBP] per day. Before the crisis this amounted to US$8, and now is at less than half a dollar a day.”

“They were vulnerable to begin with and now their situation has become worse. Increased prices of rent, the devaluation of the lira, and decrease in employment opportunities, decrease in humanitarian support”

KII, with local NGO in Lebanon

“Small and medium businesses shut down and a lot of Syrians who had some sort of job lost it, it has increased poverty levels.”

KII, with INGO in Lebanon
6. Perceived trends in income, last two years

The majority of respondents in both informal settlements (60%) and within communities (65%) reported that household incomes have decreased over the past two years. The highest proportion of respondents who perceive incomes to have decreased are in Bekaa (72%) which has a particularly high Syrian refugee population.

Our KII responders spoke of those in Bekaa as mainly working in agriculture during spring and summer with minimal wages. They also mentioned problems with exploitation and abuse by landlords and municipalities.

7. Perceived change in female contribution to household income, last two years
4.3 Sources of income

The survey found that work income is rarely sufficient to support families, so additional sources are required for families to get by. More than 80% of households access cash from humanitarian organisations and rely on this to supplement their income.

There are differences between respondents living within communities and in informal settlements. Households within communities have better access to salaried employment while those in informal settlements are more reliant on informal credits. Our KII responders spoke about working arrangements for Syrian informal settlements who have access to NGO facilitated opportunities such as cash for work, livelihoods project like sewing, cooking and using pre-displacement skills. They also referred to Shawish brokered opportunities that are mainly in agriculture. Syrian refugees are highly reliant on humanitarian aid provided by UN agencies and NGOs, and this reliance has increased in the last three years.

Female and male headed households exhibit differences in livelihoods. While male-headed households are slightly better able to access salaried employment, female headed households report more frequent the use of informal credit. KIIIs revealed that for some Syrian women refugees, the amounts NGOs pay women as transportation cost to attend training sessions are perceived as a source of income.

“International assistance is crucial or they will be destitute”

KII, with INGO in Lebanon
Summary

The economic crisis has had such a severe impact in Lebanon, that variations in vulnerability among respondents was relatively low – everyone is worse off.

Almost all respondents (96%) had struggled to meet basic household needs in the past month. Vulnerabilities are high across the board, but large households used slightly more crisis and emergency coping strategies. There is also some geographical variety.

Not seeking necessary medical attention was the most commonly used coping strategy, used by 75% of households.

One third of respondents said children had been taken out of school – likely to have long-term impact of the children’s future livelihoods.

Many household coping mechanisms affected men and women equally. However, boys were more likely to be sent out to work than girls.

Asked how they were coping with the effects of the COVID-19 pandemic, around 70% of respondents reported that their household had gone into deeper debt and reduced their food consumption.
This section uses the WFP’s Negative Coping Strategies Index to assess the amount of economic pressure that respondent households are under, and the kinds of strategies they undertake to meet their basic needs. The questionnaire first asks respondents whether they have had difficulty meeting basic needs. Following this, it asks whether they or members of in their households have used any of 13 coping strategies (see table below).

The 13 coping strategies are arranged based on severity. “Stress” coping strategies are less severe but may still have longer-term impacts for those who employ them. Crisis and Emergency coping strategies are more severe, with long-term consequences for those who resort to them. Where a strategy was employed that affects specific members of the household, we asked whether those affected were male, female or both.

### Negative Coping Strategies

<table>
<thead>
<tr>
<th>STRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sell goods or assets</td>
</tr>
<tr>
<td>Spend savings</td>
</tr>
<tr>
<td>Use credit or borrow from friends and family</td>
</tr>
<tr>
<td>Change accommodation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CRISIS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduced expenditure on essential non-food expenses</td>
</tr>
<tr>
<td>Sent children to eat at someone else’s house</td>
</tr>
<tr>
<td>Sold productive assets</td>
</tr>
<tr>
<td>Shared resources with neighbours</td>
</tr>
</tbody>
</table>

*Members of the family not sought needed medical attention

<table>
<thead>
<tr>
<th>EMERGENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>*Beg, or send children to beg</td>
</tr>
<tr>
<td>*Members of the family accepted unusual, high risk, socially degrading jobs</td>
</tr>
<tr>
<td>*Reduce expenses by withdrawing children from school</td>
</tr>
<tr>
<td>*Send children (under 18) to work, in order to contribute to family income</td>
</tr>
</tbody>
</table>

Items where gendered exposure was investigated

### 5.1 Ability to meet needs

Overall, 96% of all respondents reported that they struggled to meet household basic needs in the last 30 days. There is little to distinguish different geographical divisions from each other. All regions are under similar pressure.

The percentage of Syrian families who can’t cover basic nutrition needs has increased immensely. Meat has been taken out of daily nutrition, rents have increased, and we are back to the situation of several Syrian families living together in the same shelter.

KII, INGO
Most commonly used negative coping strategies

The use of negative coping strategies is widespread, with some much more frequent than others. The most commonly mentioned individual coping strategies used by respondents in the past 30 days before the survey were using credit (85% had done or exhausted this), reducing expenses on essential non-food items (86%) and not seeking needed medical attention (75%). This is in line with other recent studies. The Lebanon crisis response plan noted that “[i]n 2020, 62% of Syrian households cited reducing health care expenses as a coping strategy to dealing with the impact of Lebanon’s economic crisis”, in addition to a range of other coping mechanisms.11 The response plan warned that “Syrian households are increasingly resorting to a variety of food and livelihoods coping strategies, which shows that households have reached a point where their assets have been already depleted and they now have a much lower capacity to cope with future shocks”.12
### 3. Negative Coping Strategies

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Did not do this</th>
<th>Did this</th>
<th>Exhausted</th>
<th>Did or exhausted</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STRESS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sell goods or assets</td>
<td>56%</td>
<td>33%</td>
<td>11%</td>
<td>44%</td>
</tr>
<tr>
<td>Spend savings</td>
<td>78%</td>
<td>18%</td>
<td>4%</td>
<td>22%</td>
</tr>
<tr>
<td>Use credit or borrow from friends and family</td>
<td>15%</td>
<td>85%</td>
<td>0%</td>
<td>85%</td>
</tr>
<tr>
<td>Change accommodation</td>
<td>91%</td>
<td>5%</td>
<td>3%</td>
<td>9%</td>
</tr>
<tr>
<td><strong>CRISIS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reduced expenditure on essential non-food expenses</td>
<td>14%</td>
<td>85%</td>
<td>1%</td>
<td>86%</td>
</tr>
<tr>
<td>Sent children to eat at someone else’s house</td>
<td>64%</td>
<td>35%</td>
<td>1%</td>
<td>36%</td>
</tr>
<tr>
<td>Sold productive assets</td>
<td>91%</td>
<td>8%</td>
<td>1%</td>
<td>9%</td>
</tr>
<tr>
<td>Shared resources with neighbours</td>
<td>53%</td>
<td>47%</td>
<td>1%</td>
<td>47%</td>
</tr>
<tr>
<td>Members of the family not sought needed medical <em>attention</em></td>
<td>25%</td>
<td>74%</td>
<td>1%</td>
<td>75%</td>
</tr>
<tr>
<td><strong>EMERGENCY</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Beg, or send children to beg</td>
<td>94%</td>
<td>6%</td>
<td>0%</td>
<td>6%</td>
</tr>
<tr>
<td>Members of the family accepted unusual, high risk, socially degrading jobs</td>
<td>85%</td>
<td>17%</td>
<td>1%</td>
<td>18%</td>
</tr>
<tr>
<td>Reduce expenses by withdrawing children from school</td>
<td>62%</td>
<td>28%</td>
<td>10%</td>
<td>38%</td>
</tr>
<tr>
<td>Send children (under 18) to work, in order to contribute to family income</td>
<td>57%</td>
<td>42%</td>
<td>1%</td>
<td>43%</td>
</tr>
</tbody>
</table>
5.3 Severity

Respondents can and do utilise a range of strategies, so to get a better sense of the level of pressure households are under, respondents were categorised according to the most severe coping strategy they reported.

The table below shows that vulnerability varies very little according to whether households are in informal settlements or within communities. It also shows geographical differences, with the highest proportions of respondents exhibiting emergency coping strategies in Beirut and North and Akkar. Vulnerability is also associated with household size. Larger households tend to exhibit slightly higher proportions of crisis and emergency coping strategies than smaller ones, but households of five members or more are under considerable pressure.

The analysis suggests some differences in the kinds of coping strategies used by households of different size: larger households are more likely to deploy the emergency-type livelihood coping strategies of withdrawing children from school or sending them to work.
5.4 Gendered exposure to coping strategies

The least reported strategy is begging, or sending children to beg, which only 30 respondents (5%) said they had done. The survey is unlikely to reliably capture the situation, as it is a very sensitive topic for respondents, and social workers warn that families are unlikely to reveal they have done this outside of an established relationship. As a result, we do not provide analysis on which gender is more likely to be affected.

The most frequently utilised of these strategies was not seeking necessary medical attention, utilised in the families of 75% of respondents. Men and women are equally likely to be affected. Respondents indicate that men are more likely to accept a high-risk or socially degrading job. Among households that had withdrawn children from school (34% of all respondents), both boys and girls are likely to be removed. Among those who had sent children to work (38% of all respondents), boys were more likely than girls to be sent to work.

‘Education, if you prioritise the girls will be dropped from school. Then early marriages have come back into the fold’.

KII, international organisation

The impact of COVID-19

When asked how they were coping with the effects of the COVID-19 pandemic, around 70% of respondents reported that their household had gone into deeper debt to cover the costs of basic necessities. A similar percentage of respondents had to reduce their food consumption. KIIIs have indicated that Syrian refugees are also accepting lower wages and that Syrian refugee women are under greater threat of sexual exploitation due to the COVID-19 and economic crises.

‘A lot of landlords try to abuse a situation offer to marry woman secretly to relieve her from rent.’

KII, local NGOs
Women’s decision-making roles and responsibilities

Summary

Almost eight out of ten women said they had taken on new responsibilities in the household in the past two years.

Women’s marital status has a strong effect on her decision-making authority, with widows, divorced women and married women whose husbands were absent had much more decision-making power. Never-married women had the least authority in the household.

Married women living with their spouse were more likely to be responsible for engaging official bodies on behalf of the family (34%) than making financial decisions (20%) or family-related decisions (18%).

Women’s responsibilities have in particular expanded in the areas of making health-related decisions and financial aspects of the household, including making major or minor financial decisions, borrowing money, taking jobs and otherwise providing for the family.

A majority of women perceived that women’s role in the household and community had changed, and that women had more decision-making authority than previously.

However, a majority of women also felt that changing roles and increased responsibilities had led to worsened conditions for women and girls. This was particularly the case in informal settlements, where 61% stated that conditions for women and girls had significantly (45%) or somewhat (16%) worsened. This may be linked to reactions and tensions due to women taking on new roles that go against prevailing gender norms and the burden for working women of working both inside and outside the house.
It is difficult to generalise on women’s decision-making power and role, since there will always be differences from one household to another depending on the respondent’s place of origin (including rural/urban), family structure and educational background. While Syrian society before the conflict was patriarchal and organised around traditional gender roles, the upheaval and protracted reality of displacement can affect gender roles, especially in cases where women become heads of their households. Understanding in what ways Syrian refugee women’s decision-making role is changing, is important for understanding the gendered realities of displacement.

The massive shock of displacement changed the lives of Syrian refugee women and to some extent their roles in the household, especially if they have become heads of their households. For instance, 78% of women responding to the survey said that their role and responsibilities in the household had changed in recent years. Their presence in Lebanon, especially Beirut and other cities, which has more progressive gender norms than Syria, has affected women’s empowerment.

6.1 Marital status and head of household

The majority of survey respondents are married (81%), and most are living with their spouse (73%). Most households (59%) are male headed. Of the respondents living in female-headed households, the majority reported that they were themselves the head of their household. A small but significant number of households (12%) have leadership shared between men and women.

The 25 respondents who identified themselves as having a disability were likely to be living within female-headed households.

‘Different areas in Syria have different outlooks towards women. For example, there are communities who ask their daughter’s opinion on her marriage and others who do not. and this is reflected in the camps.’

KII, local NGO
6.2 Who makes the household decisions?

Our survey asked questions about who makes decisions in three spheres of responsibility: financial decisions, family related decisions, and engaging with official bodies on behalf of the family. The results showed that a respondent’s marital status has a strong effect on female decision-making (see graphs below):

- Never-married women do not have much decision-making authority in households. Only 13% of those who are single reported having responsibility for financial decisions, and 17% reported having responsibility for family-related decisions.

- Being married with a spouse in the household most often results in the male spouse having authority over decision-making: among respondents who were married with spouses living in the household, 47% replied their spouse was responsible for financial decisions and 42% said their spouse was responsible for family-related decisions.

- Women who were or had been married but were not living with a spouse (absent husband, divorced or widowed) tend to have much more decision-making power. More than 80% of respondents in this situation were responsible for financial and family-related decisions.

‘If she is the head of the household then she would have a main role in decision making. But if the household is headed by a man, then her role is not very big.

KII, local NGO

‘Women, after becoming earners have gained a margin of negotiation in their families and in the decision-making process. But it is all relative and based on where they came from originally. In all cases women are more likely to facilitate a decision rather than take it. Also there is a difference in the role relevant to the age of the woman. Older women may have a stronger voice (the mother/mother-in-law) than the wife/daughter/sister).’

KII, local NGO
2. Responsibility over spheres of decision-making

Who is responsible for financial decisions?

Who is responsible for family-related decisions?

Who is responsible for engaging official bodies on behalf of the family?

As above, respondents with a disability had a higher amount of authority within their households, as they were most likely to report that they were responsible for financial and family related decisions, and most likely to be responsible for engaging official bodies on behalf of the family.
3. Responsibility over spheres of decision-making, by disability

Who is responsible for financial decisions? (n=564)

Who is responsible for family-related decisions? (n=564)

Who is responsible for engaging official bodies on behalf of the family? (n=564)
6.3 Areas of new responsibility: have decision-making roles change in recent years?

Only around a fifth of respondents (22%) reported that their decision-making responsibilities have not changed in recent years. For the rest, responsibilities are increasing in a range of different domains. This is particularly the case with health-related decisions, as well as increasing women’s involvement in financial aspects of the household.

‘Women manage children, children’s health etc. They take their children to women friendly spaces, like the primary healthcare centres, or the social development centres. Everything related to schooling is women’s responsibility. These services and spaces are embedded within beneficiaries’ neighbourhoods so most of the time it is not an issue for the women to go to.’

KII, INGO

1. Ability to meet basic needs

In the last 3 years, have you taken on any new responsibilities within your household or community?

There are regional differences in how responsibilities are changing. Respondents from Beirut said responsibilities had increased in a number of areas, notably in making financial decisions (40%) and health-related decisions (57%). In the South, women were involved in mediating disputes more often than in other regions. Respondents from Bekaa were more likely than respondents from other regions to say that their responsibilities had not changed. The survey also revealed some differences depending on whether respondents lived in informal settlements or within communities. Women living within communities are more likely to be more involved in negotiating with landlords (9.8%, compared to 2.6% in informal settlements). They are also more likely to be involved in minor household financial decisions (32%, compared to 22% in informal settlements).

‘If there is anything related to the public authority, municipality or the police, the man is always the interlocutor for the household. In agricultural areas, the Shawish who manages life within camp and decides who gets a job or doesn’t, and is in charge of transport, he deals with the men. I’ve never seen a woman as a focal point in Syrian communities.’

KII, INGO
‘They participate in areas which are considered as soft engagement, but not necessarily what they need to be participating in. You don’t see them participate in durable solution discussion, such as cash programming. We see them talk about social cohesion etc. Unfortunately, part of the problem is that NGOs don’t understand that by working in this space they undermine the process.

KII, INGO
6.4 Perceived changes in areas of male and female responsibility

A majority of the women surveyed perceive that women’s roles in both households and communities have changed:

- In households, 59% women said they believe female decision-making had increased (32% said they had significantly increased)
- In communities, 58% women said they believe female decision-making had increased (32% said they had significantly increased)

While this would seem to be a positive development, the women surveyed responded that expanding roles were leading to more difficult lives for women and girls. Overall, 52% stated that conditions have become worse for women and girls, compared to 30% who think they are better. This suggests that, at least in the case of Lebanon, women’s expanding roles are not indicative of (or at least not only) increasing female empowerment, but are the result of women bearing an ever increasing burden as living conditions become more challenging. These perceptions appear to be stronger in informal settlements than for those who live within communities: 45% of respondents in informal settlements reply that changes in decision-making roles have led to significantly worsened conditions for women and girls, compared to 30% within communities.

KIIIs have indicated that for women earners, while they may gain some decision-making responsibility, their life may become even more difficult. Intimate partner violence may increase and, in the absence of day care facilities and other household members not changing their contribution to housekeeping, there is the added physical and mental burden of having to manage responsibilities at work and the household.

‘Women are living under a tremendous burden of working inside and outside the house, live in crowded spaces with extended families and are susceptible to exploitation and abuse.

KII, local NGO

‘When the environment does not change with a woman’s changing role and women are not equipped to handle their new roles as economic partners, this will destabilise the household and sometimes leads to violence’.

KII, local NGO

‘There is increased GBV and it primarily has to do with increased women’s activities and role. Breakthrough in society make all the traditional forms of engagement insecure, makes a lot of males insecure as to their position.

KII, INGO
Where changes are occurring

In the last 3 years, to what extent have male and female roles changed in your household and in communities?

To what extent have these changes led to improved or worsened conditions for women and girls?
Rights and Legal Status

Summary

The women responding to the survey were almost certainly under-reporting the degree to which household members were missing legal documentation. This may be due to increased fear of detention or deportation and a reluctance among respondents to divulge in a telephone interview that members of their household may be lacking documentation, given the potential consequences of missing them.

The survey respondents reported serious potential consequences of missing legal documentation allowing them to live and work in Lebanon, with more than half saying it would reduce mobility out of fear of detention and/or deportation. Almost a third mentioned difficulty in finding work with adequate pay and working conditions.

Few respondents perceived there to be significant consequences arising from lacking civil documentation such as marriage or birth certificates. The most frequently raised problems were registering children at school and accessing health services. While this was not raised in the survey, key informants noted that women missing marriage certificates can be left in a vulnerable position with fewer rights if the husband dies or she is divorced.

Documentation is a key area of concern in Lebanon. Although historically Syrians did not need documentation to come and go in Lebanon, new legislation requires Syrians to show documentation when crossing the border, and those found to have crossed at informal crossings can be deported. While regulations for Syrian refugees to enter and reside in Lebanon were put in place in 2015, the government of Lebanon suspended Syrian refugee registration with UNHCR around the same time. In 2017, displaced Syrians who were registered with UNHCR prior to January 2015 were exempted from residency and overstay fees. In 2019, displaced Syrians who had entered the country irregularly after April 2019 and did not have legal residency could be apprehended and released to the Syrian authorities. There are many challenges to obtaining documentation in Lebanon including cost, an inability to find a sponsor, mistrust of the process, lack of knowledge, lack of identity documents and closures due to COVID-19.

7.1 The consequences of missing legal documentation

The women responding to the survey were almost certainly under-reporting the degree to which household members were missing legal documentation. This may be due to increased fear of detention or deportation and a reluctance among respondents to divulge in a telephone interview that members of their household may be lacking documentation, given the potential consequences of missing them. The VASyR 2021 found that only 16% (down from 20% in 2020) of Syrians over 15 had legal residency, a proportion that has been decreasing consistently year-on-year. \(^\text{15}\) The gender analysis chapter of the VASyR 2021 found that women were less likely to have legal residency than men.

In 2021, only 14% of women had legal residency, down from 18% in 2020. For men, those with legal residency had reduced from 23% in 2020 to 19% in 2021. \(^\text{16}\)

The women responding to the survey were aware that significant difficulties could arise from lacking documentation, include detention and deportation as well as greater exposure to exploitative working conditions. Furthermore, many respondents report that missing documentation reduces mobility due to fear of detention or deportation (52%) and creates difficulty in finding work with adequate pay or working conditions (30%).

Consequences are perceived slightly differently across regions. Respondents from all regions see reduced mobility as a consequence of missing documentation, but respondents from Bekaa are more likely to be exposed to exploitative working conditions. In the North and Akkar, respondents were more likely to have difficulty accessing public services.

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\(^\text{15}\) UNICEF, UNHCR and WFP, VASyR 2021: Vulnerability Assessment of Syrian Refugees in Lebanon, p. 11, link.

\(^\text{16}\) UNICEF, UNHCR and WFP, in collaboration with UN Women, Gender Analysis, chapter of the 2021 VASyR, link.
7.2 The consequences of missing civil documentation

The Lebanese government simplified the procedures for birth registration, whereby it allowed the registration of Syrian children over one year of age and born in Lebanon with an initial deadline of 2018, which was extended to 2019 and then to 2020. In spite of this, registration rate decreased in 2020, due to the lockdown, lack of parents’ residencies, and cost of registration. Other barriers to registering births include lack of required documents such as legal residency, a marriage certificate, cost, complicated procedures, and sometimes the fact that hospitals retain the birth notifications or parents’ ID cards for failure to pay hospital fees. The gender chapter of VASyR 2021 notes that 33% of children in male-headed households were registered, while for children in female-headed households, birth registration was completed in only 13% of cases.

In 2020, the LCRP reported that 27% of Syrians in Lebanon did not have marriage or divorce certificates. The high rate has persisted in spite of the government’s attempts to facilitate the process. Similar to those reported for birth certificates, barriers included complicated procedures, mobility issues, closures due to COVID-19, and cost. The lack of marriage and divorce certificates increases the vulnerability of women and girls with a range of issues with alimony, child support and custody being paramount. They can also pose problems for women in mixed Syrian/Lebanese marriages. Similarly, death registration is low in Lebanon for Syrian deceased, and affect remaining family members, particularly women, in relation to inheritance.

‘A woman whose husband is detained in Syria came to Lebanon with her mother and children. A sheikh she consulted gives her a divorce, she marries someone else and has children with him. Since she cannot go back to Syria to register the divorce there, she remains married to her first husband in Syria and is married to her second husband in Lebanon. And this is not an isolated incident.’

KII, local NGO

Few of the women surveyed responded that they perceive significant consequences arising from lacking civil documentation. The most frequently mentioned consequences were registering children for education (46%) and difficulty accessing medical services (32%). In contrast to the survey responses, KIs indicated that the lack of civil documentation could have serious effects on refugees’ mobility, access to health care, economic opportunities, and to justice. Although the government has waved the requirement of education certificates, some schoolmasters still use the lack of such documents to refuse Syrian children access to schools. Refugees are not always aware of their rights and even when they do know they do not have leverage or power to negotiate.

‘It affects their access to security apparatus if they need such services. The police for example would ask for their documentation and when they cannot produce them they might be held accountable. While this affects both men and women, women are more vulnerable especially since most likely the security apparatus representative will be a man and she may be susceptible to harassment or violence.’

KII, local NGO, on how lack of documentation makes women vulnerability to abuse

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6. Consequences of missing civil documentation

(What potential consequences does this have for them in Lebanon (n=68)

<table>
<thead>
<tr>
<th>Consequence</th>
<th>Beirut and Mount Lebanon (n=4)</th>
<th>North and Aklar (n=24)</th>
<th>Bekaa (Bebak and Badbesh El Hermel) (n=37)</th>
<th>South and Nabatieh (n=3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Difficulty registering children for education</td>
<td>51%</td>
<td>33%</td>
<td>50%</td>
<td>33%</td>
</tr>
<tr>
<td>Difficulty accessing medical services</td>
<td>25%</td>
<td>29%</td>
<td>27%</td>
<td>34%</td>
</tr>
<tr>
<td>Reduced mobility for fear of detention and/or deportation</td>
<td>33%</td>
<td>33%</td>
<td>33%</td>
<td>33%</td>
</tr>
<tr>
<td>Difficulty finding work with adequate pay/working conditions</td>
<td>21%</td>
<td>21%</td>
<td>25%</td>
<td>3%</td>
</tr>
</tbody>
</table>
‘The lack of documentation affects women less than men – on checkpoints, if a man passes and has an expired residency they can arrest him make it hard for him. This happens more for men than for women and children, as they don’t consider women as a threat. There are families where men couldn’t leave the camps while women and children were able to as they wouldn’t be harassed on checkpoints.’

KII, local NGO, on how lack of documentation affects male mobility
Access to services

Summary

Mobile phones: Almost all the women responding to the survey have access to phones and were able to use phones privately, although that was more difficult for women living in large households and for elder women. The high number is almost certainly related to the fact that the survey took place over the phone, thus skewing the sample towards those with regular access to phones.

Access to mobile networks was more challenging, with almost a third of respondents stating that they had insufficient funds for network charges. Among those reporting reduced access to phones and networks, more than half stated that this prevented them from accessing the services they needed.

Healthcare: Primary healthcare was top among the health services needed in the past six months, but only 40% of households who needed primary healthcare were able to access it. Women’s health services were more available, with 48% of those needing it saying they were able to access it.

40% of respondents stated that women in their household had needed psychosocial services, but of those who needed it, only 27% could access it.

Education: COVID-19, electricity cuts and economic crisis has affected access to education for everyone in Lebanon, refugees and Lebanese alike. Almost half of primary school-age children in the respondent households were out of school, a proportion rising to 81% for upper secondary school-age children. Boys are slightly less likely than girls to attend school.

For both boys and girls, cost was cited as the main reason for taking children out of school. For 12-14 and 15-17 year olds, in 5% of cases in each age group marriage was stated as a reason for taking girls out. For boys, apart from cost, most respondents stated that they were taken out of school to work and contribute to the family income.
8.1 Mobile phones

Almost all survey respondents (97.5%) have access to mobile phones. Of those who have phones, 93% have smartphones, and 4.6% have basic phones. The high number of women reporting access to phones is almost certainly related to the fact that the survey took place over the phone, thus skewing the sample towards those with regular access to phones. Most of the women responding said that they were able to use phones privately (92%). Privacy is more difficult within larger families and the demographic least able to use phones privately are women aged 60 and older (10%). 34% of respondents have their own phones but it is more common for phones to be shared with friends and families (58% of respondents).

While most of the women taking part in the survey had access to a phone and opportunity to use it privately, a bigger challenge was having access to mobile networks. While two thirds of respondents (67%) reported that they have good access to mobile networks, affordability is a constraint for many: 28% of respondents reported that they had insufficient funds for network charges. There is no significant difference in this result between formal and informal settlements, but regional variety is noteworthy, with affordability an issue for 45% of respondents in the North and the South.

1. Ability to access needed services

Among those reporting reduced access to phones and mobile networks, 55% of respondents reported that this prevented them from accessing the services they need. This was reported most frequently in Beirut (60%).

![Graph of mobile network access](image)
8.2 Female access to Health Services

The survey asked respondents if female members of the household needed primary health care, women’s health services, and psychosocial and mental health services. For those who replied, it also asked if female members of the household who needed health services were able to access them.

The greatest demand for Syrian women’s healthcare in Lebanon is for primary health services (65%). The need for primary health services are reported more frequently by older respondents and by female-headed households. Despite this being the most needed service, it is worth nothing that the Lebanon Crisis Response Plan mentions a reported decrease in demand of primary healthcare from Syrian refugees, with the primary reason cited being the cost of medications, tests, and doctor fees. The reduction in demand of primary health care was also linked to COVID-19 lockdowns restricting movement and the fear of infection. This could go some way in explaining why only 40% of our responders who needed primary healthcare were able to access it. It could also be that Syrian women do not prioritize their own health during times of economic strain.

“The greatest availability of healthcare is for women’s services (48%). Availability is found to be lowest in Beirut, 37% compared to 55% in the South and Nabatiyeh. A 2019 report mentioned that there were only three healthcare centres that provide for Syrian refugees in Beirut and that Syrian women and Syrian members of the SOGIESC community are more likely to require healthcare from experiences of sexual harassment, rape and violence.

The women surveys reported both a great need for and low availability of psychosocial and mental health services. While 40% of respondents reported that women in their household needed psychosocial and mental health services over the last 6 months, only 27% of those who needed it were able to access it. Our KII interview questions explored any stigma that may exist around accessing mental health support amongst Syrian refugee communities in Lebanon and found little evidence that this would be the reason for women not accessing psychosocial or mental health services.

“In a UN Women project one of the beneficiaries interviewed by a UN resident coordinator said the psychological support made such a difference for Syrian women and helped them ‘to stand on our feet be proud’. I don’t think there is a taboo except for severe mental health issues, where there is a shame around it. I have seen women in the South telling their husbands that ‘I need to talk to someone’. A lot of organisations integrate it and raise awareness about it and I think that’s important.”

KII interview with INGO
Primary Health Care

In the past 6 months, did females in the household need primary health care?

<table>
<thead>
<tr>
<th>Region</th>
<th>Need Primary Health Care</th>
<th>Access Primary Health Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beirut and Mount Lebanon (n=129)</td>
<td>60%</td>
<td>65%</td>
</tr>
<tr>
<td>North and Akkar (n=155)</td>
<td>65%</td>
<td>67%</td>
</tr>
<tr>
<td>Bekaa (Beka and Baalbeck El Hermel) (n=222)</td>
<td>64%</td>
<td>65%</td>
</tr>
<tr>
<td>South and Nabatieh (n=58)</td>
<td>64%</td>
<td>65%</td>
</tr>
<tr>
<td>TOTAL (n=564)</td>
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</tr>
</tbody>
</table>

Women’s Health Services

In the past 6 months, did females in the household need Women’s Health care?

<table>
<thead>
<tr>
<th>Region</th>
<th>Need Women’s Health Care</th>
<th>Access Women’s Health Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beirut and Mount Lebanon (n=129)</td>
<td>37%</td>
<td>45%</td>
</tr>
<tr>
<td>North and Akkar (n=155)</td>
<td>45%</td>
<td>49%</td>
</tr>
<tr>
<td>Bekaa (Beka and Baalbeck El Hermel) (n=222)</td>
<td>50%</td>
<td>56%</td>
</tr>
<tr>
<td>South and Nabatieh (n=58)</td>
<td>46%</td>
<td>46%</td>
</tr>
<tr>
<td>TOTAL (n=258)</td>
<td></td>
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</tr>
</tbody>
</table>

Psychosocial and Mental Health Services

In the past 6 months, did females in the household need Psychosocial and Mental Health Services?

<table>
<thead>
<tr>
<th>Region</th>
<th>Need Psychosocial and Mental Health Services</th>
<th>Access Psychosocial and Mental Health Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beirut and Mount Lebanon (n=129)</td>
<td>41%</td>
<td>45%</td>
</tr>
<tr>
<td>North and Akkar (n=155)</td>
<td>45%</td>
<td>49%</td>
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<tr>
<td>Bekaa (Beka and Baalbeck El Hermel) (n=222)</td>
<td>33%</td>
<td>40%</td>
</tr>
<tr>
<td>South and Nabatieh (n=58)</td>
<td>40%</td>
<td>40%</td>
</tr>
<tr>
<td>TOTAL (n=226)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
8.3 Gendered access to education

“Even if schooling is affordable or free the cost of transport, clothes, or the cost of sending food are factors that households are taking into consideration in decisions in this regard.”

KII with INGO in Lebanon

Access to education for all in Lebanon has been significantly impeded by the COVID-19 pandemic, electricity cuts and the economic crisis. The Ministry of Education and Higher Education (MEHE) closed all schools during the COVID-19 pandemic.\(^{17}\) UNHCR data from 2020 refers to Syrian families ‘deprioritizing education’ and ‘withdrawing children from school’ due to school closure during national lockdowns and refugees’ lack of access/resources to join classes online.\(^{18}\)

For the survey participants, the number of school-age children in households is lower for older age groups. There were 987 primary school age boys and girls (6-11 years) in the households surveyed, and 188 upper secondary (15-17 years) school age children.

The proportion of school children in households that are out of school increases with age. In primary school, nearly half of the children are out of school (48%). This increases to 81% by upper secondary school. Both genders are similarly likely to be out of school, although boys are slightly more likely to be out of school.

Living in informal settlements appears to affect the extent to which children remain in school. For primary school and lower secondary school age children, the highest out-of-school rates are in South and Nabatiyeh. In most regions across all age groups, boys are slightly more likely than girls to be out of school.
When giving reasons for why children of different age groups are not in school, respondents provide different reasons for boys and girls. The common thread disaggregated by age group below is that boys are more likely to not attend school and instead go to work and contribute to the family income. From age 12 onwards there were respondents citing girls not attended school due to child marriage. This was also a concern raised in numerous KII interviews.

― Boys are removed from schools to go to work […] it is totally acceptable for a 12 year-old child to go to work, especially if he is a boy.‖

KII with INGO in Lebanon

― With the current situation there is a big fear amongst actors that child marriage will spike as a coping mechanism within Syrian community especially in rural areas‖

KII with INGO in Lebanon

Among primary school children (age 6 to 11):
- Economic factors are the most important reasons for children of both genders not attending. Costs are cited slightly more often for girls than for boys
- Work is cited more often for primary school boys not attending school than girls.

Among lower secondary school children (age 12 to 14)
- Cost is the most important barrier, and is equally important for boys and girls
- Work doubles for boys and girls
- Child marriage appears as a barrier for girls, cited in 5% of cases (5 of 85 girls not at school)

Among upper secondary school children (age 15 to 17)
- Work becomes more important for boys, cited in 34% of the cases (10% for girls)
- Child marriage is mentioned in 5% for girls (0% for boys).
“Covid has affected all school children in Lebanon. While public schools are affiliated with the government, they are sectarian with different curriculum so the government did not and could not lead on a unified online education program, like in Jordan for example. There is no proper digital infrastructure. This meant that it was up to schools to carry out different programmes. This was hampered with shortages in fuel, electricity and stable connections. On the part of the students, added to the above challenges they shared with their schools was the issue of access to tablets, laptops, smart phones.”

KII with local NGO in Lebanon
Summary

Direct health effect: 27% of households had suffered health effects from COVID-19. Households in informal settlements were somewhat less affected than households within communities. Only around one third of respondents stated that household members who had caught COVID-19 were able to access the healthcare they needed.

Indirect effects of the pandemic: Nine out of ten respondents reported worsened economic pressure on their household due to the pandemic. More than half stated that tensions within their households had significantly increased, with a further 25% saying they had somewhat increased.

Over half of the respondents said that the pandemic had significantly negatively affected the mental health of female members, while a smaller number (15%) reported that women and girls in their household were at greater risk of physical harm. Respondents with disabilities reported a greater risk of physical harm (33%).
9.1 Direct health effects

About 27% of respondents report that their households suffered direct health effects. Respondents living in informal settlements were more likely to report that their household suffered no negative effects from COVID-19 (81% compared to 70%), and were slightly less likely to report that members of their household were sick for more than two weeks (15% compared to 19%). Among households where someone did catch COVID-19, only around one third of households were able to access the care they needed in both settings.

Ability to access needed services

The pandemic caused considerable economic pressures on households, with 90% of respondents replying that pressure had ‘somewhat’ or ‘significantly’ increased. Economic pressures were most acute in Beirut and Mount Lebanon (84%), followed by Bekaa (81%) and slightly lower in the North and Akkar, followed by the South and Nabatieh (75% and 74%, respectively).

Indirect effects

The crisis brought considerable tension among household members, with 80% of respondents saying that tensions increased somewhat and 55% saying they increased significantly. These pressures vary across regions and were most acute in Beirut and Mount Lebanon, with 64% of respondents indicating that they had significantly increased.

Tensions vary among regions

GBV cases have increased across all communities. In terms of livelihoods, the situation has become even worse because men have lost their jobs and women have to scrape by to cover needs of children and they are not able to”

KII, with INGO in Lebanon
The survey indicates that the crises have taken a toll on the mental health and increased risk of physical harm to women and girls. The majority of respondents (83%) indicate that the crises have negatively affected the mental health of female members of the household, 52% of whom said they had been significantly affected.

A smaller proportion of respondents (15%) reported that increased tensions in the household have put female members at greater risk of physical harm, with 4.9% saying that they were at significantly greater risk. The survey shows that respondents with disabilities are more likely to say that females are at greater risk of physical harm, with 33% of those with disabilities indicating this, compared to 15% of those without disabilities.

UNHCR’s 2020 report on the impact of COVID-19 indicates that tensions were more likely to mount within households during lockdown, and that this in turn increased the risk of violence. The UNHCR report noted that women and girls also reported increasing difficulties in reporting SGBV in lockdown periods due to a lack of privacy, their perpetrator being within the vicinity, and limited access to communication devices.

GBV cases have increased across all communities. In terms of livelihoods, the situation has become even worse because men have lost their jobs and women have to scrape by to cover needs of children and they are not able to”

KII, with INGO in Lebanon

![](image)

Effects on mental health and risk of physical harm

Have pressures negatively affected the mental health (of female members of the household? (n=530)

<table>
<thead>
<tr>
<th></th>
<th>No</th>
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<th>Yes - mental health</th>
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<tr>
<td></td>
<td>%</td>
<td>somewhat affected</td>
<td>significantly affected</td>
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<tr>
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<td>30%</td>
<td>52%</td>
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</table>

Have pressures put female members at greater risk of physical harm? (n=530)

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<thead>
<tr>
<th></th>
<th>No</th>
<th>Yes - females at somewhat greater risk</th>
<th>Yes - females at significantly greater risk</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
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</table>

Effects on mental health and risk of physical harm

(Have pressures put female members at greater risk of physical harm? (n=530)

<table>
<thead>
<tr>
<th></th>
<th>With disability (n= 24)</th>
<th>Without disability (n= 506)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>No</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>67%</td>
<td>84%</td>
</tr>
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<td></td>
<td>Refused to answer</td>
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<tr>
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</tbody>
</table>
Safety and Security

Summary

More than a quarter of respondents reported safety issues occurring in the last six months. Of these, verbal harassment was most common (73%) and overwhelmingly directed at female members of the household.

Of those who reported safety issues, community violence (67%) and displacement/evictions (48%) were also frequently listed, which were also stated to affect women more than men. The safety issue reported to affect men more than women was detention and arrest (mentioned by 17% of those who reported safety issues).

Community violence was more commonly mentioned in the Beirut and Mount Lebanon region, but otherwise reports on safety issues did not differ across geographical or demographic groups.

Safety concerns have restricted Syrian refugees freedom of movement (reported by 60%), and affected women much more than men, impacting on women’s ability to work and girls’ access to education. The trend is negative: a majority of respondents felt that over the past two years both male and female refugees have reduced their ability to move freely in public.
10.1 Safety issues

Respondents were asked whether they or members of their households have experienced safety issues ranging from verbal harassment to kidnapping, and whether those who were affected were male, female or both. More than one quarter of the survey respondents (149 out of 564, or 26%) said household members had experienced some sort of safety issue in the last six months. Of these, verbal harassment was the most common (73%) and was overwhelmingly directed toward female members of the household (48% replied that female members had been affected, compared to 15% who said it had affected male household members). Community violence (67%) and displacement/eviction (48%) were also commonly reported safety issues. Again, women were reported to be more often affected by this than men. Responses suggest that it is primarily women and girls in households who are affected by safety issues. The only exception was arrest and detention, which affected male household members more frequently.

‘Women do not feel safe. They are being exploited with low wages and verbal, physical harassment and all sorts of sexual violence up to rape.’

KII, local NGO
10.2 Sources of safety issues

Host communities are most often seen to be the source of safety issues (59%), followed by community violence and disputes (34%) and the refugee community itself (21%).

‘After the blast one organisation was distributing dignity kits and another baby milk and food parcels. When they (Syrians) came to stand in line, a group of Lebanese people forced them to leave saying this aid is for the Lebanese people only. I’ve seen this again and again - incidents during distribution’

KII, INGO

Qualitative work revealed that another safety concern is the occasional demolition and destruction of camps, sometimes due to inclement weather, which leaves refugees on the streets.

‘One of our staff members used to live in a camp, but their camp was destroyed. You can’t raise camp until you get security clearance so they slept in the outdoors and when winter arrived they had to pay $600 a month to live in a warehouse. There were ten families and could barely afford this, not feeding children to pay the rent’

KII, local NGO

‘Tents in Lebanese camps are made of wood, cloth and one row only of cement blocks, which makes them very vulnerable to inclement weather. They are either flooded or destroyed every winter. They cannot have more than one row of blocks as the authorities would perceive that as a step towards proper construction.’

KII, local NGO

The survey found the same answers on safety issues across geographical and demographic groups. The only exception was community violence, which was more frequently mentioned in Beirut and Mount Lebanon (41%) than in other regions.
10.3 Effects of safety issues

A minority of respondents (39%) indicate that safety issues have not affected freedom of movement of members of their household. Among households whose members have had their freedom of movement reduced, more identified female members (themselves and/or other female members of their household) than male members (83% compared to 48%). This is consistent with our KII’s indicating that fear for their safety has limited the mobility of women and girls and stopped girls from going to school.

‘Especially girls not going to school is the easiest and fastest decision made’.
KII, international organisation, on safety concerns restricting girls’ movement

‘Freedom of movement is traditionally restricted for girls and women, and when there is increased danger then the restrictions become tighter. Many just stop going out of the house. Boys are also victims of violence, and this is stopping them from going to school and restricting their movement’
KII, local NGO, describing how safety concerns restrict movement of both genders

KII’s also indicated that safety concerns are obstructing women’s access to employment and has made some women feel more comfortable sending their children out to work since they are less likely to be harassed.

‘They feel it’s safer to send their child to work than to go themselves, as some have faced harassment when cleaning houses, so they prefer to send children to mechanic’s shop or to sell tissues on the street’.
KII, INGO, describing how safety issues contributes to child labour

Lack of documentation and legal status also affects safety. According to KII’s, security incidents remain largely under-reported because refugees lacking legal documents fear arrest and deportation, and so avoid any contact with the police.

<table>
<thead>
<tr>
<th>Effects of safety issues on free movement</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Does lack of safety reduce free movement of household members? (n=564)</td>
</tr>
<tr>
<td>0%</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>No [EXCLUSIVE] (n=251)</td>
</tr>
</tbody>
</table>

Reflecting on how the freedom of movement of males and females has changed over the previous two years, the majority feel that freedom for both males and females has declined. A larger proportion of respondents perceive female movement to have reduced than male movement (55% compared to 50%).
Across regions, respondents from the North and Akkar are most likely to perceive that both women and men have reduced freedom of movement.

The difference between regions is particularly pronounced for adult women, and is statistically significant.
Social cohesion and host

Summary

More than half the respondents found the relationship with the Lebanese host community as fair or good, with respondents in informal settlements having a slightly more positive perceptions of relations.

Similar numbers of respondents perceived host relations to be worsening (40%) and improving (34%), and the literature and key informant interviews also provided differing opinions on this.

Competition for jobs (70%), resources (60%) and services (56%) are seen as the key drivers of tensions between Syrian refugees and their hosts. Cultural or political differences were mentioned by very few.

Only 4% of respondents thought sexual harassment of women contributed to driving tensions.

There are some differences in perceptions of drivers of tension between inhabitants of informal settlements and those living among the host community, with the former slightly less likely to mention competition for resources.

The situation is perceived as worse in Beirut. Respondents in Beirut were most likely to mention competition for resources and were also slightly more likely to mention cultural differences.
11.1 Perceived relationship with host communities

The majority of survey respondents regard the relationship between Syrians and host communities to be good, with 54% characterising relations as ‘good’ or ‘fair’. However, 19% see relations as ‘poor’ or ‘hostile’.

The survey returned mixed results on whether relations were worsening or getting better, with similar numbers of respondents perceiving relations as getting worse (40%) and getting better (34%).

This variation in perceptions was also represented in key informant interviews and the literature. For example, the 2020 VASyR reported ‘continued instances of inter-community support in the context of worsening socio-economic crisis affecting both populations,’ while all the key informant interviews conducted for this study in Lebanon referred to increasing tensions between Lebanese and the Syrian refugee community.

Perceptions were slightly more positive among respondent living in informal settlements than within communities.

Across all regions, about a fifth of respondents see relations to be ‘poor’ or ‘hostile’, but there are differences in perceptions by region. Respondents from Bekaa are marginally more positive about relations, with 66% describing them as good or fair, and 15% describing them as ‘poor’ or ‘hostile’. Elsewhere, 46% to 52% described relations as good or fair, and 21 to 22% described them as ‘poor’ or ‘hostile’. KIIs mentioned the role municipalities have always had in politicising the presence of refugees, and that this power was exacerbated during COVID-19 when municipalities had power to determine local measures to respond to COVID-19. In April of 2020 Human Rights Watch reported that 21 municipalities in Lebanon introduced mandated COVID-19 movement restrictions on Syrian refugees that did not apply to Lebanese residents in the community. These measures were introduced in Bekka Valley, Northern Lebanon where 38% and 35% of our respondents reported tensions to be getting worse.

“Since the management of refugees was left to the municipalities, some issued some racist directives like curfews on Syrians, etc. These were for the most part not abided”

KII with local INGO in Lebanon
In three out of the four regions, more respondents consider relations to be getting worse than getting better. Nearly half of respondents in Beirut (48%) view relations as getting worse.

### Differences across regions in perceptions about the relationship with host communities

(Overall, how would you rate the relationship between the refugee and host communities (n=564)

Overall, do you think relations between the refugee and host communities in Lebanon are getting better or worse, or are they staying about the same? (n=564)
11.2 Issues driving tensions

Tensions are recognised by the majority of respondents; only 6% of respondents did not see any issues driving tensions. There is a clear indication that overall competition for jobs, services and resources are the largest drivers of tension.

A WFP web-based survey that ran between April and May 2020 reported a significant increase in Lebanese looking for employment in less conventional jobs traditionally dominated by Syrian refugees (such as agriculture, solid waste collection and construction). Similarly to our findings, competition for lower-skilled jobs has been seen to exacerbate inter-community tensions between Lebanese and Syrians, with there even being reported physical confrontation over jobs and vandalism of Syrian owned businesses.

“There is also Lebanese state of shock on what’s happening, to how quickly the middle class fell into poverty. Anger accumulated, no one to address the anger, the state is absent. The Syrian refugees they see in front of them are easy target.”

KII with INGO in Lebanon

There are small but significant differences between informal settlements and those who live within communities regarding the extent to which respondents perceive competition for jobs and services to be problems. In general, those living among the host community are slightly more likely to see competition for jobs and services than those in informal settlements.

There are also differences between regions. Respondents from South and Nabatiyeh are most likely to say that there are no tensions (14%). Competition for jobs was highest among respondents from North and Akkar (79%), whereas competition for services is seen to be highest among those from Beirut (63%). Cultural differences, although there is a low frequency overall, is most frequently mentioned by respondents from Beirut (14%).
“...an issue of competition over employment as Syrians accepted lesser wages, and more recently the Lebanese see Syrians cashing fresh dollars out of ATM machines (financial assistance) while they are unable to cash out dollars from their own bank accounts.”

KII with local NGO in Lebanon

Another KII responder suggested that Syrian refugees living in host communities are more likely to interact with Lebanese citizens which leads to less discrimination.

“There is a lot of tension especially in areas where the camps are, as well as a lot of discrimination against Syrians. For Syrians who live in urban areas and in host communities tensions and discrimination are less because people get to know each other.”

There has long been a perceived aid bias in favour of Syrian refugees among the Lebanese population. The KII reports and findings across numerous reports suggest this perception is increasing, likely linked to the economic crisis plunging many Lebanese citizens into poverty. In 2021, 84.1% of Lebanese felt neglected in international aid. This seems to be more of a problem in Beirut, which has the highest number (63%) of responders reporting competition for services. This may be linked to Beirut’s position as the country’s main economic hub, but there is also evidence that the Beirut Port explosion exacerbated tensions. Between 2017 and 2020, negative relations are reported to have increased from the host community to 43% from 21% however, almost half of this increase was observed between July and August of 2021 following the Beirut port explosion, a disaster that significantly impacted the Lebanese population. In a KII with an INGO based in Lebanon a respondent reflected on a seeing Lebanese citizens forcing Syrian refugees out of the queues for emergency aid handouts following the Beirut port blast and “saying this aid is for the Lebanese people”.

“There is misinformation. The idea is that all Syrian families receive money from the UN all of them have money and this is not accepted. Media coverage is racist it doesn’t lead to acceptance and social cohesion, very biased against Syrian refugees.”

KII with local INGO in Lebanon
Gender-based violence

Summary

Violence against women within the Syrian refugee community is seen as a big problem by 57% of respondents.

Women living among host communities are more likely to see violence against women as a big problem and to perceive that it happens frequently than women who live in informal settlements.

Respondents saw the main risk of GBV to be in open public spaces (45%) and at home (44%). Single women and married women whose spouses were at home saw ‘at home’ as the bigger risk, compared to women who were divorced, widowed or whose husband lived elsewhere.

In Bekaa, 13% of respondents perceived aid and service distribution centres to be high-risk – twice as many as in any other region of Lebanon.

Formal reporting of GBV incidents is not common. A third of respondents said incidents would never be talked about to anyone, while more would report to NGOs than to the police or authorities.

Sexual violence has increased in the past three years, according to a clear majority of respondents. Almost half the respondents regarded sexual violence to be common or very common.

Syrian SOGIESC community members are additionally vulnerable because they will often have lost their social connections and families due to their gender identity and sexual orientation and have limited access to other forms of support system.

Research into gender-based violence can be challenging owing to the sensitivity of the subject and likely reluctance among respondents to speak openly about the topic. This is particularly the case in the MENA region, where victims of GBV can be blamed and ostracised if they talk about what happened. Consequently, it is likely that respondents under-report incidents that they or those close to them may have experienced, and some respondents may not fully divulge their full understanding of situations they may be aware of. KIIs confirmed that GBV goes largely unreported in Lebanon, as Syrian refugee women fear blame and stigmatisation from their families and communities. They do not report when incidents occur, but when they feel that the violence has become either too intense or too frequent.
12.1 Recognition

Across Lebanon, a clear majority of respondents (57%) regard violence against women to be a big problem within the Syrian refugee community. The KIIIs support this finding and highlight that a key challenge is women not being able to report to the authorities because of their legal status. The economic crisis makes it difficult to find employment and hence independence and therefore women are forced to stay with their abusers as they feel they have no place to go. NGOs lack sufficient resources to tackle the issue and the number of shelters are also limited. Also, being detached from their social networks and families further increase women’s vulnerability and susceptibility to staying in an abusive situation.

‘It’s not the typical idea of rape in the street. They face abuse from husbands; verbal economic, psychological abuse. The fact they are not empowered over their sexuality- women have no choice but to acquiesce if the husband wants it’.

KII, INGO

‘The women do not have the social network that may support them, including their families. It is a patriarchal society that normalises violence against women.

KII, local NGO

<table>
<thead>
<tr>
<th>Level of recognition of GBV</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>To what extent is violence against women a problem in (the Syrian refugee community? (n=591</strong></td>
</tr>
<tr>
<td><strong>How often do you think that violence against women occurs in the Syrian refugee community? (n=591</strong></td>
</tr>
</tbody>
</table>

There are no significant differences between regions in the extent to which violence against women is perceived to be a problem. There are however significant differences depending on setting: Respondents living within host communities perceive GBV to be more of a serious issue and also perceive it to be occurring more frequently than those living in informal communities.
12.2 Places where risks are greatest

Overall, respondents indicate the places where the risk of violence are greatest are open public spaces (45%) and at home (44%). Single women and married women whose spouses were at home identified ‘home’ as a risk significantly more than women who are divorced, widowed, or whose partners live elsewhere. Home is mentioned less frequently among those in female-headed households (37%), but differences between those with male-headed households (47%) and households where leadership is shared (48%) are not statistically significant. Respondents in Bekaa were significantly more likely to see service distribution and aid provision locations as risky than respondents from other locations. Similarly to these findings the KIIIs indicated that the place where the risk of violence is the greatest was in the home and the perpetrator was usually the husband.
12.3 To whom incidents are reported

Respondents were able to name multiple people whom GBV incidents could be reported to. Results are remarkable in the extent to which they show how unlikely incidents are to be reported at all. 35% of respondents replied that if incidents occur, they are not spoken about to anyone. Respondents in the North (42%) and South (40%) are significantly more likely to say that incidents are not spoken about at all. Respondents in Beirut were least likely to report incidents to police, but were more likely to tell their spouse or partner. Most reports, however, are to NGOs than the authorities. Lack of documentation may be one of the factors why victims prefer going to NGOs. There are laws in place to support women, including the Law 293 of 2014 which allows women to get restraining orders against their husbands until courts make their ruling. This law also applies to Syrian women, who nevertheless usually choose not to file formal complaints with the authorities. There are some NGOs who operate in this area and support Syrian women to access the courts with the help of lawyers.

If they report, it is to the NGOs which provide them with the support they want. Sometimes the solution is of a social nature, sometimes all they are looking for is psychosocial support. NGOs can also provide them with legal aid if needed and also help them in the case they lack legal documentation.

KII, local NGO

To whom incidents are reported

(When violence occurs, is it spoken about or reported to anyone? If so, to who? (n=564)
**12.4 Perceived trends in VAWG and presence of sexual violence**

Most respondents believe that violence against women has increased over the last three years. This view is widespread, and there are no significant differences across geographic and demographic variables. 48% of all respondents regard sexual violence to be ‘quite common’ or ‘very common’. Results show small but significant variation across geographies:

- Sexual violence is seen to be more common by respondents living within communities than those in informal settlements (52% compared to 40%)
- Sexual violence is seen to be more common by respondents from Beirut than from other regions (54% compared to 45% in Bekaa and the South, and 49% from the North).

Looking at the last three years, it is necessary to take into account the compounded impact of COVID-19 and economic crisis in Lebanon. A 2020 UNHCR report showed that gender-based violence in the household and community increased by 54% during the pandemic, with the most common types of violence being physical and emotional abuse, followed by denial of resources, sexual violence, discrimination, threat of deportation and eviction and child marriage. It indicated that women refugees perceived the places where they are at most risk of violence were homes, followed by streets and markets, then public transport, banks, health care facilities and finally on social media and phones. Vulnerable groups, such as domestic workers and SOGIESC community members have been more susceptible to SGBV. With the closures, service providers switched to online and mobile modalities. Limited access to mobile devices, lack of privacy and limited online access meant that women and girls had diminished access to these services.

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2 UNHCR, (2020). Impact of Covid 19 on the SGBV Situation in Lebanon, Inter Agency SGBV Task Force Lebanon, link p.5
12.5 Violence Against the SOGIESC Community

Another key issue under the umbrella of GBV is violence against the SOGIESC community. Same-sex sexual conduct is illegal in Lebanon, where ‘offenders’ may serve a maximum of one year in prison. The law does not formally recognise or provide protection to the SOGIESC community. According to a KII,

‘The Syrian LGBTQI community have specific problems which include repudiation by their own families, threat of honour killings by family members who may chase them across the borders. They may also have problems of accessing certain services and housing and can be harassed and exploited at the workplace.’

KII, international organisation

Syrian SOGIESC community members are additionally vulnerable because they will often have lost their social connections and families due to their gender identity and sexual orientation and have limited access to other forms of support system. Devoid of support systems, they often find themselves in negative situations, resorting to drugs, engaging in sex work and developing health risks. “The only sanctuary in Beirut comes from NGOs, and the small, socially progressive, and relatively welcoming low-income neighbourhoods where SOGIESC and refugees can live and hide until they are resettled.”

‘If you ask about social cohesion between Syrian and Lebanese LGBTQI individuals, they are united under the same challenges related to sexual orientation. Nationality is not most important. They are not within Syrian community but in the LGBTQI community’.

KII, INGO
Conclusions and recommendations

13.1 Conclusions

A number of key insights emerge from the report:

**Economy & Employment**: Lebanon’s multiple crises have caused large drops in both jobs and wages for Lebanese and Syrians alike. Most Syrian women do not work: 15% of respondents were employed, most of them in temporary, precarious or inconsistent employment. This is a higher proportion than VASyR data (8%) from 2021 and may indicate an upward trend. Women aged between 35 and 44 are the most likely to be employed. Women’s level of education has little influence over the kind of employment they are able to access, and women across all education and age groups reported low household incomes. Incomes have decreased over the past two years for everyone and is rarely sufficient to support families. More than 80% of households rely on humanitarian assistance. Female-headed households earn considerably less than male-headed households, within a context of everybody struggling.

**Negative Coping Strategies** are used by everyone. Almost all households reported not being able to meet basic needs and report that the situation has worsened due to the impacts of COVID-19. Variations in vulnerability are low, as everyone has been badly affected by the crises. The use of crisis and emergency coping strategies is widespread, with some much more frequent than others. More than two thirds had household members who did not seek the medical attention they needed, and one third of households had taken children out of school. Coping strategies mainly affected women and men equally, but boys were more likely to be sent to work than girls. Larger households are somewhat more likely to withdraw children from school or send them to work.

**Women’s Decision-Making**: The survey shows that women’s roles are changing, with more taking on responsibilities for providing for their family in the past two years. The evidence is more mixed on whether women’s decision-making authority in the household has increased. Widows, divorced women and married women whose husband lives elsewhere tended to be the main decision-maker in their household. More than 80% of respondents in this situation were responsible for financial and family-related decisions. While this would seem to be a positive development, a majority of women stated that the changes in women’s roles had led to worsening conditions for women and girls. This may be linked to reactions and tensions in the household due to women taking on new roles and the burden for working women of working both inside and outside the house.

**Rights and Legal Status**: Documentation is a key area of concern for Syrian refugees in Lebanon. In this survey, respondents almost certainly under-reported the extent to which household members were missing documentation, likely due to an atmosphere of increased fear of detention or deportation making respondents reluctant to divulge in a telephone interview that members of their household may be lacking documentation. The majority said that female household members were not missing any legal documentation giving them the right to live and work in Lebanon, and fewer again missing civil documentation. Respondents were, however, strongly aware of the potential serious consequences of not having documentation, in terms of reduced mobility for fear of detention and deportation and problems of finding decent work with adequate pay. The lack of marriage and divorce certificates increases the vulnerability of women and girls along a range of issues including child custody, alimony and child support.
Access to Services is a big challenge for Syrian refugees. Almost all the Syrian women surveyed had access to a mobile phone and were able to use it in private. However, network access and affordability was a problem for a significant minority – and had a knock-on effect on their ability to access services. Connectivity problems were particularly difficult in the North and the South of Lebanon. On healthcare, primary healthcare services were the most needed by the respondents’ households in the past six months, but only 40% were able to get the healthcare they needed. Women’s healthcare services were somewhat better, with almost half the respondents reporting that female household members could access the service they needed. Psychosocial services were the least available (at 27%), while the need for this among female household members was high. On education, the situation for Syrian children is dire. Almost half of primary school-age children in the respondent households were out of school, rising to 81% for upper secondary school-age children. Attendance rates for boys and girls were similar, but the reasons for taking children out of school showed gender differences. While cost was the most frequently sited reasons for girls and boys, the need to work and support household income was an important reason for taking boys out of school, while for both the 12-14 age group and 15-17 age group, marriage was cited in 5% of cases as the reason for withdrawing girls.

COVID-19 has had direct health effects on 27% of households. Of those with household members who had caught COVID-19, only a third were able to access the healthcare they needed. Almost all respondents reported serious indirect effects of the pandemic, with worsened economic conditions and increased tensions within the household. More than half said that the pandemic had affected the mental health of women and girls in their household, with a minority of 15% reported that female household members faced an increased risk of physical harm.

Safety and Security: More than one quarter of respondents reported safety incidents occurring in the past six months. Most common was verbal harassment (73%), which affected women much more than men. The two other widely cited issues were community violence (67%) and displacement/eviction, which were also reported to affect women more than men. Of the less frequently mentioned issues, arrest and detention (17%) affected male household members most. Concern over safety and security is having a strong negative impact on refugees’ freedom of movement (reported by 60%). Restrictions on movement are affecting female household members more than men, and are obstructing women’s access to employment and girls’ access to school. A majority of respondents reported that their ability to move freely in public has reduced in the past two years.

Social cohesion: More than half the respondents found that relationships with the host community were good or fair, while one in five described relations as poor or hostile. Evidence is inconclusive on whether and how relations are changing, with 40% saying they were getting worse and 34% saying they were getting better. Key informant interviews were generally describing host communities’ attitudes as worsening towards refugees. Both key informants and survey respondents mentioned competition for scarce jobs, services and resources as the main driver of tensions between host communities and refugees.

Gender-based violence: violence against women is seen as a serious issue by a clear majority of respondents, and one that is growing. The main risk of GBV was seen to be in public places and at home, with single women and married women whose spouses lived with them seeing the home as a bigger risk compared to women who were divorced, widowed or living separate from their husbands. A notable finding in the Bekaa region is that 13% of respondents reported aid and service distribution centres as places of GBV risk. Sexual violence has also increased, with almost half the respondents saying it was common or very common.

Disability: although the survey was challenged with respect to representativeness of the situation of women with disabilities, it did suggest that disability adds pressure to households and is an area that needs more attention and detailed study. In Lebanon, survey respondents with disabilities reported higher risks of physical violence and harm.
13.2 Recommendations

The survey findings and conclusions support a number of broad recommendations for women’s support organisations in terms of direct support, government advocacy, and collaborations with other support providers.

Direct supports to beneficiaries

1. Increase **programmes and interventions that engage both individuals and their households**: Livelihoods interventions to support women to enter the labour market must go hand in hand with interventions targeting the women’s households, particularly husbands and other male household members. This should not be an extra, added on activity, but integral to the design of women’s livelihood interventions. Interventions should particularly engage men in the household in order to build their support for women’s economic activities and address the gender-normative barriers within households that hinder women’s ability to be economically active. Efforts to influence wider perceptions and gendered social norms that confine women and prevent them from seeking employment are also central. Engaging households could reduce the risk that programmes aimed at expanding female economic and decision-making roles contributes to double work and increased mental strain for women, increased tension within households and increasing risks of physical harm to women and girls. At the same time, practical support such as safe and inexpensive transportation and quality and affordable childcare (see separate recommendation below) are also important for the sustainability of women’s livelihoods interventions and the well-being of working refugee women.

2. Ensure that **programmes are well targeted to avert harmful coping strategies**: while cash support is essential to address household economic pressures, there is a need to also employ other kinds of support that target particularly harmful coping strategies. In particular, removing children from school hurts children by reducing their wellbeing and future livelihood options, and it also reduces employment prospects and well-being for women who care for them at home. Economic factors are the most-cited reason for removing children from school (and girls especially), so targeted support to improve affordability of transport and learning materials could help address this directly. A range of gendered strategies need to be undertaken as well, since high school boys often leave school for work, whereas girls may leave school due to child marriage. Educational pathways need to be created that open opportunities and provide households with stronger positive incentives for keeping both boys and girls in school.

3. **Assistance to secure needed documentation**: alongside the programming that it provides, UN Women could provide women beneficiaries with consultation to identify documentation that women need and may not possess which could help them reduce feelings of anxiety in engaging with authorities and encourage them to report any security or GBV incident they may encounter.

4. **Provide interventions that support opportunities for home-based businesses**. While livelihoods and employment programmes are positive schemes that economically empower women, they may exclude those who in the absence of a support system and/or childcare facilities, would find it difficult to commit to work outside of their homes. Projects that build on pre-displacement skills coupled with assistance in marketing would give such women opportunities to earn a living.

Direct engagement with government

1. The research found that Syrian refugees (and particularly female refugees) are often reluctant to report safety incidents to authorities, and instead turn to UN agencies and INGOs for help. This underlines a need for UN Women and similar agencies to **support refugees in their approach to government authorities**. Support for women refugees’ engagement with authorities can be done for instance through the services provided by women-only centres. Supporting government in strengthening its legislation on GBV to ensure it is increasingly attuned to the rights, wishes and safety of survivors is also important.
Priority areas for humanitarian collaboration

1. The survey found that almost all respondent households are under economic pressure, and these have a direct impact on women’s well-being. **Cash assistance to Syrian households needs to be increased, and programmes should be made ready to quickly scale up in times of acute shocks** like those caused by the COVID-19 pandemic.

2. Women’s support organisations should contribute to and collaborate in **labour market programmes**, including ‘decent work’ programming (such as that supported by ILO) that establishes workplace standards and works with the sector and employers to improve working conditions. Such engagement by women’s support organisations will help ensure that the particular barriers and challenges facing women are considered in the design and implementation of such programmes.

3. Ensure that the question of **child-care support is considered for all livelihoods and economic empowerment interventions for Syrian refugee women**. Women’s employment opportunities are circumscribed by a wide range of household responsibilities and chores that fall on women only. Some of these could be alleviated by **providing quality and affordable childcare and/or supporting the emergence of community-based childcare schemes**.

4. Develop **enhanced referral and reporting assistance for Syrian GBV survivors**: as these women are often reluctant to report incidents to authorities, and there are significant risks to those who report. Refugee women living in camps often have more women-only support services. Similar services could be strengthened in out-of-camp settings, for refugee and host community women alike. Supporting government in making its legislation on GBV more attuned to the rights, wishes and safety of survivors is also important.

5. **Support the establishment of more women-only safe spaces** where women in physical danger can seek help, even in times of COVID lockdown. Shelters for survivors of GBV are important, but as other UN Women evaluations have shown, the creation or enhancement of multi-sector women-only centres would not only provide safe spaces, but also the opportunity to combine protection and empowerment interventions. Women-only centres can provide livelihoods training, increase awareness of GBV and provide quality protection services in one space. The added strength of such centres is the sense of community and mutual support they can foster among refugee women using their services.

6. **Need for Psychosocial and mental health services** soared during the pandemic, and the survey finds that they are difficult to access. Efforts need to be undertaken to extend these services to areas of greatest need.

7. **Assess and address risk factors of GBV in aid and service distribution centres.** While this was not the main risk factor mentioned by respondents, it is one which humanitarian actors have a particular responsibility to address. The issue was particularly mentioned in the Bekaa region.
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