1. Introduction

Gender Action for Peace and Security (GAPS), Legal Action Worldwide (LAW) and ABAAD – Resource Center for Gender Equality have worked together to compile data on the impact of COVID-19 on gender equality, peace and security in Lebanon, as part of a global project generating 10 evidence-based country papers on the short- and long-term gendered impacts of COVID-19, as well as a multi-country evidence-based paper.

The research is aimed at enabling the international community to better understand the context-specific and global impact of COVID-19 and potential future pandemics on gender, peace and security and to develop policy and programming based on recommendations made for the national and international community.

The research methodology included a desk literature review and Key Informant Interviews (KIIs) conducted with 11 women’s rights and international organisations in Lebanon. A further desk review and KIIs with three participants were conducted in February 2021. The interviews were semi-structured with seven general questions followed by eleven thematically specific questions. All interviewees were women leaders, members or staff of local civil society and international organisations, research and policy institutes, and women’s groups. Their insights provide a gendered, intersectional lens on the impacts of COVID-19 in Lebanon and were used, in combination with the desk review, to formulate eight country-specific recommendations for responding to the gender, peace and security impacts of COVID-19 and future pandemics.

2. Summary of findings

KIls highlighted several impacts of COVID-19 on gender equality, peace and security. Specific groups that were disproportionality impacted were women who had lost their jobs, migrant domestic workers (MDWs), the LGBTQI community, and refugee women and girls. However, common issues emphasising COVID-19’s disparate gendered impact included: a
rise in violence against women combined with a lack of access to protection services; large-scale job losses; increased reliance on gendered roles in the home; tighter restrictions on freedom of movement; and inability to access health services due to restrictions on mobility. These problems have been further exacerbated by: women’s, girls’ and the LGBTQI community’s lack of participation in decision-making processes and access to resources and technology; along with limited long-term funding for local civil society groups working with women, girls and the LBGTQI community.

**Gendered impact of COVID-19**

KIIs identified a key gendered impact of COVID-19 as being the steep rise in violence against women and girls (VAWG) during national lockdowns and restrictions on mobility, such as curfews. Many factors can be attributed to this rise, namely that women and girls are spending more time at home and are unable to leave to separate themselves from abusive situations or seek protective services. This problem is even greater amongst MDWs and refugee populations who are particularly vulnerable as marginalised groups. KIIs did acknowledge that the judiciary was somewhat proactive in addressing VAWG, ensuring online complaint mechanisms were in place and actively following up on complaints. Additionally, in December 2020, Parliament passed new legislation broadly criminalising sexual harassment. However, it is too early to measure the impacts of the law.

KIIs further identified that COVID-19 lockdowns and restrictions on mobility have meant that women, girls, and LGBTQI persons are unable to move freely, leading to an increase in unpaid work and potential exposure to violence. Furthermore, women are faced with disproportional care responsibilities placed on them within the home. Domestic gender roles are being reinforced in troubling ways; women are confined to their homes and are often tasked with balancing housework, family needs, childcare and, if still employed, are also carrying out their jobs. Women with any savings or additional wealth have had to give these up in order to provide money to their children and support the household.

Additionally, the empty streets resulting from the lockdowns and curfews have left women, girls and LGBTQI persons who do choose to move more exposed to harassment and violence, including from the security forces entrusted with enforcing the lockdown. MDWs, refugee and transgender women in particular identified feeling vulnerable to sexual harassment and potential police detention and interrogation when moving during lockdowns.

KIIs identified prevalent job losses amongst women as a second key gendered impact of COVID-19. Within the formal economy, job losses have forced women to rely on alternative breadwinners for economic security, exposing them to potential economic abuse by intimate partners and other family members and undercutting their agency in difficult times. In the informal economy, which the pandemic has completely destabilised, women are even more vulnerable as they lack official legal and labour protections. This has had an exceptional impact on women working in the agricultural sector. For MDWs, widespread job losses have led to a lack of payment for their services, abuse and homelessness, with employers abandoning MDWs on the street. Furthermore, almost 80 per cent of Lebanon’s nursing cadre are female, meaning that many women who have managed to retain formal employment are serving on the frontline against COVID-19, exposing them to the virus.
All these issues play out as COVID-19 continues to devastate Lebanon’s healthcare system. Not only has the lack of access to healthcare for vulnerable populations (especially women and girls, MDWs and refugees) been further exacerbated by the pandemic, KIIs also reported that **women who have lost their jobs and have no source of income now lack the ability to pay for healthcare**. Lockdown restrictions further limit access to healthcare, especially for refugee women and girls, as travelling to health facilities has become difficult. KIIs noted that women and girls are reluctant to use public transport to seek out services as it exposes them to sexual harassment. Women and girls are also hesitant to solicit sexual and reproductive health (SRH) services due to the increased prices of hygiene products, doctors’ visits and tests, medication and contraceptives, as well as the social stigma around seeking out such services. Where sexual and reproductive healthcare used to be offered, healthcare providers have shifted their attention towards addressing the pandemic.

As Lebanon rolls out its COVID-19 vaccination plan, there are new fears that marginalised communities that have been severely affected by the pandemic (like refugees, stateless persons and MDWs) will not have access to the vaccine. MDWs have been even further restricted from health services as their employers are required to accompany them when they access healthcare and many are already not receiving income, rendering them unable to pay for services they may need. MDWs and refugees have also been perceived by some in the community as carriers of the virus, further alienating and stigmatising them. To date, very little data has been compiled on MDWs’ access to healthcare and how the pandemic has impacted them.

**Gendered response to COVID-19**

The KIIs highlighted specific gaps that, if addressed, could mitigate or eliminate some of the gendered impacts of COVID-19. Despite the pandemic having led to civil society grassroots organising amongst some marginalised groups (for example MDWs) and powerful awareness raising on gender inequality, sexual harassment and VAWG, this has not yet led to women’s, girls’ and LGBTQI persons’ inclusion in decision-making processes at local, regional and national levels.

An additional gap exists with regards to resources. The pandemic, coupled with Lebanon’s economic crisis and the Beirut port explosion, stretched community resources, forcing civil society organisations (CSOs) to **focus on the immediate emergency response which lacks a gendered lens**. Lockdown measures have severely restricted or closed programmes that provide in-person, direct legal services to address gendered issues. This has forced organisations to innovate their services, mostly by shifting their work online. Lebanon’s poor technology infrastructure does not readily support such online services, and findings from the KIIs claim that women’s and girls’ access to the internet is more likely to be limited due to social norms and restricted disposable income. This shift online has also opened up space for more widespread cyberbullying and harassment, which affects women and girls to a greater extent, leading families to favour boys with access to the internet. Furthermore, Lebanon is affected by regular power outages, limiting internet use during these periods to those who can afford a private generator.
Finally, there is a lack of sustainable funding for local civil society groups and women’s rights organisations (WROs) working on gender inequality and providing services to women and girls and the LGBTQI community during the pandemic. Although women and girls in civil society and community-based organisations are providing a gender-sensitive and community-sensitive assessment of needs, they are often ignored by international donors. Donors have not genuinely considered supporting smaller WROs or CSOs in rural areas that are often unable to compete for funding with larger, city-based organisations and, as a result, those smaller organisations are struggling to survive and respond. With more sustainable funding and support for these local organisations, they will be able to advocate and lobby for progressive legislation addressing gender inequalities and sexual and gender-based violence (SGBV), raise awareness for, and provide services to, those suffering from gendered abuses and support marginalised female and LGBTQI voices in decision-making processes.

3. Recommendations

Recommendation 1: Funding for women’s rights organisations and civil society: Donor organisations must integrate their work on gender equality with the challenges raised by COVID-19. Donors should increase funding to provide CSOs, particularly WROs, with flexibility to adapt, and expand their work, to address the local challenges with a gendered lens. Funding should be sustained, long-term and strategic, focusing on WROs outside of Beirut and smaller organisations that may not be well known by the international community. (Full evidence for this recommendation can be found on page 7 in the country report.)

Recommendation 2: Gendered Health Services National Action Plan: National COVID-19 response plans must factor in, and commit resources to, the needs of marginalised communities to provide health services that include primary healthcare, free/subsidised COVID-19 testing, and sexual and reproductive health rights (SRHR) care. The government, along with the international community, should explore the possibility of deploying mobile units to address needs at the community level, specifically the needs of marginalised women and girls. Action plans must task, and fund, local actors, WROs and women-focused CSOs with the responsibility of identifying the needs of the community to set up sustainable and institutionalised solutions for addressing issues related to gender equality. The plan must be inclusive of essential SRHR services and the needs of women and girls. (Full evidence for this recommendation can be found on page 8 in the country report.)

Recommendation 3: Women’s and girls’ meaningful participation: Women’s and girls’ representation, particularly from marginalised communities is critical to identify the needs of the community and to advance a gendered lens while developing action plans and campaigns, particularly during pandemic and crisis response. The international community and donor organisations must lobby for women’s and girls’ meaningful inclusion in assessment, planning and implementation of humanitarian work. Women must be represented in consultation processes, decision-making roles and awareness campaigns with national, international and local actors. (Full evidence for this recommendation can be found on page 9 in the country report.)
Recommendation 4: Gender-based violence prevention, protection and response: The Lebanese government must enhance the institutional response measures to prevent sexual and gender-based violence (SGBV), protect marginalised communities and respond effectively. First responders must also include psychosocial support, shelter, safe spaces and hotlines for victims and survivors of GBV. The Lebanese government must coordinate with local organisations to set up support groups for survivors. Importantly, any SGBV measures must include the voices of women and girls of all affected communities. They must also ensure that the justice mechanisms continue to function during emergencies to enable victims and survivors to report SGBV. The international community must lobby for the government to set up secure online SGBV reporting services where any case of SGBV can be reported to appropriate authorities. (Full evidence for this recommendation can be found on pages 10-11 in the country report.)

Recommendation 5: Critical information about COVID-19 – marginalised communities and access to technology: The Lebanese government must take the following steps to ensure marginalised communities receive essential information on COVID-19 and future health and other emergencies:

- Critical information regarding COVID-19, testing facilities, access to justice and essential services must be disseminated through community outreach, national media and verified profiles on social media platforms.
- Grassroots CSOs must be equipped to disseminate information with a gendered lens to marginalised communities on access to health services and justice.
- Appropriate measures must be taken to prevent misinformation and to hold persons accountable for spreading misinformation.
- The international community and CSOs must collaborate with, lobby for, and offer technical support to the Lebanese government to prepare and disseminate critical information in the form of ‘Know Your Rights’ templates.

The Lebanese government must also ensure that quality internet services are available at reasonable prices for all communities so that they can access essential services. (Full evidence for this recommendation can be found on pages 11-12 in the country report.)

Recommendation 6: Complementary labour and employment legislation and access to justice: The international community must lobby for protective policies that safeguard the rights of women, girls and the LGBTQI community. The Lebanese government must commit resources to enhance access to justice for marginalised communities, including migrant workers and refugee women. Emergency legislation and policy-making must include a gendered lens and protect women and girls against abuse and exploitation at home and at their workplace. It should institute measures to secure the rights of informal workers, protect them against discriminatory policies and abolish the kafala system. (Full evidence for this recommendation can be found on page 13 in the country report.)
Recommendation 7: Social norm change and gender transformative approach including public awareness: International organisations have committed resources by providing cash assistance and hygiene and dignity kits. However, the Lebanese government must proactively challenge social and cultural norms which adversely impact women, girls and gender non-conforming persons, including in accessing SRH needs and unpaid care. These efforts must be made in a sustained and long-term manner through public awareness programmes, gender sensitisation of key stakeholders and targeted policy changes. (Full evidence for this recommendation can be found on page 14 in the country report.)

Recommendation 8: Comprehensive, coordinated and accountable approach: The implementation of national action plans and the international community’s intervention must be monitored for efficiency and opened for public feedback. This would ensure that target communities and affected persons can report service gaps and rights violations. Additionally, the feedback and accountability mechanisms would contribute to bridging the data and knowledge gap on the impact of COVID-19 on different communities. (Full evidence for this recommendation can be found on page 15 in the country report.)

4. Partners

ABAAD – Resource Center for Gender Equality is a UN ECOSOC accredited organisation that aims to achieve gender equality as an essential condition to sustainable social and economic development in the MENA region, comprised of dedicated activists, lawyers, consultants, social workers and researchers. As a leading actor on gender equality in the region, ABAAD is perceived as a reliable reference and partner by the local, regional and international entities that promote gender equality, peacebuilding and sustainable development.

Gender Action for Peace and Security (GAPS) is the UK’s women, peace and security (WPS) civil society network. It is a membership organisation of NGOs in the fields of development, human rights, humanitarian assistance and peacebuilding. It was founded to promote WPS, including United Nations Security Council Resolution (UNSCR) 1325. GAPS promotes and holds the UK government to account on its international commitments to women and girls in conflict areas worldwide.

Legal Action Worldwide (LAW) is an independent, non-profit organisation comprised of a network and think tank of prominent human rights lawyers and advisors. LAW provides innovative legal assistance to the least represented people in fragile and conflict-affected states. LAW has been at the forefront of the fight against gender inequality and VAWG in Lebanon, providing legal assistance, representation and awareness to thousands of vulnerable women and girls.

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