

GENDER EQUALITY IN THE HUMANITARIAN RESPONSE TO THE BEIRUT PORT EXPLOSIONS

A Review

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It is hoped that this review will serve as a useful resource for all those who contributed to the exercise and for the larger humanitarian community in Lebanon.

TABLE OF CONTENTS

ACRONYMS	4
INTRODUCTION	5
1 PLANNING PROCESS	5
1.1 Use of SADD and gender analysis in joint assessments and availability of gender analysis	7
1.2 Gender considerations in the flash appeal and selected projects	8
2 COORDINATION STRUCTURES	11
3 RESOURCE ALLOCATION	12
4 IMPLEMENTATION AND MONITORING	12
4.1 Humanitarian services for women and girls	15
4.2 Women's participation and leadership in the humanitarian response	16
LOOKING AHEAD	17
ANNEX 1	18

ACRONYMS

3RF	Lebanon Reform, Recovery & Reconstruction Framework
AAP	Accountability to Affected Populations
AI	Activity Info
BML	Beirut – Mount Lebanon
CFM	Complaint and Feedback Mechanism
EOC	Emergency Operation Cell
FER	Forward Emergency Room
FHH	Female Headed Household
GBV	Gender-Based Violence
GBVIMS	Gender-Based Violence - Information Management System
HC	Humanitarian Coordinator
HCT	Humanitarian Country Team
HNO	Humanitarian Needs Overview
HPC	Humanitarian Programme Cycle
IASC	Inter-Agency Standing Committee
INGO	International Non-Governmental Organizations
LAF	Lebanese Armed Forces
LGBTIQ+	Lesbian, Gay, Bisexual, Trans, Intersex and Queer
LRC	Lebanese Red Cross
MHH	Male Headed Household
MHPSS	Mental Health and Psychosocial Support
MSNA	Multi-Sector Needs Assessment
NGO	Non-Governmental Organization
PSEA	Protection from Sexual Exploitation and Abuse
RCCE	Risk Communication and Community Engagement
RIMS	Referral Information Management System
SADD	Sex and Age Disaggregated Data
SDR	Secondary Data Review
SEA	Sexual Exploitation and Abuse
SRHR	Sexual and Reproductive Health Rights
UN OCHA	United Nations Office for the Coordination of Humanitarian Affairs
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees

INTRODUCTION

The Beirut Port explosions occurred against a backdrop of a protracted socio-economic crisis coupled with the COVID-19 pandemic in Lebanon. The explosions compounded pre-existing needs and aggravated structural inequalities that have persisted in Lebanon.

The impact of the existing economic and financial crises and the different lockdowns imposed in response to COVID-19 were already disproportionately affecting women. A 25 per cent contraction in real GDP from 2017 to 2020 was estimated to have led to a 63 per cent increase in the number of women in unemployment.¹ Following the explosions, assessments revealed that women with increased vulnerabilities were a sizable portion of the affected population, with 51 per cent identifying as female-headed households and 8 per cent as elderly women living alone.² Given these evident inequalities, which are further exacerbated when intersecting with nationality, migrant and refugee status, gender identity and sexual orientation, and disability, efforts to ensure gender-responsive planning and implementation have been critical in this response to the port explosions.

Coordinated by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) on behalf of the UN Humanitarian Coordinator, and in collaboration with humanitarian partners in Lebanon, a system-wide humanitarian response was primarily directed through the Flash Appeal from August 2020 to December 2020.^{3 4} Against this background, OCHA and UN Women jointly developed this review to examine the extent to which issues of gender equality were factored into various stages of the [Flash Appeal](#). Reviewed against the standards set out in the [2017 IASC Policy on Gender Equality and Empowerment of Women and Girls in Humanitarian Settings](#), this review highlights best practices and key successes, and proposes recommendations where there is scope for improvement to guide upcoming exercises, such as country-wide contingency planning and a nation-wide Multi-Sector Needs Assessment (MSNA), and the implementation of the Lebanon Reform, Recovery & Reconstruction Framework (3RF) co-led by the UN, World Bank Group and European Union.

The review suggests that the Flash Appeal response to the Beirut Port explosions maintained some attention to gender equality throughout its duration, with several efforts that can be highlighted as best practices for future activities in both Lebanon and other emergency settings. Facilitated by a mix of factors including the commitment to gender equality demonstrated by multiple senior leaders, the availability of a dedicated Gender Advisor within OCHA through the secondment from UN Women, and presence of a strong feminist civil society, these positive efforts are particularly notable given the rapid – and short – nature of the response. Among others, these include the integration of gender expertise from the initial stages of the response in key coordination fora, the availability of gender analysis and its use by key operational, humanitarian sectors, and some use of sex and age disaggregated data (SADD) in needs assessments, monitoring exercises, as well as in referral mechanisms. At the same time, there remain important areas with scope for improvement, specifically in ensuring that SADD is collected and utilized consistently from the initial stages, translating the commitments to protection from sexual exploitation and abuse (PSEA) to action, in establishing gender-responsive accountability to affected population (AAP) and community engagement (CE) mechanisms, as well as in financing and supporting the rich network of women's rights organizations and women-led groups in Lebanon. Given the likelihood of humanitarian needs persisting over time – including beyond Beirut and the areas affected by the explosions – the establishment of streamlined gender in humanitarian action coordination spaces and capacity is suggested.

¹ Nisreen Salti and Nadine Mezher, *Women on the Verge of Economic Breakdown* (September 2020). UN Women.

² UN Women, CARE, UN ESCWA, ABAAD, UNFPA, *Rapid Gender Analysis of the August 2020 Beirut Port explosion: An Intersectional Examination* (October 2020).

³ The scope of this review is limited to the Flash Appeal. However, it is worth noting that significant humanitarian funding and activities have been provided and conducted outside the Flash Appeal during this time-period as well.

⁴ The Flash Appeal was initially expected to end in November 2020 and subsequently extended to December 2020.

1. PLANNING PROCESS

1.1 Use of SADD and gender analysis in joint assessments and availability of gender analysis

The Joint **Multi-Sector Needs Assessment** (MSNA) coordinated by the Lebanese Red Cross (LRC) was initiated in the immediate aftermath of the explosions. Covering the Beirut-Mount Lebanon region, the MSNA served as the primary, multi-partner, assessment that the largest number of humanitarian actors collaborated on covering the widest range of topics.

Updated monthly, the LRC MSNA⁵ provided the UN and its humanitarian partners with an evolving estimation of the humanitarian needs among the affected population over the course of the Flash Appeal.

The MSNA data was collected with disaggregation by sex and age although this was only inserted after a few initial rounds.⁶ The gender of the head of household (HoH) is identifiable (where HoHs are interviewed) allowing for an important understanding of the specific needs and priorities of female-headed households.⁷ Although this data was disaggregated by sex and age, it was not analyzed with attention to gender until the support of the OCHA-UN Women Gender Advisor was made available. Furthermore, the MSNA did not capture a gender breakdown of the household members, nor disaggregated data on gender and sexual minorities. LRC reports that enumerators engaged in the MSNA received training which included content on ensuring protection standards and guidance on basic psycho-social support. Of the 1,007 youth volunteers engaged in the exercise, 66 per cent were female and 34 per cent were male. An LRC managed call centre with a hotline served as the primary complaint and feedback mechanism for the exercise.⁸

A rapid [gender analysis](#)⁹ of the first wave of the MSNA data was published by ACTED, UN Women, and OCHA a week after the launch of the Flash Appeal on 14 August. Findings were presented to each sector by the Gender Advisor to enhance attention to gender in the work of the sectors.

MSNA data collected and stored with sex and age disaggregation available.

Separately, standalone rapid gender analyses identifying the differentiated impact of the crisis on women, men, girls, and boys (with attention to intersecting identities and vulnerabilities) were made available.

Subsequently, a more in-depth analysis of the [gendered impacts of the explosions](#) developed jointly by UN Women, CARE, UN ESCWA, ABAAD, UNFPA was issued in October.¹⁰ The latter analysis highlighted sector-specific findings which were shared with the different sectors' members and implementing partners through targeted presentations and materials. Importantly, the gender analysis provided a close look at the specific impact on older, disabled, refugee, migrant, and LBQT (lesbian, bisexual, queer, and trans) women.¹¹ While it is difficult to ascertain if, and to what extent, the gender analyses influenced the initial planning and subsequent revision of the Flash Appeal priorities by sectors, key findings were presented individually to the sectors, and have also informed the Situation Reports, Crisis Monitoring Dashboards and Flash Appeal Response Dashboards produced by OCHA on behalf of the humanitarian community. Furthermore, the gender analysis served as a timely evidence base for drawing attention to the specific needs of women and girls, elevating

⁵ The data is shared with 34 partners who have signed the data-sharing agreement on a monthly basis.

⁶ For instance, data on gender of the family members around September 7, meaning it was not collected for 6,209 entries in the initial assessment rounds.

⁷ However, if the respondent was not the HoH, then the question "what is the respondent's relationship to the HoH" was asked with the options "wife/husband, wife, daughter/son, other." While one could surmise the HoH gender based on heteronormative assumptions, this is not best practice and led to lack of precise HoH gender data on approximately 3,330 entries.

⁸ These boxes throughout the document highlight strengths and key successes in maintaining the necessary attention to gender in different stages of the response.

⁹ OCHA, UN Women, ACTED, Emerging Gender Analysis: Gender Findings from the Multi-Partner, Multi-Sectoral Needs Assessments of the Beirut explosion (August 2020).

¹⁰ UN Women, CARE, UN ESCWA, ABAAD, UNFPA, Rapid Gender Analysis of the August 2020 Beirut Port explosion: An Intersectional Examination (October 2020).

¹¹ The assessment combined a secondary review of existing data with primary data collection. The secondary analysis included reviewing 45 reports, sitreps, and needs assessments published by UN agencies, I/NGOs since the explosion and conducting gender analysis on three quantitative datasets from assessments carried out in response to the explosions. Primary data consisted of 16 KIs, 4 FGDs, and 16 community interviews.

the economic and social protection needs of elderly people, and to the inclusion of LGBTIQ people in the Lebanon 3RF.

CHALLENGES: While the eventual collection of sex and age disaggregated data in the MSNA following feedback is an important strength to highlight, the lack of consistent SADD from the launch of the assessment, the absence of gender breakdown of all household members, and space for safe self-identification of people belonging to gender and sexual minorities limited a more concrete gender analysis of the affected population. Improving data management and cleaning system is also critical in improving gender data, including consistently collecting SADD by incorporating it into the logical flow of the questionnaire and correcting erroneous entries so that the data may be used.

These steps would have allowed for the MSNA to capture important findings based on more concrete SADD to assess key areas of gender inequality. Instead, as the MSNA was limited to analyzing gender dynamics based on the head of household, findings were limited to broader statements at the household level such as “female headed households (FHH) were less likely to be generating income in the past month compared to male headed households (MHH).”

The MSNA sought to capture possible incidence of gender-based violence (GBV), including sexual exploitation and abuse by including a direct question to responders on whether they were aware of reported cases of sexual or gender-based violence/abuse/exploitation.¹² While the MSNA team had social workers available for providing psycho-social support, it is unclear if this included specialized gender-based violence specialists. Similarly, while LRC has adopted the organization’s global PSEA Policy, it is yet to be integrated with HR practices and implemented with an action plan in country. All LRC volunteers were also not yet trained on PSEA at the time of the response. However, there are plans to address this gap in 2021 through the support of the PSEA Network.

Beyond the LRC-led MSNA and the above-mentioned gender analyses, numerous other assessments and analyses were conducted by organizations in the aftermath of the explosions. The Rapid Gender Analysis released in October 2020 identified a substantial gender data gap in the humanitarian assessments informing the response to the Beirut explosions, where 36 per cent (16 of 45) of UN and NGO assessments published since the incident were gender-blind and did not include sex disaggregated or gender-related findings. This reflects a persistent and concerning gap in the broader humanitarian space when it comes to collecting and utilizing sex disaggregated data or gender analysis.

36 per cent (16 of 45) of UN and NGO assessments published since the explosions were gender-blind and did not include sex disaggregated or gender-related findings.

RECOMMENDATIONS: For the upcoming nation-wide MSNA, the appointment of a gender advisor throughout the planning and implementation of the needs-assessment is strongly recommended. Earmarked funding in the budget for the MSNA to secure adequate gender expertise and ensure implementation of gender mainstreaming actions in planning and executing the MSNA would be critical for this purpose. Arrangements (including at the coordination level) should be made to ensure that gender expertise is available (harnessing the capacities of the Gender Advisor, the Gender Working Group, the Gender-Based Violence sub-sector, UN Women and UNFPA) to sectors to ensure that sector-specific topics are covered in a gender-sensitive manner. To ensure that a do no harm approach is adopted, gender sensitivity training for enumerators, clearer links to case management processes, and risk mitigation mechanisms are crucial. All enumerators should also have received PSEA training and be familiar with referral mechanisms prior to the exercise. Please refer to Annex 1 for a list of recommendations relating to the proposed nation-wide MSNA.

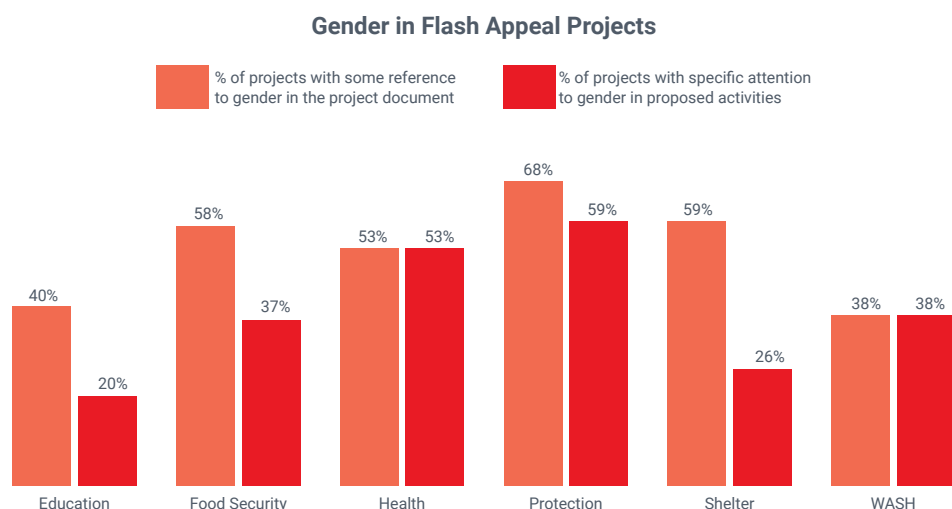
¹² Question: “Have you or anyone you know reported sexual or gender-based violence/ abuse/ exploitation?”

1.2 Gender considerations in the flash appeal and selected projects

The Flash Appeal to respond to humanitarian needs created by the Beirut Port explosions was launched on 14 August 2020.¹³ Produced by OCHA, in collaboration with humanitarian partners, the Appeal covered the period from mid-August to November 2020 and was subsequently extended to the end of December 2020. Although the full extent of needs was not known at the time of the launch, the Appeal highlights some differing impacts the crisis had on specific segments of the population, including older people, women and girls, refugees, migrant workers, and informal sector workers. The Appeal crucially stresses the likely decrease in access to essential health services for women (including for sexual and reproductive health as well as for GBV prevention and response services) against a backdrop of an increase in gender-based violence. Violence against women, children, and LGBTIQ+ people are specifically flagged as concerns and the need for PSEA is highlighted. Under the sector-specific priorities presented in the Flash Appeal, there is special emphasis on: provisions for pregnant and lactating women under Food Security; mainstreaming prevention and response to sexual abuse and exploitation (SEA) and GBV, and establishment of female-friendly spaces for women and girls under Protection; as well as reference to sexual and reproductive health rights (SRHR), maternal health, and GBV prevention and response services under the Health Sector. However, only the Health Sector demonstrated use of sex and age disaggregated data.

After the November revision of the Appeal, a total of 103 projects were kept by the sectors to respond to the strategic objectives identified in the August Flash Appeal document. Of these,

- 53 per cent of projects demonstrated a recognition of the gender inequalities and referred to specific needs of women and girls, female-headed households, or LGBTIQ people. However, this did not always translate to concrete activities or provisions being proposed in the project plan to address the identified inequalities and needs. Only 43 per cent of projects integrated gender concerns in the proposed activities.
- Only 19 per cent included some reference to PSEA, and 13 per cent contained references to female headed households.



BEST PRACTICE: Following the launch of the Flash Appeal, sector-specific [Gender and Inclusion Tip-Sheets](#) for the Food Security, Health, Protection and Shelter Sectors, as well as for the Cash Task Force, were developed by UN Women and OCHA in consultation with Sector Coordinators as a resource to support the sectors in promoting a gender-sensitive response. These tip-sheets were disseminated and presented to sectors' members and relevant implementing partners to be a preliminary checklist of gender priorities to be considered during implementation. The engagement of the Food Security, Health, Protection Sectors and Cash Task Force in developing the tip-sheets is particularly notable and played an important role in ensuring the practical use of this resource.

¹³ <https://reliefweb.int/sites/reliefweb.int/files/resources/Lebanon%20Flash%20Appeal%20FINAL%2014%20Aug%202020.pdf>

The **Health Sector** can be highlighted as a good example of identifying gendered needs in its sectoral priorities within the Flash Appeal document by using sex and age disaggregated data in its analysis. The Health Sector provides an estimation of women of reproductive age, adolescent girls, and pregnant women followed by specific needs, risks, and gaps in services they will require. Similar use of sex and age disaggregated data accompanied by gender considerations in the early planning stages of the response would further strengthen the ability of responders to better meet the needs of the population in a gender-sensitive manner.

Review of the submitted project overviews revealed that the **Shelter Sector** specifically chose to prioritize female-headed households as a priority for its coordinated response. This was reflected in the projects prepared by the sector's member organizations, with several highlighting this prioritization, and close to 60 per cent of projects selected under the Shelter Sector reflecting some level of attention to female-headed households and other gendered disparities. Contextualizing the sector's priorities with gender-sensitivity from the planning stage – as demonstrated by the Shelter Sector – is a concrete example of how sectors can facilitate more gender-responsive activities in a humanitarian response.

RECOMMENDATIONS: As per the IASC Gender Policy, a gender analysis that goes beyond protection and SRH priorities includes the impact of the crisis on women and girls is necessary. This analysis should cover women's livelihoods, access to housing, land, and property, access to education, health needs inclusive of Minimum Initial Service Package standards but is not restricted to SRH and maternal-child health, access to food security and nutrition, as well as provisions for a gender-responsive implementation of AAP and PSEA mechanisms. This level of gender analysis accompanied by the consistent use of sex and age disaggregated data across all sectors is a minimum standard applicable to all humanitarian planning exercises.¹⁴ The Beirut Port explosions Flash Appeal highlights the increased risk of GBV, emphasizes the need for PSEA mechanism, and stresses the provision of SRH services. However, there was further scope to consider the gendered vulnerabilities and needs, including of sexual and gender minorities, loss of livelihoods, access to basic services, shelter, and sanitation.

Given the rapid nature of the response and the challenges of developing a strong gender-analysis backed by sex and age disaggregated data in short timeframes, it is recommended that the Lebanon Humanitarian Country Team consider developing an annually updated 'Gender in Humanitarian Action Profile' that can serve as a resource to inform future emergency and humanitarian responses.¹⁵

2. COORDINATION STRUCTURES

The Humanitarian Coordinator (HC) and the **Humanitarian Country Team (HCT)** hold the overall responsibility for the implementation of the Flash Appeal. At the HCT, which serves as a strategic decision-making body, UNFPA and UN Women both contributed as members. The HCT is supported at the operational level by an **Emergency Operation Cell (EOC)** as the core coordination group comprising of, amongst others, Sector Coordinators and Co-coordinators (UN and NGOs) managing the humanitarian response to the Beirut Port explosions. While there was no dedicated gender capacity for the EOC or for individual **sectors**, the Gender Advisor seconded to OCHA from UN Women extended technical assistance on gender to the EOC and the sector system in addition to developing resources and guidance for the sectors.

The Lebanon HCT is only one of five HCTs globally in which at least 50 per cent of the membership is comprised of women.

Gender parity at the decision-making and coordination levels is recommended by the IASC Gender Policy as a standard to be upheld in humanitarian contexts. With 62 per cent of the Lebanon HCT members comprising of women, the

¹⁴ As prescribed in the IASC Gender Policy 2017.

¹⁵ Please refer to the annually updated [Gender in Humanitarian Action Profile from Myanmar](#) and the [Gender Alert from Palestine](#) as samples.

decision-making body is one among only five HCTs globally in which at least 50 per cent comprises of women.¹⁶ The gender breakdown of the representatives participating in the EOC is also similar with 60 per cent¹⁷ of the membership estimated to be women.

The **Beirut Forward Emergency Room (FER)** managed by the Lebanese Armed Forces (LAF) has served as the operational lead coordinating the response to the Beirut Port explosions.¹⁸ While the scope of this review does not include an assessment of the activities led by the FER, it is worth noting that civil society representatives voiced concerns on the over-reliance on the LAF for humanitarian aid.¹⁹ It is estimated that the FER consists of 25 LAF staff members and around 12 LRC staff members²⁰. This includes five female staff from LAF and three female from LRC who were specifically placed to manage hotlines, especially for requests from women although the female staff were not available during all times. The leadership in the FER consists only of male representatives.

A **Gender Working Group** consisting of UN agencies has served as the United Nation's gender coordination and resource body in Lebanon since 2018. As the group primarily covered development work falling under the UNCT working on issues such as women's peace and security and gender mainstreaming through the UN Strategic Framework for Lebanon, its direct engagement with the humanitarian space was limited in the immediate aftermath of the Beirut Port explosions. In response to this and the on-going gender in humanitarian action needs in Lebanon, the Gender Working Group has proposed to expand itself into a multi-partner (UN and NGO) working group that works collectively across the humanitarian-development-peace nexus on key issues related to women's rights and gender inequalities.

The **GBV Sub-Sector** was activated to support the Beirut Port explosions protection response by broadening the scope of the existing GBV Sub-Sector under the Lebanon Crisis Response Plan (refugee response). GBV risks, as well as prevention and response priorities, were included in the Flash Appeal and the Sub-Sector undertook a mapping of GBV service providers to expand the existing referral mechanism. By distributing guidelines channeled through OCHA to Sector Coordinators, the Sub-Sector also extended assistance on how to include GBV mainstreaming as a criterion when selecting projects for the Flash Appeal.

A **PSEA Network**, consisting of PSEA focal points from member agencies, with a dedicated PSEA Coordinator hosted by OCHA on behalf of the Resident Coordinator's Office was already active in Lebanon at the time of the explosions. While the PSEA Action Plan and Strategy was endorsed by the HCT in May 2020, the development and implementation of these policy documents was only being initiated when the humanitarian response began. Consisting of PSEA Focal Points from member agencies, the PSEA Network met on a weekly basis following the explosions to ensure inclusion of PSEA priorities in the humanitarian response by developing Standard Operating Procedures (SOP), Information Sharing Protocols (ISP) and SEA reporting guidance for sectors engaged in the response. While PSEA is highlighted in the Flash Appeal as a priority, only twenty among 103 projects (19 per cent) approved under the revised Flash Appeal refer to PSEA in their submission.²¹ Projects relating to PSEA were approved through the Lebanon Humanitarian Fund, which provided resources for awareness-raising and the establishment of an inter-agency hotline and complaint and feedback mechanism (CFM).

There was no system-wide or inter-agency **Accountability to Affected Populations (AAP)** body functioning at the time of the explosions. To fill this gap, a risk communication and community engagement (RCCE) Task Force, which was set up in April 2020 as part of the COVID-19 response, was expanded to cover AAP in September 2020. The expanded group (with one dedicated sub-working group on AAP and one on CE) subsequently issued an action plan covering RCCE and AAP priorities post-explosions although implementation is in its initial stages as of early 2021. As a reliable AAP mechanism requires "transparent and trusted communication [...], effective participation and leadership in decision-making processes of all affected people, and the safety and security of affected people," it is critical that the action plan pays more attention to factors such as age, disability, gender identity and sexual orientation, ethnicity, and migration and nationality status.²²

¹⁶ As per 2019 data. Source: IASC Gender Accountability Framework Report-2019.

¹⁷ Both estimates based on data available from UNOCHA.

¹⁸ Consisting of representatives from the Lebanese Army, Lebanese Red Cross, Beirut Governorate, Beirut Municipality, High Relief Committee, the Ministries of Health, Social Affairs, Public Works and Transport, Communications, Energy and Water, and the Civil Defense. Source: <https://beirutfer.com/>

¹⁹ 3RF consultation meeting.

²⁰ As estimated by the UN Civil Military Coordinator.

²¹ Based on analysis of projects uploaded on HPC under the Lebanon Flash Appeal as of Jan 04, 2021.

²² UN Women (2020). How to promote gender-responsive localization in humanitarian action. Guidance Note. Geneva: UN Women

BEST PRACTICE: The secondment arrangement between OCHA and UN Women allowed gender expertise to be promptly made available to coordination activities from the initial phase of the humanitarian response. As a secondee from UN Women, the Gender Advisor's support to OCHA and the humanitarian coordination space over four months was backed by the institutional expertise of UN Women. This helped facilitate linkages between the humanitarian space and existing coordination bodies on gender and ensure that critical areas needing technical assistance on gender would continue to be supported by UN Women in the longer term, even after the completion of the secondment. More concretely, the Gender Advisor developed "Gender and Inclusion Tip Sheets"²³ for sectors as a tool to promote gender-sensitive planning and implementation; provided direct inputs to the Assessment and Analysis Cell under the Emergency Operation Cell bringing greater attention to gender in the needs assessment and analysis; helped develop standalone gender analysis on the impact of the crisis; coordinated the gender analysis of the monthly MSNA data, as well of the Flash Appeal monitoring data; and supported OCHA in ensuring that publications on the humanitarian response included gender considerations.

RECOMMENDATIONS: Provisions for the participation of a Gender Advisor or a representative of the Gender Working Group into the Emergency Operations Cell or inter-sectoral coordination mechanism will help to ensure that gender considerations are prioritized in the coordination body and across all participating sectors.

Moving ahead with the existing proposal to expand the interagency **Gender Working Group** to NGOs, as well as to cover the humanitarian-development-peace nexus, would enable the group to serve more effectively as a coordination and resource body for gender equality and the empowerment of women and girls (GEEWG) across the nexus in Lebanon. It is important that the group is not be linked to the humanitarian coordination structure in the country to ensure that its efforts are streamlined and impactful.

The participation of many non-affiliated volunteers, new organizations, and community groups in the early stages of the response to the explosions meant that many actors on the ground, distributing aid and gathering feedback were operating without GBV sensitization and PSEA awareness. The limited GBV risk-mitigation efforts was also identified as a limitation in the MSNA data collection process. In the upcoming MSNA, it is critical that, when questions related to GBV are included, the **availability of a GBV and mental health and psychosocial support (MHPSS) specialist** is ensured, and a **survivor-centric approach** is adopted.

Beyond the provision of a recommendation to consider GBV risk mitigation as a factor in the selection of projects for the Flash Appeal the efforts to mainstream GBV in all the target sectors was limited. More systematic engagement of all the sectors and the humanitarian leadership would lead to a more efficient **mainstream of gender and GBV related priorities across all sector providing humanitarian assistance**. Stronger emphasis on **GBV mitigation as part of longer-term preparedness efforts** in the coming months comprising of awareness raising activities; sensitization of GBV risks, prevention and response for all implementing partners including through collaboration with the PSEA Network; and maintaining the existing mapping of GBV service providers with regular updates is recommended. Beyond the initiative of the GBV Sub-Sector, all organizations participating in humanitarian response activities must budget for and require that their personnel increase their knowledge on PSEA, GBV, and gender equality through awareness sessions or trainings and ensure that all humanitarian workers know how to refer survivors safely and confidentially to services. All sectors are also urged to incorporate practical GBV risk mitigation activities in the planning and implementation of sector response plans and support their member organizations in doing so as well.

In addition to the endorsement of the **PSEA Strategy, Action Plan and SOP** by the HCT, the membership of LHDF, LHIF, and all other implementing partners engaged in the humanitarian response as well as the upcoming implementation of the 3RF are urged to endorse and implement these PSEA policies. This includes having community feedback mechanisms and a referral pathway capable of receiving and referring GBV, SEA related incidents and monitoring of the reporting/referral pathways and information sharing processes as outlined in the PSEA Network ISP. It is critical that the Lebanon PSEA Network is supported (including through contribution of financial and human resources, and active membership of response partners) in its efforts to build the capacity of all actors involved through the Flash Appeal, the LCRP, and 3RF to implement the commitments and standards agreed to in the Strategy, Action Plan and SOP. Strengthening of existing organization community-feedback mechanisms (CFMs)²⁴ processes and tools to receive and refer SEA reported incidents also remains a need. Ensuring the quality of existing CFMs, initiating government oversight of PSEA issues in partnership with the Ministry of Social Affairs, and developing a humanitarian system-wide CFMs that

²³ <https://arabstates.unwomen.org/en/digital-library/publications/2020/09/gender-and-inclusion-tip-sheets-in-lebanon>

²⁴ These include hotlines, call centers, drop boxes/grievance and redress boxes, social media platforms, mobile phones, women and child friendly spaces, etc.

is easily accessible to all, regardless of nationality, displacement or migration status, gender, age, sexual orientation, and disability – alongside the other activities planned for 2021 by the PSEA Network – are proposed as priorities.

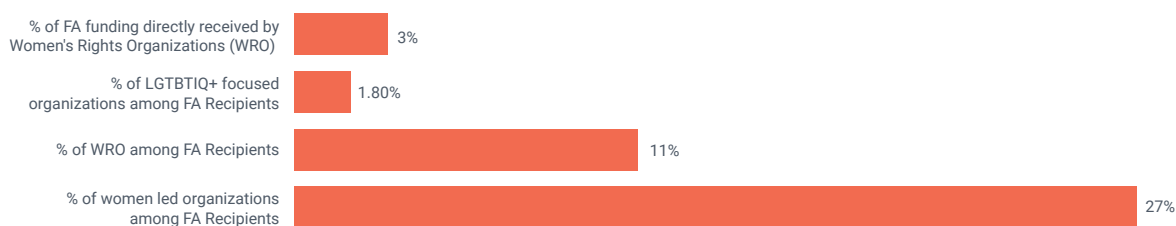
As the **AAP** coordination structures are formalized, there is an urgent need to ensure that the action plan is informed by existing gender analyses, includes provisions for engagement with women’s rights organization and other civil society organizations, factors in GBV risk-mitigation, and works closely with the PSEA Network. It must also include concrete measures to ensure that affected people regardless of their gender, sexuality, age, disability, nationality or migration status are able to not only access the CFMs, but also hold the humanitarian system accountable by guiding and informing the planning and implementation of responses. Overall, the humanitarian community is urged to take action to improve accountability to the communities they serve in a coordinated manner including by participating in and helping implement the efforts of the AAP coordination body.

3. RESOURCE ALLOCATION

As per data from the Financial Tracking System (FTS), over 56 organizations²⁵ (including UN agencies, international NGOs and national NGOs) received funding channeled through the Lebanon Flash Appeal 2020. Among these, 15 (27 per cent) were women-led²⁶ (WLO) and six (11 per cent) were women’s rights organizations (WRO) explicitly and primarily focusing on gender equality and women’s rights.²⁷ This included one receiving organization specifically focused on the needs of LGBTIQ+ people. However, of the US\$156 million that was channeled through the Flash Appeal, less than 3 per cent of funding went to the six organizations principally working towards gender equality and women’s rights (including national and international NGOs and UN agencies) despite a strong presence of national and international women’s rights organizations in Lebanon.²⁸ Increased funding to address the needs of women in their diversity and to support women’s rights and feminist civil society groups was also one of the concrete demands formulated by the Feminist Network in the immediate aftermath of the explosions.²⁹

Less than 3 per cent of funding channeled through the Flash Appeal went directly to recipient organizations principally working towards gender equality and women’s rights.

Breakdown of Recipient Organizations in the Flash Appeal



Given the short-term nature of the Flash Appeal, funds were directly disbursed to organizations that had the capacity to quickly implement projects. This meant that most funds were received by larger organizations (regional NGOs, INGOs and UN agencies). The Gender and Age Marker was also not applied for the Flash Appeal owing to the rapid nature of

²⁵ The number is likely higher as some organizations have been grouped together in FTS due to insufficient details.

²⁶ “Women-led organization” must be headed by a woman as director/head of organization. Adopted from criteria used by the Women, Peace and Humanitarian Fund. For multi-country/international organizations, an organization was categorized as “women-led” if the Lebanon office is led by a woman.

²⁷ To be considered a “Women’s Rights or Feminist Organization,” the organization’s official mission/vision statement must reflect its commitment to addressing multiple/intersecting forms of discrimination and advancing gender equality and women’s rights. Adopted from criteria used by the Women, Peace and Humanitarian Fund.

²⁸ This was calculated based on data extracted from the Financial Tracking Service website as of 31 December 2020 and only covers direct recipients of the Lebanon Flash Appeal. Any funding that was subsequently transferred to women’s rights organization from recipients of the Flash Appeal is not included here.

²⁹ [Link](#)

³⁰ <https://www.unicbeirut.org/UN-Lebanon-Humanitarian-Fund-S8.5million-support-vulnerable-communities-Beirut-explosions>

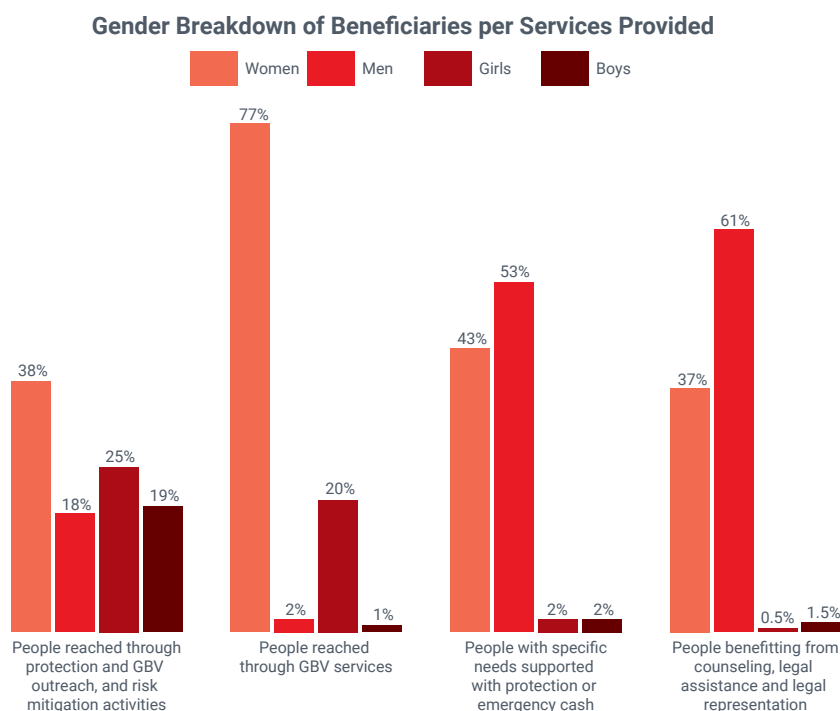
the exercise. While these limitations existed, other funding mechanisms such as the Lebanon Humanitarian Fund (LHF) reports having a greater focus on localization. Of the LHF special allocation of \$8.5 million in August 2020, 100 per cent of funding went to NGOs (five international and three national organizations).³⁰ Only 25 per cent of funding went towards the three national NGOs – of which one is a women’s rights organization. The funding received by the women’s rights organization (ABAAD) financed the organization’s joint efforts with CARE to deliver PSEA training and gender sensitization for front line workers in the humanitarian response and helped strengthen community feedback mechanisms.

RECOMMENDATIONS: Global evidence indicates that the benefits of gender-focused action are sizeable and justify more intensive funding for women and girls, delivering average returns of \$8 for every \$1 spent in humanitarian contexts.³¹ Research has also shown that life-saving support for women and girls in humanitarian settings is disproportionately underfunded.³² Despite this evidence, funding to local women’s organizations also remains insufficient. As a first step, it is recommended that funding channeled towards women-led and women’s rights organizations through subsequent disbursements of the LHF, as well as through the funding mobilized for the 3RF, is tracked to facilitate greater access to financing for local WLOs and WROs. Use of tools such as the Gender and Age Marker should continue to be applied for all LHF projects and be utilized for the selection and prioritization of projects under the 3RF. Mechanisms such as the Women, Peace and Humanitarian Fund – which will be piloted in Lebanon in 2021 – is an important tool to finance, equip and empower WLOs and WROs at the frontlines. Further, continued support to the signatories of the Charter of Demands developed by the Feminist Network and to broader advocacy efforts of WROs and WLOs must be sustained.

4. IMPLEMENTATION AND MONITORING

4.1 Humanitarian services for women and girls

Assessments and analyses conducted in the aftermath of the Beirut Port explosions pointed to key gender-specific impacts of the crisis on women and girls, LGBTIQ+ people, and female-headed households. Analysis of the monthly data emerging from the LRC-coordinated MSNA shows that:



³¹ <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/funding-for-geewg-in-humanitarian-programming-en.pdf?la=en&vs=637>

³² Ibid.

- 52 per cent of the affected population identified as female headed households³³ (significantly higher than the best available national average of 18 per cent).³⁴
- Female headed households were more likely to have family members over 60 living with them (59 per cent) than male headed households (46 per cent).³⁵ FHHs were also more likely to have household members with chronic illness (56 per cent FHH versus 44 per cent MHH).
- Income generation fell sharply across all households but FHHs remain less likely to generate income. In October 2020, 66 per cent of MHH had at least one household member generate income in the previous month while this was true for only 57 per cent of FHH. In December, this dropped to 27 per cent of MHHs reporting income generation versus 21 per cent of FHHs. Cash remained the top need for MHHs and FHHs with an increase in the percentage of households reporting cash as the top need (from 40 per cent of MHHs and FHHs in October to 51 per cent MHHs and 49 per cent FHHs prioritizing cash). FHHs (14 per cent) were a little more likely than MHHs (11 per cent) to report medication as a priority need.

Income generation fell sharply across all households but FHHs remain less likely to generate income.

Proportion of households reporting cash as the top need increased from October to December.

Other sources of data and gender analysis from the initial phase of the response had also highlighted that:

- 21 per cent of assessed households reported having an injured member and, of the injured household members, 60 per cent were female.³⁶
- Older women living alone constituted 8 per cent of the assessed population living in the explosions' radius.³⁷
- The explosions further limited availability and accessibility of reproductive health services by reducing capacities of existing health centers and further limiting affordability and access of women to these services.
- Risks of multiple forms of GBV increased in the aftermath of the explosions.
- Risk of eviction and homelessness seems to be higher than it was before the explosions, particularly for migrant workers and the LGBTIQ+ community.

Data captured by the Lebanon referral and information management system (RIMS)³⁸ serves as another useful source of information on needs which have persisted among the affected population in the Beirut-Mount Lebanon (BML) region. While not meant to be a representative sample³⁹ of the population in the BML, it is worth highlighting that in the August to December 2020 period:

Of the eleven sector categories used in the RIMS platform, requests relating to child protection needs were the most common (33 per cent) in the BML region. Of these, 55 percent were for females whereas 45 percent were for males.

- Referrals for men and boys (56 per cent) exceeded those for women and girls (44 per cent).
- Of the eleven sector categories⁴⁰ used in the RIMS platform, requests relating to child protection needs were the

³³ Analysis of data generated through the LRC monthly MSNA (December 2020).

³⁴ UN Women, CARE, UN ESCWA, ABAAD, UNFPA, Rapid Gender Analysis of the August 2020 Beirut Port explosion: An Intersectional Examination (October 2020).

³⁵ Analysis of data generated through the LRC monthly MSNA (December 2020).

³⁶ World Vision, "Rapid Needs Assessment", August 2020. Available from <https://www.humanitarianresponse.info/en/operations/lebanon/assessment/lebanon-world-vision-beirut-explosion-rapid-needs-assessment-summary>

³⁷ UN Women, CARE, UN ESCWA, ABAAD, UNFPA, Rapid Gender Analysis of the August 2020 Beirut Port explosion: An Intersectional Examination (October 2020).

³⁸ RIMS is a referral platform used by over 60 local and international humanitarian actors providing services across Lebanon (22 within the Beirut-Mount Lebanon region) to send, receive and track their referrals on one unique platform.

³⁹ As RIMS is a referral management system, it is not meant to be representative of needs but rather serve as an additional source of information – based on cases managed by the participating organizations – on where some of the key needs may be.

⁴⁰ Basic assistance, child protection, education, food security, GBV/SGBV, Health, IM-M&E, Livelihoods, Protection, Shelter, and Social Stability.

most common (33 per cent) in the BML region. Of these, 55 per cent were for females whereas 45 per cent were for males.

- When including referrals from outside BML (i.e., country-wide) requests for 'basic assistance' constituted the most sought referrals among women (24 per cent women seeking basic assistance support), whereas 'livelihoods' constituted the most sought-after category of referrals among men (37 per cent men seeking livelihoods support).

Progress under all projects implemented as part of the Flash Appeal was tracked through sector-specific indicators in a dedicated database/monitoring platform (ActivityInfo).

Notably, almost all indicators which tracked numbers of people reached tracked progress with gender and age

disaggregated data: 26 of 37 indicators were designed to track people reached directly or indirectly. Of these, two did not report any progress⁴¹ and 21 indicators regularly tracked data with gender and age disaggregated data monthly.⁴² The use of SADD varied across sectors with all indicators used in the Protection Sector tracking SADD in contrast to none of the indicators under the WASH Sector capturing SADD.

88 per cent (21 of 24) of indicators established by sectors to monitor progress numbers of persons reached.

Tracking real-time data disaggregated by gender and age gave partners the opportunity to course-correct while implementing and provided valuable insights on trends and lessons for future implementation.⁴³ Review of the progress data for the Flash Appeal projects reveals important trends that highlight the value of adopting a gender-responsive approach and also point to areas possibly requiring further attention.

- A vast majority of those reached by GBV outreach and risk mitigation activities were women (81 per cent) and girls (13 per cent). This was also the case for those reached by GBV services (77 per cent women and 20 per cent girls) and aligns with the heightened vulnerabilities of women and girls to GBV risks.
- Estimates based on referrals managed by the RIMS suggest that child protection needs for boys remain a priority.⁴⁴ Given this context, it is positive to note that 33 per cent of those engaged in community-based child protection activities were boys.
- While women and girls comprised a significant portion of those accessing GBV-related support, it is notable that when it came to cash assistance, men (53 per cent) were over-represented among beneficiaries. In addition to GBV response services, it is critical that women and female-headed households are better targeted when it comes to access to critical resources such as cash assistance under the Protection Sector.
- Services provided through the Food Security and Shelter Sectors appear to have largely targeted both genders to similar extents with women and girls comprising a majority of beneficiaries under specific areas including among recipients of hot/ready to eat meals. Under Food Security, while women, as expected, made up about 98 per cent of mothers and caregivers receiving counselling session from lactation specialists, it is notable that this service far exceeded its target of 6,000 people by reaching over 16,600 beneficiaries by December 2020. Most services provided through the Health Sector were accessed by a greater proportion of women and girls.
- In some instances, progress was tracked by measuring the number of households reached (Shelter and WASH). These indicators, however, did not capture whether the households reached were female-headed or male-headed despite multiple assessments and gender analyses pointing to the high prevalence and specific vulnerabilities of

Although women and girls formed the majority of recipients for GBV outreach and response services, they were under-represented among those receiving protection and emergency cash assistance as well as legal representation. 'Cash' has remained as the top need reported by households with FHHs less likely to have a household member who generated income in assessed period.

⁴¹ No one was reached and therefore no SADD applicable.

⁴² Two indicators (Education) which were meant to track people reached did not report any progress and therefore have not been included in the denominator.

⁴³ For a full overview of the monitoring data, including the gender and age breakdown of the progress made by individual sectors under selected areas of work, please refer to OCHA's Flash Appeal - Beirut Port explosions Response Dashboard.

⁴⁴ Of the eleven sector categories used in the RIMS platform, requests relating to child protection needs were the most common (33 per cent) in the BML region. Of these, 55 per cent were for females whereas 45 per cent were for males.

female-headed households in the explosion area. This was despite the Shelter Sector prioritizing female-headed households during the planning phase.

BEST PRACTICE: The use of sex and age disaggregated data by 88 per cent of the active indicators measured during project implementation is a notable strength. Alongside the dissemination of the sector-tip sheets to sectors, ensuring that the system-wide reporting and database/monitoring platform (ActivityInfo) required this type of data from sectors may have played a critical role in establishing the regular use of SADD as a practice.

RECOMMENDATIONS: It is essential that all monitoring and reporting systems capture data that is disaggregated by gender and age. For any of the humanitarian activities that will continue in 2021, as well as for the reporting mechanisms adopted by the 3RF sectors, it is critical that **targets** as well as **tracking** data for all indicators use SADD.

It is also recommended that inter-agency referral forms mainstream gender and capture gender-sensitive data. For instance, for services targeting households or other entities such as MSMEs, it is important to capture what proportion of these entities are female-headed or female-owned to enable gender-sensitive programming. More broadly, concerted efforts to ensure that all implementing partners engaged in the humanitarian response utilize a centralized referrals platform will be necessary for the system to provide a more coordinated service and potential estimation of gaps. As of December 2020, only twenty-two organizations were using RIMS as a referral management system in BML.

While there is a gradual increase in attention to the gendered vulnerabilities experienced in crisis contexts, globally there is less attention to women's access to and control of resources, and to their capacities to recover. This appears to be the same trend in this response as evidenced in the under-representation of women benefitting from emergency and protection cash assistance, as well as in legal assistance and representation (in contrast to an over-representation among those accessing GBV services and PSS support, for instance). Efforts to close this gap in existing services accompanied by **proactive measures to allow for equitable access and greater levels of women's participation** in the implementation of upcoming interventions in the 3RF and following the MSNA are needed.

4.2 Women's participation and leadership in the humanitarian response

Projects to enable and support the participation and leadership of women, women-led organizations, or women's rights organizations were not prioritized in the projects selected as part of the Flash Appeal.⁴⁵ There was also no specific reference to enabling women's participating and leadership in the Flash Appeal.

However, there were some targeted efforts to facilitate this engagement, including through the formation of a Feminist Network in the immediate aftermath of the explosions. Furthermore, the Women, Peace and Humanitarian Fund (WPHF) has opened a funding window for Lebanon focusing on women's participation in Beirut's explosions response and recovery process. In 2021/22, the WPHF in Lebanon will support the integration of women's knowledge, expertise, and needs in the continuing response to the port explosions; ensuring women's participation in the political recovery following the explosions and addressing the risk of exclusion from relief and recovery due to lack of formal documentation. The Fund is particularly targeting small women-led organization and women's rights organization and proposals that target women and girls who face multiple and intersecting forms of discrimination, such as those marginalized and excluded due to poverty, ethnicity, disability, age, geography, sexual orientation, lack of citizenship or because of their migratory status.

On August 27, 2020, forty six feminist activists and women's rights organization in Lebanon released a Charter of Demands representing their concerns and demands for an immediate humanitarian assistance process that recognizes and addresses existing gender inequalities and seeks to ensure that all women and girls' needs and priorities are met and that the process is transparent and subjected to due diligence as well as clear accountability mechanisms. The representatives of the group met with the donors' community in Lebanon in October 2020 and with the leadership of the UN, WBG, and EU in November 2020.

⁴⁵ Only one Flash Appeal project refers to the empowerment of girls as an objective under the proposed intervention.

LOOKING AHEAD

Although the Flash Appeal duration formally ended in December 2020, some humanitarian services continue to be provided as needs have persisted. Beyond the humanitarian needs caused by the explosions, the COVID-19 pandemic and strict lockdowns have continued to negatively impact people's health, livelihoods, safety, and access to basic services. Without sustained and targeted interventions, the most vulnerable – due to inequalities on the basis of gender, disability, sexuality, migration status, nationality, and class – will be impacted most adversely.

Building on the best practices and drawing from the lessons learned through the response efforts implemented in 2020, it is suggested that the recommendations presented in this review are considered for key activities in 2021. Among others, these include:

- **Nation-wide Multi-Sector Needs Assessment:** The Lebanon HCT has proposed conducting a nation-wide multi-sector needs assessment to identify the extent to which humanitarian needs across the country have grown (covering the Lebanese, as well as migrant and refugee populations). This exercise builds on the Secondary Data Review (SDR) and a contingency planning exercise being carried out. As highlighted in the SDR, given the structural gender inequalities that have persisted in Lebanon, it is critical that the MSNA exercise is planned and executed with attention to gender equality and the specific humanitarian needs and capacities of women and girls. Among other steps recommended in Section 1.1 and Annex 1, this includes ensuring the availability of dedicated gender expertise throughout the exercise.
- **Streamlined humanitarian coordination structure:** As the HCT determines how the humanitarian coordination structure can be strengthened, it is recommended that the EOC, in addition to representation from sectors, also includes gender expertise and representation from the PSEA Network. This would complement the gender expertise available to the HCT at the decision-making level.
- **Gender mainstreaming and expertise integrated into Lebanon's 3RF:** The implementation of the 3RF must work to preserve pre-crisis gains hard won by women and girls, achieved desired outcomes for individual women, girls, men, boys, and gender minorities, reach marginalized groups, and reverse gender inequalities. Specific interventions to achieve these aims are outlined in the Social Cohesion, Inclusion, and Gender chapter, and have been integrated into other sector plans. It is recommended that a Gender Advisor is seconded to the Lebanon Financing Facility to work with partners to strengthen their interventions on gender equality, and ensure a gender equitable approach for assessments, analysis, programming, and monitoring and evaluation.
- **Expand the existing Gender Working Group to cover humanitarian response:** The Gender Working Group has proposed to the HCT that its mandate be extended to work across the humanitarian-development-peace nexus, and its membership be expanded to NGOs and relevant CSOs. It is recommended that the HCT endorse this proposal, and that the Gender Working Group serve as a strategic body to address, respond to, and advocate for issues of gender equality in Lebanon's humanitarian response.

ANNEX I

For the upcoming nation-wide MSNA planned in 2021, below steps are **recommended**:

- Appoint a gender advisor throughout the planning and implementation of the needs-assessment.
- Earmark funding in the budget for the MSNA to secure adequate gender expertise and ensure implementation of gender mainstreaming actions in planning and executing the MSNA.
- Arrange for gender expertise to be made available (harnessing the capacities of the Gender Advisor, the Gender Working Group, the Gender-Based Violence sub-sector, UN Women and UNFPA) to sectors to ensure that sector-specific topics are covered in a gender-sensitive manner.
- Mobilize the participation and leadership of civil society (including women-led and women's rights organization) and community partners with support from the Gender Working Group.
- Provide gender and GBV sensitivity trainings (including protection from sexual exploitation and abuse (PSEA)) to all members of the assessment team.
- Systematically collaborate with the PSEA Network to ensure appropriate process is in place and personnel is prepared to receive and respond to complaints, particularly those related to violence, including sexual exploitation and abuse by humanitarian actors or other individuals, groups, and organizations.
- Ensure gender balance in coordination and assessment teams.
- Ensure availability of GBV and mental health and psychosocial support (MHPSS) specialists to address related needs that may arise during the data collection exercises.
- Collect, store, and analyze sex-, age- and disability-disaggregated data.
- Engage local women's organizations and women's leaders, LGBTIQ+ networks and youth organizations as sources of more accurate information on diverse women, girls, men, and boys.
- Consult women, girls, men, and boys and where feasible and appropriate, break these categories down to include adolescents, youth, people with disabilities, migrants, refugees, LGBTIQ+ people and others instead of relying solely on 'head of households' to speak on behalf of the household.
- Adopt community-based and participatory approaches to the extent feasible and provide accountability to the assessed population including by ensuring that all women, men, girls, boys, LGBTIQ+ people, people with disabilities, migrants, and refugees are informed of their rights to access, participate in and guide the planning and implementation of humanitarian activities.

For more resources on conducting a gender-responsive needs assessment, please refer to the [IASC Gender Handbook](#), as well as additional guidelines from the [IASC](#), [UN Women](#), and [CARE](#).