

# Dimensions of gender-based violence against Syrian refugees in Lebanon

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**Assessments of the impact of the Syrian crisis indicate high levels of sexual and gender-based violence, with rape, assault, intimate partner violence and survival sex appearing increasingly common. Humanitarian agencies urgently need to work together to address this trend.**

In times of conflict everyone is affected by violence; however, women and girls in particular are more at risk of facing different forms of violence including sexual and gender-based violence (SGBV) due to the lack of social protection and lack of safe access to services. There is wide recognition of sexual violence as a weapon of war but other forms of violence against women during conflict also exist, including domestic violence, sexual exploitation and early marriage.

In early September 2013 UNHCR estimated the number of Syrian refugees in Lebanon at 720,003 and the number of the displaced

is still rising. Several local and international organisations have conducted rapid assessments to better understand the magnitude and impact of the crisis on displaced Syrians in Lebanon. Some of the main issues identified by these assessments include overcrowding, inadequate access to basic services, rising rent and food prices, and competition for the limited work opportunities. The assessments also helped to identify women and children as among the most vulnerable groups, solely by virtue of belonging to a particular gender, a certain age group or social status. This in turn shed light on the increase in SGBV among the

refugees and the need for humanitarian agencies urgently to develop a tailored response to reduce this form of violence.

There is no quantitative data in respect to violence against women but many displaced Syrian women and girls report having experienced violence, in particular rape. A rapid assessment conducted in 2012 by the International Rescue Committee in collaboration with ABAAD-Resource Center for Gender Equality assessed the vulnerabilities of Syrian women and girls to increased exposure to GBV both prior to crossing the borders and in their new host communities, and concluded the following:

- Rape and sexual violence were identified by focus groups and key informants alike as the most extensive form of violence faced by women and girls while in Syria.
- Intimate partner violence (IPV), early marriage and survival sex were identified by adult women and adolescent girls as other forms of violence experienced since arriving in Lebanon. Adult female participants in several focus groups reported that IPV has increased since their arrival in Lebanon, while adolescent girls stated that early marriages have increased, most frequently framed as efforts by families to 'protect' girls from being raped or to ensure that they are 'under the protection of a man'. Survival sex, typically linked to women's and girls' desperate need to earn money to cover the cost of living since arriving in Lebanon, was also identified as a type of violence frequently experienced by Syrian women and girls.
- Many newly arrived women and girls are living in unplanned and overcrowded refugee settlements, with minimal privacy and compromised safety, particularly among those refugee populations inhabiting abandoned public buildings.
- Survivors are reluctant to report SGBV or seek support due to the shame, fear and 'dishonour' to their families. Women

risk further physical and sexual violence, including death, often from their own families, when reporting GBV, a pattern that exists in many contexts

- Minimal coordination and lack of adherence to international standards of humanitarian assistance have hindered women's and girls' ability to access services. Discrimination and mistreatment are key barriers to accessing services.
- Women and girls have restricted access to information about the availability of services and support, particularly those that are relevant to survivors of GBV. Key informants strongly agreed that there are few services currently in place specifically designed to meet the needs of survivors of GBV or that are accessible to Syrian refugees.<sup>1</sup>

Sexual exploitation or non-consensual 'survival' sex occurs when women and girls exchange sexual favours for food or other goods, or money to help pay the rent, especially in Lebanon. *"And if you want other help from other NGOs you should send your daughter or your sister or sometimes your wife... with full make-up so you can get anything... I think you understand me."* (participant in focus group discussion)

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

Lower self-esteem among men because of what being a refugee means, in some cases, leads to a negative expression of masculinity. Violence towards women and children has increased as some men vent their frustration and abuse their power within the household. *"I don't feel that I am a real man after what has happened to me now, and to be honest, I can't handle it anymore." ... "When my wife asks me for vegetables or meat to prepare food, I hit her. She does not know why she was hit, neither do I."*

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

Information on the prevalence of GBV among men and boys – and its impact – has been markedly lacking but recent research conducted by ABAAD with the support of UNICEF<sup>2</sup> confirms that men and boys also have faced and/or are likely to face GBV and SGBV in Syria or in their new host communities. Interviews with displaced male youth and boys revealed they did not know the term ‘Gender-Based Violence’ but almost all the interviewees identified different forms of GBV – including domestic violence and harassment based on gender – as present within their communities after fleeing Syria, and had either witnessed such violence or were survivors of it. 10.8% of them had been exposed to sexual harm/harassment in the previous three months but tended to associate the forms of GBV they were exposed to with being Syrian and/or Palestinian/Syrian; thus racism and discrimination masked their ability to identify violence as GBV.

When interviewees were asked specifically about the impact of sexual harm/harassment on them, the majority reported ignoring it and trying to forget it; some thought it was their fault that it happened. Moreover, the very few who had told someone about it stated that nothing was done as a result. It was clear that the behaviour of the majority of those surveyed had changed drastically due to their displacement and what they had witnessed, resulting in constant conflict within households; they expressed feelings of insecurity, sadness, doubt, anger and loneliness, and were sometimes violent themselves. They have had little access to the resources and social support necessary

to help them. Young males and boys in particular are also highly susceptible to forced and early labour because they are seen from childhood as the economic provider for the family, which in itself is a form of GBV.

### Response

Many national and international organisations have been working on reducing GBV against Syrian refugee women, focusing on prevention and protection programmes using a holistic multi-sectoral approach incorporating a range of services such as legal services, information provision and awareness raising, medical and psychological health services, etc. However, these services are decentralised and scattered throughout the different regions and are provided by different providers. Having to go to different access points to obtain services hinders – either because of financial or cultural restrictions – people’s ability to access all the services they need.

Some new initiatives are addressing this problem of scattered service-provision points by creating a clear referral system among providers to facilitate access by beneficiaries. One example is the opening (by ABAAD in collaboration with UNHCR, UNICEF and the Danish Refugee Council) of three Safe Shelters in three different areas within Lebanon where there are large concentrations of Syrian refugees. These houses provide a secure and confidential place for Syrian refugee women who are survivors of or are at high risk of being exposed to GBV, and their children. In addition to providing housing for up to 60 days, the centres also provide – in one venue – case management and crisis counselling, psychosocial and legal support, forensic and medical care and referrals for provision of social services (economic opportunities, longer-term shelter, medical services, etc).

### Recommendations

The following recommendations are drawn from our recent study published with Oxfam which assesses the impact of the Syrian crisis from a gendered perspective, including an examination of the prevalence and impact of GBV:<sup>3</sup>

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- Increase the number of safe spaces for women, men, boys and girls.
  - Organise mass distribution of educational protection messages for women and men.
  - Build the capacity of care providers in clinical care for survivors of sexual assault, gender-based violence case management, and caring for child survivors.
  - Conduct community safety audits to further assess the security situation in relevant areas. Establish community protection mechanisms on the basis of regular community safety audits, including support for women's groups and capacity-building protection programmes for women.
  - Sensitise and engage relevant community stakeholders and actors in the security sector to install appropriate gender-sensitive security measures, including mechanisms to control the proliferation of small-arms.
  - Work to ensure all actors engaged in the delivery of aid receive training on gender equity, the elimination of violence against women and minimum ethical standards in aid delivery, and aim to meet standard operating principles. All actors should systematically track sexual violence in conflict, and build their GBV documentation capacities.
  - Ensure all aid agencies adhere to the principle of zero tolerance of sexual violence and exploitation, establish mechanisms for reporting such incidents, and act accordingly when incidents are observed or reported.
  - Establish confidential and trusted mechanisms for tracking and reporting incidents of sexual exploitation and abuse during aid delivery, and inform Syrian women and girls about the existence of such mechanisms.
  - Provide awareness sessions on GBV affecting male youth to staff of aid organisations and start support group sessions for male youth and boys.
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1. See Executive Summary, *Syrian Women & Girls: Fleeing death, facing ongoing threats and humiliation*, International Rescue Committee, August 2012 <http://tinyurl.com/IRC-Lebanon-August2012>
  2. *Assessment of the Impact of GBV on Male Youth and Boys among Syrian and Syrian/Palestinian Refugees in Lebanon*, ABAAD-UNICEF, forthcoming September 2013.
  3. Roula El Masri, Clare Harvey and Rosa Garwood, *Shifting Sands: Changing gender roles among refugees in Lebanon*, ABAAD-Resource Center for Gender Equality and OXFAM, September 2013 <http://tinyurl.com/Oxfam-ABAAD-ShiftingSands-2013> Arabic: <http://tinyurl.com/Oxfam-ABAAD-ShiftingSands-ar>