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Cover photo: “I am aware of the cleaning tools included in the kits, we use them for several purposes such as cleaning the floor, dishes, ourselves and everything,” Lamia, nine. ©World Vision
**GLOSSARY**

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>CARE</td>
<td>Cooperative for Assistance and Relief Everywhere</td>
</tr>
<tr>
<td>CM</td>
<td>Community Mobilizer</td>
</tr>
<tr>
<td>CP</td>
<td>Child Protection</td>
</tr>
<tr>
<td>FGD</td>
<td>Focus Group Discussion</td>
</tr>
<tr>
<td>GBV</td>
<td>Gender Based Violence</td>
</tr>
<tr>
<td>GWI</td>
<td>Global Women's Institute</td>
</tr>
<tr>
<td>IRC</td>
<td>International Rescue Committee</td>
</tr>
<tr>
<td>ITS</td>
<td>Informal Tented Settlement</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Governmental Organization</td>
</tr>
<tr>
<td>PoDQ</td>
<td>Point-of-Distribution Questionnaire</td>
</tr>
<tr>
<td>SEA</td>
<td>Sexual Exploitation and Abuse</td>
</tr>
<tr>
<td>SMS</td>
<td>Short Message Service</td>
</tr>
<tr>
<td>WaSH</td>
<td>Water and Sanitation Hygiene</td>
</tr>
<tr>
<td>WVL</td>
<td>World Vision Lebanon</td>
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</tbody>
</table>

“All we ask for is respect during a distribution. Waiting in the same line as men is not appropriate based on our traditions. Sometimes we get pushed, or even harassed,” explains 50-year-old Fatima. ©World Vision
In May 2022, World Vision Lebanon (WVL) distributed 2,762 disinfection kits to a targeted group of Syrian refugees residing in informal tented settlements (ITS) in Bekaa Governorate, Lebanon. This not only supported needs identified by the humanitarian response but was also part of Empowered Aid’s efforts to reduce sexual exploitation and abuse (SEA) in aid distributions by identifying risk factors (Phase 1) and building evidence on safer distribution mechanisms and monitoring (Phase 2).¹

Specifically, the disinfection kits distribution was designed using recommendations made by Syrian refugee women and girls during Phase I of the Empowered Aid study, in which they identified and described the SEA risks they face when accessing distributions as well as ways to minimize these risks.² WVL applied four of the recommendations made by Syrian refugee women and girls during Phase I of the Empowered Aid study for safer aid distributions. The applied recommendations were: 1) assigning times for groups of families to collect distributions, 2) delivering aid at household level, with at least two aid workers in mixed-sex or all-women teams, 3) involving more women aid workers or women’s committees in distributions, and 4) sensitizing community on GBV/SEA including SEA complaint mechanisms. With the onset of COVID-19, we expanded the distribution design and monitoring to better capture the pandemic’s effects on women and girls’ access to information, concerns related to SEA and other forms of violence, and knowledge of reporting mechanisms and services—at a time when refugee communities had few other avenues for communicating this information with aid actors.

Three tools were used to monitor the distribution. During the distribution, WaSH staff carried out 56 of the observational safety audit, conducted 8 Focus Group Discussions (FGDs), and trained data collection volunteers who collected 294 point of distribution questionnaires (PoDQs). FGDs took place, with men and women separated, as well as separated by Syrian and Lebanese people. This report shares the summary of findings from all three tools. Detailed findings from the safety audit, point-of-distribution questionnaire, and focus group discussions are reported separately. Taken together, they provide recommendations for improving this specific distribution as well as general information that can be used by all distribution actors to improve the safety of aid recipients (particularly women and girls).

OVERVIEW

For more information about Empowered Aid, visit empoweredaid.gwu.edu. Findings from the first phase in Lebanon can be found in the report online here: https://empoweredaid.gwu.edu/lebanon-0. ² See the recommendations within Empowered Aid’s policy brief on reducing SEA risks in food distribution, as well as within the main results report for Lebanon.
METHODOLOGY

Point-of-Distribution Questionnaire (PoDQ)

The PoDQ is designed to understand the challenges refugee women and girls are facing under COVID-19 and explore how to be more responsive to those challenges in distributions and programming. Questionnaire data was collected from May to July 2022. To ensure random selection, every fourth woman recipient was asked if she would like to participate in the questionnaire. The average time of each interview was 25 minutes. Overall, 208 (70.7%) of participants were residing in Barelias, 78 (26.5%) in Ain Kfarzabad, and the remaining 8 women (2.7%) were living in Kfarzabad. Respondents ranged from 18 to 74 years old with an average of 39 years of age, and 79% of them were married.

Safety Audit

Empowered Aid and World Vision Lebanon teams adapted the safety audit from an existing tool used by aid actors such as Cooperative for Assistance and Relief Everywhere (CARE) and International Rescue Committee (IRC). Empowered Aid trained staff how to safely and systematically conduct safety audits. A total of 56 safety audits were carried out in each distribution location by WVL staff. The safety audit is an observational tool that can be conducted while maintaining social distance and provides a systematic way in which to record structured observations of aid processes.

Focus Group Discussion

Focus group discussions (FGDs) were held during June and July 2022 with adult participants who attended the disinfection kit distribution in Central Bekaa. Accordingly, WVL MEL and GESI Coordinators conducted eight focus group discussions with randomly selected six to ten Syrian and Lebanese women and men participating in the distribution in different areas within Central Bekaa.

The total number of participants reached through the FGDs is segregated in Table 1:

The methodology builds on Empowered Aid’s resources and tools developed and field-tested in five countries to date, as outlined in the “Empowered Aid Toolkit for Planning and Monitoring Safer Aid Distributions.”

TABLE 1: Participants of FGDs segregated by nationality, location, sex and marital status (where applicable).

<table>
<thead>
<tr>
<th>FGD #</th>
<th>Nationality</th>
<th># of Attendees</th>
<th>Distribution Location</th>
<th>Gender and Marital Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Syrian</td>
<td>10</td>
<td>Terbol 104</td>
<td>Women</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>8</td>
<td>Barellas 179</td>
<td>Women</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>8</td>
<td>Taminne El Tahta 068</td>
<td>Women</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>8</td>
<td>Haouch El-Ghanam 009</td>
<td>Men</td>
</tr>
<tr>
<td>5</td>
<td>Lebanese</td>
<td>8</td>
<td>Barellas</td>
<td>Married women</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>6</td>
<td>Barellas</td>
<td>Married men</td>
</tr>
<tr>
<td>7</td>
<td></td>
<td>9</td>
<td>Ain Kfarzabad</td>
<td>Married and single women</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>9</td>
<td>Ain Kfarzabad</td>
<td>Married and single men</td>
</tr>
</tbody>
</table>
Information sharing and communication mechanisms

‘Shawish’ is the term used for an ITS leader, typically a Syrian community leader who acts as a gatekeeper of information about aid distributions and other important events. Shawishes are the primary brokers between refugees living in ITS and aid workers, municipal officials, employers, security agents, or journalists. Therefore, the Shawish is an important holder of information and power. In addition to the Shawish, information should be disseminated to other sources, especially women’s committees, to help share power and information with the community.

Safety audit results revealed that the Shawishes were the focal points for communicating distribution information in all distribution sites. Prior to distribution, Hygiene Promotion team of the WaSH sector at WVL communicated with the Shawishes who, in turn, verbally communicated the time and date of distribution to the aid recipients. This information is communicated at least a day before the distribution, depending on the availability of the Shawish and the beneficiaries.

More than half of PoDQ respondents (67%, n=197) reported receiving information about distribution through aid workers. The remaining reported receiving information through community leaders (e.g., Shawish) (19%, n=56), followed by friends or family (15.6%, n=46). Moreover, the majority of PoDQ participants find receiving information through aid workers (93.2%, n=274) the most effective and useful method, followed by community leaders (10.2%, n=30), and friends or family (3.1%, n=9).

Similarly, all Syrian FGD participants heard about the distribution from the Shawish, directly before the distribution. Syrian women explained that aid organizations need to coordinate more closely with Shawish to share information.
On the other hand, Lebanese FGD participants were informed through a call by WVL one day before. All participants agreed that the information should be shared at least a day before: Syrian participants through the Shawish and Lebanese through a call and SMS. In addition, they asked to have more female representation in the Syrian community responsible of information sharing.

Information is power, especially information about how to receive aid, thus it is important to consider how, and through whom, information is communicated and/or gathered. As highlighted in our recommendations, using multiple and varied points for information sharing and communication (i.e., people, women’s organizations, hotlines, SMS, billboards, dramas, etc.) rather than concentrating information in one or a few interlocutors is one way to minimize SEA risk.

**Who do information mechanisms reach most?**

During the FGDs, all participants agreed that women were more likely to hear about distribution than men. In addition, PoDQ respondents stated that women and girls are most likely to hear information communicated (94.9%, n=279), followed by men and boys (5.1%, n=15). A high percentage of respondents (85.7%, n=252) said men and boys are least likely to hear about information on the distribution, while 13.9% (n=41) said women and girls.

They mentioned various reasons why men are least likely to receive information, including having a missing husband, husband is in jail or at work, followed by husband feeling shy or even humiliated when informed about hygiene related distributions.

Further, Syrian women participating in the FGD noted that most of the time, women receive hygiene and food aid, whereas men receive monetary aid.

**Measures at distribution site**

Safety audit findings show that COVID-19 precautionary measures were respected through ensuring proper distancing and dividing beneficiaries in groups of 5 for large ITS where the number of ITS residents was 500 or more. Additionally, COVID-19 awareness sessions addressing COVID-19 transmission routes and precautionary measures have been previously disseminated in selected ITS. The majority of distributions were conducted at the ITS yard or at the reception tent; hence, the areas were not defined in a rope or wooden fence.

All distribution sites were clean and organized, and sex-segregated lines were adopted (at 42 sites), except for small ITSs where the vast majority of recipients were females (safety audit).

Safety audits show that staff and volunteers at all distribution sites behaved appropriately and respectfully to aid recipients, with no reports of disrespectful or inappropriate behavior. In addition, all aid recipients received the agreed upon aid in terms of type and...
quantity, there was no discrimination observed by age, sex, or disability. Safety auditors noted that distributions were calm and organized. This was confirmed by all FGD participants who expressed satisfaction toward the way they were treated at the distribution site by WVL team. They added that they were treated with respect, calmness and fairness. Participants also mentioned that they were helping each other when someone has special needs.

“"I would give them 10/10. They respected all persons, especially the elderly and [they were] given priority” – Lebanese man participating in focus group discussion

“We were called by [our] names, whenever we are called, we receive the hygiene kit and leave” – Syrian woman participating in focus group discussion

Syrian participants, both male and female, noted that the process was quick, and they did not wait long to receive aid. However, Lebanese female groups reported waiting in long lines to receive aid.

“"We had to wait for a long time, I was informed to be present at 11:00 AM to receive the aid, however I waited till 2:00 PM” – Lebanese woman participating in focus group discussion

On the other hand, as distributions took place mostly at the ITS yards or reception tents, there were no latrines specified for the distribution site (safety audit). Accordingly, safety auditors noted that latrines that were available were not sex-segregated nor accessible for persons with disability but are used by families. Persons with special needs were given priority in distribution as indicated by safety auditors. These included elderly persons, persons with physical disability, and pregnant and lactating women. It was noted at one distribution site that one female beneficiary had a physical disability and was using a crutch, she was given priority in distribution; however, transportation aid was not provided by WVL team, which constitutes an area for improvement.

Furthermore, Syrian women who participated in FGD reported that they did not face any challenge to transport the items home; They explained that because the items were not heavy, and individuals could carry them easily. They did not have issues with storage since the quantity was manageable. Other groups reported that they transport items home using their cars, Tuktuk or taxi. On the other hand, Lebanese women said that vulnerable groups, such as elderly, have trouble transporting aid and need help to carry aid to their cars. Lebanese men participating in FGDs said aid can be difficult for women to transport because it is heavy, although some did not agree.

Safety at distribution

Out of 294 women responding to the PoDQ, 70% said they felt safe at distributions, while 28% said they felt a lack of safety. Reasons for lack of safety included physical/verbal fighting and theft (27%), COVID-19 exposure (21%), SEA (13%), and Gender Based Violence (GBV) (7%).
Syrian and Lebanese women reported feeling safer due to sex-segregated lines and more female staff present at distributions (focus group discussions), and the safety audit reported that 75% of distribution sites had sex-segregated lines, and 88% distribution sites had female staff present.

Traveling to and from the distribution were cited in FGDs as risky for women and girls’ safety, as well as the second and third point in the distribution where respondents reported feeling the least safe (PODQ, Figure 1). Syrian women participating in the FGDs reported not leaving the ITS because they fear theft and kidnapping, and Syrian men agreed and reported accompanying women outside the ITS as women trust them for having shared values.

“Previous distribution was not organized, and women were exposed to danger. There was verbal abuse and a little bit of violence. When I saw this scene, I left the location.” – A woman PoDQ respondent

“This distribution is more organized than the previous one. I felt safe.” – A woman PoDQ respondent

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COVID-19 related violence

Respondents listed violence or abuse that women and girls are facing, may be linked to the COVID-19 pandemic and humanitarian response. Figure 2 shows that, according to participants, the most frequent type of violence or abuse is early/forced marriage (48.3%, n=142), followed by intimate partner violence (44.6%, n=131), then emotional and psychological abuse (30.6%, n=90).

**FIGURE 2: Abuse/ violence related to COVID-19 (multiple choice question)**

<table>
<thead>
<tr>
<th>Type of Violence or Abuse</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early/forced marriage</td>
<td>48.3%</td>
</tr>
<tr>
<td>Early/adolescent pregnancy</td>
<td>24.8%</td>
</tr>
<tr>
<td>Rape</td>
<td>7.8%</td>
</tr>
<tr>
<td>Sexual assault</td>
<td>6.1%</td>
</tr>
<tr>
<td>Intimate partner violence</td>
<td>44.6%</td>
</tr>
<tr>
<td>Sexual harassment and assault</td>
<td>3.4%</td>
</tr>
<tr>
<td>Economic abuse</td>
<td>13.9%</td>
</tr>
<tr>
<td>Emotional/psychological abuse</td>
<td>30.6%</td>
</tr>
<tr>
<td>None</td>
<td>17.3%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>2.0%</td>
</tr>
</tbody>
</table>

“Women cannot speak. Husbands beat their women, and if wives talk they can get divorce, I’ve been there.” — A PoDQ female respondent

“My husband is not working due to COVID-19 and this stresses him since he does not have money to cover our children needs. When the kids make noises, he gets upset easily and asks me to silence them, but how can I distract them if we are not able to get them anything? I go to my parents’ house, and sometimes he hits me and the neighbors hear us and get worried about me.” — A Syrian female participant in focus group discussions

Respondents in both PoDQ and FGDs with Syrian women mentioned that the dire economic situation made violence and abuse worse during COVID-19 pandemic and response. Syrian women participants in the FGDs added that due to COVID-19 pandemic men were unemployed and families were in bad financial situations. Participants drew a line of association between these situational factors and an increase in physical abuse on wives. One Syrian men’s group and one Syrian women’s group said that they did not witness any violence related to COVID-19.

The above was also confirmed during the FGDs conducted with Lebanese men and women. They reported stress resulting from the pandemic, which impacted their mental health and consequently
raised the tension at household level. One Lebanese female group mentioned physical abuse resulting of the husband staying at home due to unemployment. Lebanese women also expressed that COVID-19 affected them physically and mentally; even when they are infected and tired, they need to take care of the children and the husband.

“I had to do my chores even when infected with COVID-19, I was not able to take care of myself, I had to take care of my children and husband.” – A Lebanese woman taking part in the FGDs

Sexual Exploitation and Abuse Risks

Around 5% of PoDQ respondents as well as Syrian and Lebanese women participating in the focus group discussion reported seeing or hearing of SEA at distributions. All cases were investigated and received referral information upon sharing, as directed by Child and Adult Safeguarding Policy and in full adherence to participant’s preferences. Those who had seen or heard about SEA (PoDQ) shared the following details about several instances they identified:

1. One of the instances occurred during a food aid distribution, perpetrated a UN/ NGO staff.

2. Three instances were related to other type of aid: one happened with a woman living in another ITS; the second was rather related to the location, as the participant added “men on the road are dangerous.

3. A woman heard about a SEA case but did not know any details about it.

In two focus groups, Syrian and Lebanese women explained that taxi drivers may perpetrate SEA, so they will only travel in taxis or cars with drivers and companions they know. A group of Syrian women mentioned that some NGO staff perpetrate financial exploitation, requesting money in exchange for aid, but they did not hear about sexual exploitation and abuse from NGO staff. Syrian and Lebanese men who participated in the FGDs reported that they had not seen or heard of SEA.

“I had to do my chores even when infected with COVID-19, I was not able to take care of myself, I had to take care of my children and husband.” – Syrian woman participating in focus group discussion

FGD participants believe that SEA incidents should be reported to husbands, fathers, family members or NGO staff. All groups expressed that survivors may not seek help due to blame, shame, lack of family or community support, “scandal,” fear of abuser, and/or the concern of not being able to access aid. Groups also expressed confusion between the hotlines and lack of follow up as reasons not to report.
In addition, some comments were raised regarding having a husband in the household. According to some PoDQ respondents, a lack of husband figure in the household is believed to be a risk factor to sexual exploitation and abuse.

“Women whose men are not present are asked for sexual favors in order to get a job for their children.” – A woman PoDQ respondent

Complaints and reporting

Women respondents of the PoDQ and women and men in the FGDs reported a lack of trust in reporting mechanisms, as they fear backlash from NGOs, family, or community which prevents reporting. Almost eight percent (n=22) of PoDQ respondents said they would not report to anyone and preferred to remain silent. Conversely, more than half of PoDQ respondents (50.7%, n=149) think that women and girls feel most safe or comfortable reporting complaints, giving

“Women’s rights are not respected; women should defend themselves alone.” – Female PoDQ respondent residing in Barelias

“The main issue is to believe her; if she report such incidents, he might be a good communicator who is able to defend himself. So she might not find anyone able or willing to listen to her, understand her and hold the abuser accountable.” – a Lebanese woman participating in the focus group discussion

The WASH team in Bekaa distributing bleach and sanitizers to the refuges and explains the safety measures they should do to prevent the spread of COVID-19. © World Vision
feedback, and accessing services with World Vision staff (refer to Figure 3).

Further, World Vision staff were the most common people to whom PoDQ respondents would report complaints and seek support, with 42.9% (n=126) of women selecting this option. In other places, respondents said they could report complaints and obtain support included reporting to a trusted relative or friend, other NGOs, UN, community group, and community-/faith-based leader.

Some PoDQ respondents who said that they would not report to anyone also mentioned that they would choose to remain silent if their first attempt at reporting to another source was unsuccessful. This was also reported by focus group discussions with Lebanese women. Many respondents who said that they would not report to anyone also cited Religion as their only source of support. Other reasons respondents shared for choosing not to report include having social fear and feeling ashamed for needing assistance.

“I don’t talk to anyone but to a friend who is far away so that there are no problems with my family, and I have children. I have stress from the repression.” – Female PoDQ respondent living in Barelias

**FIGURE 3:** Safe or comfortable reporting lines according to respondent (multiple choice question)

Places where women and girls feel most safe or comfortable reporting complaints, giving feedback, and accessing services (N=294)
Continue to implement SEA risk mitigation measures and safety recommendations like sex-segregated lines and gender-balance on distribution teams with female staff present at all times, particularly as participants validated their effectiveness to increase safety during the distribution.

Focus on safety and accessibility at the distribution and traveling to and from the distribution, mainly through:

1. Increasing the presence of female staff at distribution sites
2. Ensuring trained staff are present to identify and monitor safety
3. Separating distribution participants into different groups and assigning different times to groups to reduce crowded lines
4. Ensure that the distribution site is accessible, and safe for women, men and PWD
5. Specifying lines for people with disability and special needs and making wheelchairs available for those who need accommodations and accessibility for other types of disabilities
6. Exploring ways to provide transport support or formal/informal accompaniment systems, particularly for unaccompanied or vulnerable women and girls
7. Identifying ways to support transport of heavy aid items, particularly for PSNs. Findings also suggest to have female staff accompany female participants while transporting the aid back home
8. Coordinating with child protection team at WV to create a safe space for children with their caregivers (children activities)
9. Providing first aid kits at all distribution sites
10. Address issues of staff impersonation by showing clear visibility at distribution sites (vest, ID, banners, etc.) and including a section in the information session about identifying humanitarian staff on field and on phone through recognizing different visibility methods. In addition, accountability and monitoring visits to be conducted periodically
11. Address issues of financial exploitation of staff members and service providers by building their capacities on financial exploitation prevention including fraud, and ensuring their signing on the safeguarding, PSEA, and antifraud policies
12. Address the increase in gender-based violence in crisis by making sure that gender responsive referral system is available, accessible, and that participants are aware of it
Improve complaint/reporting mechanisms to build confidence amongst the community through utilizing multiple and diverse methods for sharing information and receiving complaints along with setting up help desks at distribution sites. Creating clear SEA feedback mechanism and awareness raising is suggested to guide distribution participants on how to file complaints related to sexual assault.

Provide safeguarding support to women to help them to understand their rights and the reporting mechanisms for complaints with the goal of helping build confidence to report issues of safeguarding during their participation.

Provide equitable information sharing on distributions, contents and wait of the kits through Community Mobilizers (CMs), while making sure right holders are informed a day or two before the distribution.

Expand ways of working with communities to prevent early/forced marriage and intimate partner violence, in addition to raising awareness on SEA and GBV and its impact on the community. Following the SEA SoP at cluster level and revising WVL safeguarding, and WaSH SoPs is needed. Training suppliers on safeguarding, Child Protection (CP), SEA, and GBV, as well as regular training of WVL staff on SEA are suggested.

Distributing aid to Syrian community at ITSs, with Shawish/trusted member from the community being present at the distribution.

Providing lockable latrines at distribution sites, accessible to people with special needs and disability.

Creating WaSH committees that aim to identify risks and needs related to wash in the ITS and work in coordination with WVL to mitigate the risks and address the needs. In addition, periodic consultations with these committees to be held to involve them in the project and showing visibility at distribution sites for future distributions highlighting the accountability information, hotline, the rights, etc.

Appoint PSEA Champions from the community and build their capacities on GBV/PSEA and reporting mechanism to raise awareness sessions about PSEA and the Reporting mechanism and encourage community to report SEA incidents.
The WASH in Beqaa, distributing bleach and sanitizing products to Syrian refugee. © World Vision

CONTACT INFORMATION

Chourouk Kouteich
Gender Equality and Social Inclusion (GESI) Coordinator at World Vision Lebanon
chourouk_kouteich@wvi.org

Charbel Chidiac
Program Development and Quality Director Field Operations, at World Vision Lebanon
charbel_chidiac@wvi.org

Alina Potts
Empowered Aid lead and Research Scientist at the Global Women’s Institute
apotts@gwu.edu