

EMPOWERED AID

PHASE 2 PILOT REPORTS IN LEBANON

Applying findings from
participatory research on how
to reduce sexual exploitation
and abuse in aid distribution

JULY 2021



The Global
Women's Institute

THE GEORGE WASHINGTON UNIVERSITY

Lebanon partners:



اتحاد الجمعيات الإغاثية و التنمية
Union of Relief & Development Associations

About Empowered Aid

Empowered Aid: Transforming Gender & Power Dynamics in Aid Distribution is a three-year project that aims to reduce the risks that may lead to sexual exploitation and abuse (SEA) in aid distributions. The project utilizes participatory action research methods to engage women and girls throughout and apply their knowledge on how to better understand and prevent SEA. In the first year of Empowered Aid, the Global Women's Institute (GWI) partnered with the International Rescue Committee (IRC) in Uganda, and with CARE International in Lebanon, to engage refugee women and girls from South Sudan and Syria (respectively) in documenting and addressing SEA risks they and their peers face when accessing food, WASH, shelter, fuel and firewood, and cash and voucher assistance. The risks they identified, and their prioritized recommendations for aid actors to improve their safety in aid distribution processes, are shared in a series of reports and sector-specific briefs available on the Empowered Aid [webpage](#). In the second phase of Empowered Aid, the recommendations that women and girls made during Phase 1 were applied to aid distributions, and monitoring and evaluation (M&E) tools were adapted to better measure SEA risks.

The Research Team

The Global Women's Institute (GWI) of the George Washington University, CARE International in Lebanon, and the Union of Relief and Development Associations (URDA) in Lebanon, worked together to design and implement pilots conducted during Empowered Aid's second phase (2020-2021). These reports were collaboratively analyzed and written by Alina Potts, Angela Bourassa, Amelia Reese Masterson, and Elizabeth Hedge in the U.S., and Loujine Fattal, Farah Hallak, Tala Chammas, Dima Ghazal, Samah Antar, Moustafa Abdo, and Mohammad Birini in Lebanon.

These reports summarize the findings from the post-distribution monitoring conducted during and after the food and dignity kit pilots held in Lebanon during Empowered Aid's second phase (2020 – 2021). Special thanks goes to the refugee community members who participated in the post-distribution monitoring activities as well as our Syrian refugee women and girl co-researchers, who evolved their role from the first year of research to form Refugee Women & Girls Advisory Boards for the implementation science phase of the research. *The research team also benefited greatly from support to the research process from the following groups:*

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Further Resources:

Further resources from Empowered Aid's work in Uganda and Lebanon — including Phase 1 and Phase 2 reports, policy briefs, facilitation manuals, toolkits, presentations, and webinars — can be found at globalwomensinstitute.gwu.edu/empowered-aid-resources. For questions, contact Alina Potts, Principal Investigator, at [apotts \(at\) gwu.edu](mailto:apotts@gwu.edu).

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TOOLKIT FOR PLANNING & MONITORING SAFER AID DISTRIBUTIONS AND SHARED FOLDER FOR TOOLKIT RESOURCES:

The distribution monitoring tools used in the Empowered Aid pilots, the toolkit and shared drive of additional resources and templates to support toolkit users is available at the following links:

Toolkit: <https://globalwomensinstitute.gwu.edu/empowered-aid-resources>

Shared Drive: <https://gwu.box.com/s/8b9cfloemunjqd6gwrbae1ioss7vwse>



Section 1:

Empowered Aid Lebanon Fuel Voucher Distribution

Pilot Reports



Empowered Aid Lebanon – Fuel Distribution Pilot 1

Summary Report

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Introduction

Empowered Aid: Transforming Gender & Power Dynamics in Aid Distribution is a three year project that aims to reduce the risks that may lead to sexual exploitation and abuse (SEA) in aid distributions. The project utilizes participatory action research methods to engage women and girls throughout, and apply their knowledge on how to better understand and prevent SEA. In the first year of Empowered Aid, the Global Women's Institute (GWI) and the CARE International in Lebanon worked with Syrian refugee women and girls to document SEA risks when accessing food, WASH, shelter, and cash assistance, and share recommendations on how to improve their safety and reduce feelings of fear in aid distribution processes.¹

In the second phase of Empowered Aid, GWI is working with the NGOs CARE and URDA, to adapt distribution monitoring tools that more proactively identify and address risks for sexual exploitation and abuse (SEA). These tools build on the findings from Empowered Aid's first phase, which identified ways in which the distribution processes can put women and girls at risk of SEA, and how to mitigate those risks.

Individual monitoring reports are also available for each of the tools used in the fuel pilot:

- Safety audits;
- Household survey

These reports include detailed methodology on how each tool and the research team was prepared for data collection. Contact Loujinefattal (at) careliban.org or APotts (at) gwu.edu for more information. <https://globalwomensinstitute.gwu.edu/empowered-aid>.

¹ For more information about Empowered Aid, visit <https://globalwomensinstitute.gwu.edu/empowered-aid>. Findings from the first phase in Uganda can be found in the report online here: <https://globalwomensinstitute.gwu.edu/empowered-aid-resources>.

Overview of the Distribution and Methodology

In February and April 2020, URDA, CARE Lebanon, and the Global Women's Institute conducted two fuel voucher distributions to a targeted group of 132 Syrian refugee households in Akkar who met UNHCR vulnerability criteria. This not only supported needs identified by the humanitarian response but also was 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). These distributions meet recognized humanitarian response gaps while also piloting new distribution modalities based on the SEA risk reduction recommendations provided by Syrian women and girls during Phase I of the Empowered Aid study.² The first fuel voucher distribution on February 20, 2020 was carried out normally, as a targeted mass distribution. The second fuel voucher distribution was delayed, due to the onset of the COVID-19 pandemic, from March to April 3, 2020, and was carried out among the same population piloting a "door-to-door" approach in which vouchers were distributed directly to each household.

The beginning of the COVID-19 pandemic in Lebanon caused delays to the onset of monitoring, as planned in-person training by GWI was adapted to remote modalities. However, the 'door to door' distribution modality recommended by women and girls in Phase 1 and applied to the March 2020 distribution was not changed, as it aligned with COVID-19 health and safety restrictions. Personal protective equipment (PPE) and social distancing guidance were utilized, and the methods for distribution monitoring were also adapted. The research team decided to move forward with plans to distribute the second batch of fuel vouchers despite the inability to collect all the data intended, in order to prioritize providing assistance amidst the pandemic and economic crisis. Accountability to women, girls, and other refugee community members was ensured through a lighter-touch distribution monitoring plan: FGDs were dropped due to COVID-19 regulations, and the team shortened the household survey as well as conducted it over the phone. The safety audit, an observational tool, allowed for safe data collection.

LEARNING SPOTLIGHT: COVID-19 Adaptations to Monitoring SEA in humanitarian aid distributions

With the onset of the COVID-19 pandemic between the normal and adapted distribution, it is important to note that some of the challenges reported in the distribution monitoring reports may reflect the strict conditions of Lebanon's 'general mobilization state' (put in place to limit the spread of COVID-19) rather than challenges specific to the distribution being monitored. This report shares findings from the post-distribution phone survey and the safety audit. 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) in the context of COVID-19 lockdowns and other restrictions.

² See the recommendations on page 14 of the Empowered Aid [Lebanon Country Report](#).

FIGURE 1. FUEL VOUCHER DISTRIBUTION SUMMARY				
TYPE OF DISTRIBUTION BEING PILOTED	TARGETED MASS DISTRIBUTION ('NORMAL')		DOOR-TO-DOOR DISTRIBUTION ('ADAPTED')	
LOCATION OF DISTRIBUTION	BEBNINE (38), BIREH (40) AND TRIPOLI (54)		BEBNINE (38), BIREH (40) AND TRIPOLI (54)	
DATE OF DISTRIBUTION	20 FEBRUARY 2020		3 APRIL 2020	
# OF PEOPLE REACHED	132		132 (SAME PEOPLE)	
DISTRIBUTION MONITORING CONDUCTED	6 OBSERVATIONAL SAFETY AUDITS	20 FEBRUARY 2020	3 OBSERVATIONAL SAFETY AUDITS	3 APRIL 2020
	76 (58% OF TOTAL RECIPIENTS) PHONE HOUSEHOLD SURVEY (HHS) INTERVIEWS POST-DISTRIBUTION	26 MARCH – 14 APRIL 2020	72 (55% OF TOTAL RECIPIENTS) PHONE HOUSEHOLD SURVEY (HHS) INTERVIEWS POST-DISTRIBUTION	25 APRIL – 27 MAY 2020
COVID-19 SITUATION	PRE-COVID-19		DURING COVID-19	

Reducing SEA Risk at Distributions: Analysis of Feasibility, Acceptability and Effectiveness

To better understand the feasibility, acceptability, and effectiveness of the adapted distribution model, we analyzed data from across the two types of post-distribution monitoring conducted. Results are summarized here, as well as details on how well the adapted monitoring tools developed by Empowered Aid were able to capture women and girls' perceptions of safety and risk in relation to SEA, GBV, and accessing fuel assistance.

Feasibility of the adapted distribution model

In January of 2020, GWI, CARE, and URDA began planning the fuel voucher distributions and decided to look at the feasibility of implementing the door-to-door distribution modality as recommended by the women and girls during Phase I. Prior to the distributions, GWI and CARE lead the research and data collection teams through trainings on gender, GBV, and SEA as well as trainings on the newly adapted tools to ensure that all members of the team were comfortable with the new questions on safety and risk. The first distribution of fuel vouchers took place in February, a targeted mass distribution, was organized under the usual standards and practices URDA uses for its distributions. The second distribution that took place in April – a second round of fuel vouchers – utilized the door-to-door distribution modality, within which URDA staff distributed the voucher directly to aid recipients at their homes.

The phone survey conducted after each distribution indicated that the door-to-door distribution modality was feasible to execute, even during COVID-19. In comparison to the 'normal' or non-adapted distribution,

fewer logistical resources, such as transportation and venue rental, were required. Challenges associated with travel to and from the distribution point were also reduced. Given the circumstances of COVID-19, the door-to-door distribution was preferable to some to meet social distancing and non-congregant requirements in Lebanon. Also in the household survey, both men and women reported restrictions on movement, though reasons for restricted movement differed by sex, as listed in the figure below. When asked in general what things restrict their freedom of movement (not specific to COVID-19), men and women had statistically different responses across the board. Men reported being restricted by both COVID-19 response (90%) and by their financial situation or lack of work (83%). Women also reported these reasons for restriction, but to a lesser degree. Women further cited constricted movement due to cultural practice (20%), lack of transportation (25%) and security restrictions (33%). Women expressing significantly lower levels of restricted movement both before and during COVID-19. A door-to-door distribution is more feasible in the context of this restricted movement, particularly for women and girls.

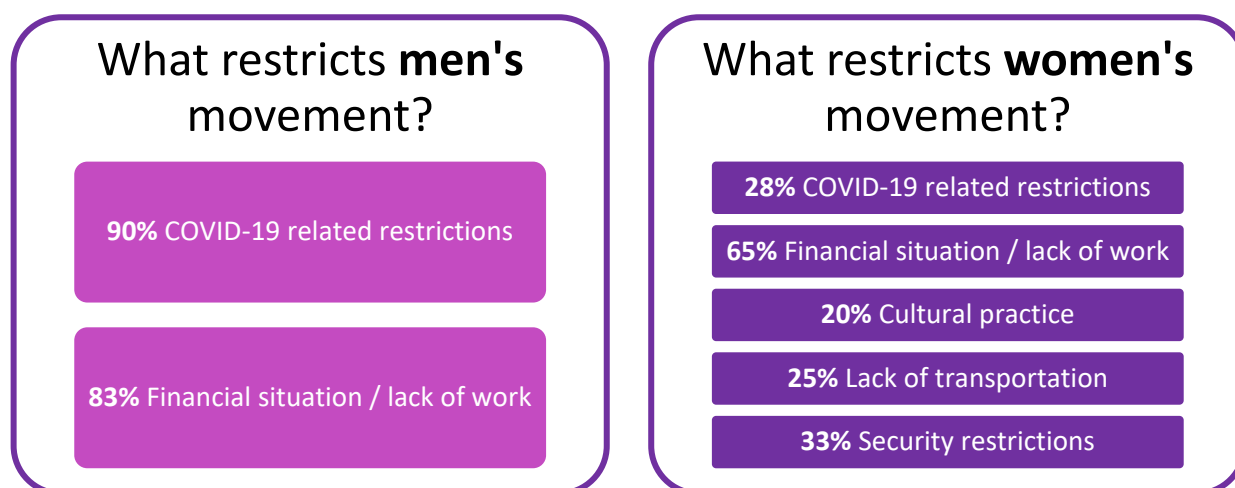


Figure 1: Reported reasons for movement restriction amongst male and female respondents of the household survey

Acceptability of the adapted distribution model

Based on the household survey results, satisfaction was greater at the door-to-door distribution than at the non-adapted, mass distribution. 56% of female aid recipients were satisfied with all aspects during the non-adapted distribution, while 90% were satisfied with all aspects during the door-to-door distribution. The research team also deployed mixed-gender teams when entering refugees' homes, another recommendation women and girls shared during the Phase 1 research that would increase their feelings of safety during at home aid distributions, and thus likely increased acceptability amongst female aid recipients. Having mixed-gender teams can reduce SEA risk for female aid recipients, particularly towards vulnerable groups such as widows and single women. During the adapted distribution, safety audits at all locations reported active measures taken to prevent or mitigate SEA, such as sharing the feedback hotline with the voucher, explicitly saying that vouchers were free, and distributing a list of places where the voucher could be redeemed. The door-to-door distribution modality therefore allowed

for female aid recipients to avoid challenges they may face going to and from and at a distribution, such as transportation or overcrowding, and thus can reduce their exposure to SEA.

“This way of distribution [door-to-door] is better. Actually, I was able to take care of my children and even I didn't have money for transportation” – Syrian woman living in Lebanon as a refugee

Effectiveness of adapted distribution model at increasing women and girls' safety

Within Empowered Aid's objectives, effectiveness refers to whether the adapted distribution modality results in the target group (women and girls) reporting greater perceived safety, and/or lower perceived risk, when accessing aid. Within this fuel pilot, the post-distribution monitoring tools were adapted to measure women and girls' perceptions of SEA risk at the distribution sites, and whether the adapted model – door-to-door distributions – would impact feelings of safety. According to the safety audits and household survey, the adapted distribution modality may have mitigated an increase in fear during COVID-19 among women and girls' safety (low perceived SEA risk among female respondents). Safety measures observed to be effective by aid recipients (household survey respondents) in the door-to-door distribution (HHS) included the door-to-door modality (53%), female distribution workers (3%), and female volunteers (4%).

The household survey found that overall fear increased significantly from the mass to door-to-door distribution, with women reporting higher baseline levels of fear than men. This increase was only significant in men, and not women. The increase was likely related to the dramatic changes wrought by the onset of COVID-19 and the deepening economic crisis in Lebanon. During voucher redemption, the level of fear increased overall between the first (non-adapted) and second (adapted) distributions. When broken down by sex, this increase in fear is significant for men (30% to 79%), and stayed the same for women (65% to 65%). When broken down by sex, the increase for men is significant (55% to 81%), and the increase for women is not significant (63% to 74%).

In both the distribution and redemption of fuel vouchers, women reported a higher baseline level of fear, and were less likely to report increased fear with the onset of COVID-19 and the worsening economic crisis between normal and door-to-door distribution, as compared to men. We know that men's freedom of movement has become more limited, which may contribute to their increased fear. Additionally, because men had a lower 'baseline' of fearfulness around distributions, they may have been more susceptible to new fears due to the changing circumstances of COVID-19 and worsening economic conditions, in comparison to women who already held a higher 'baseline' of fear around safely accessing distributions. The change in distribution modality from normal to door-to-door may have moderated a potential increase in fear specifically among women.

Figure 2. Safety measures observed at door-to-door distribution

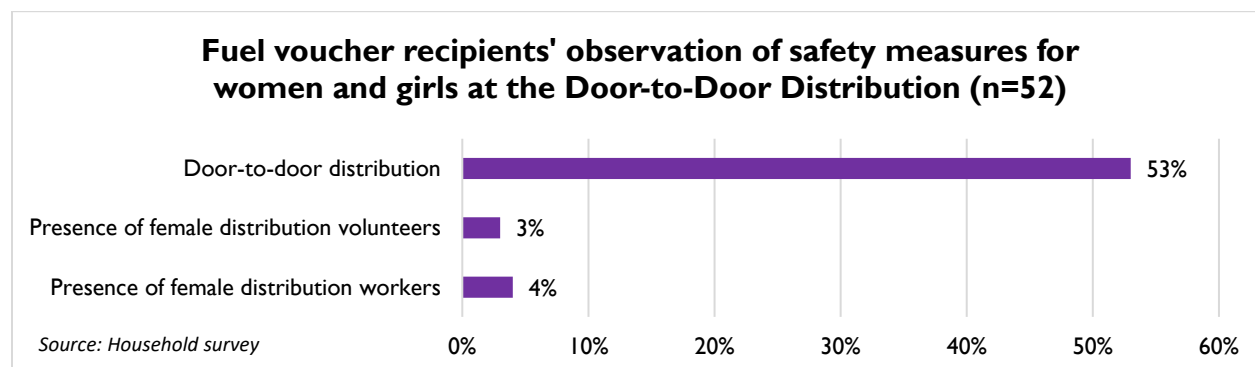
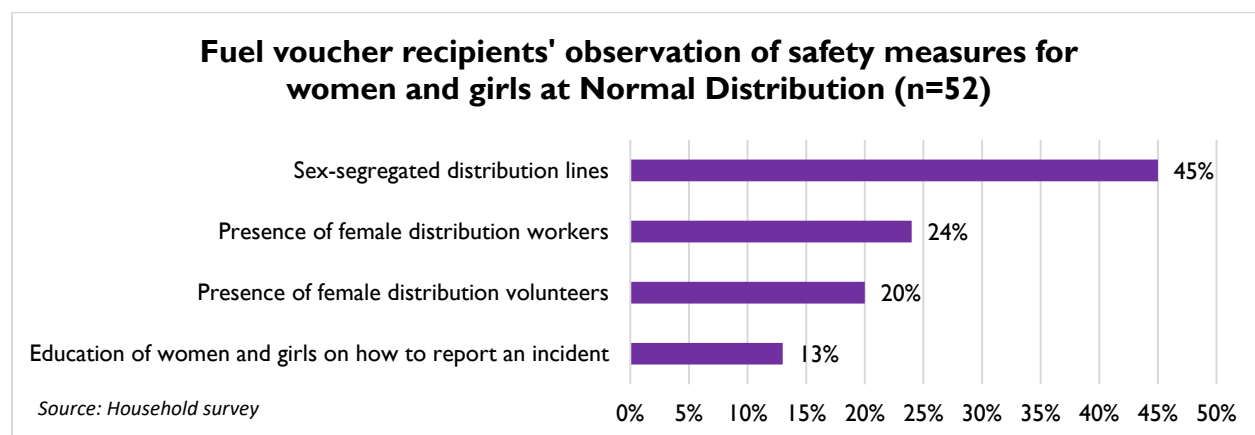


Figure 3. Safety Measures observed at normal distribution



While the door-to-door modality resulted in higher levels of satisfaction amongst female aid recipients, the research team also ensured safety measures and recommendations made by women and girls in Phase 1 of Empowered Aid to reduce SEA risk were implemented at the non-adapted, mass distribution. Safety measures observed to be effective by aid recipients at the non-adapted distribution included sex-segregated lines (45%), female distribution workers (24%), female distribution volunteers (20%), and education of women and girls on how to report an incident (13%).

“Presence of ladies in the staff and presence of relatives in the house [made the door-to-door distribution safer]” – Syrian man living in Lebanon as a refugee

“I came recently to Lebanon and I feel scared to leave the house alone, so I felt safe and comfortable when the team came to my house.” – Syrian woman living in Lebanon as a refugee

Despite the onset of COVID-19, the increased feelings of satisfaction expressed at the door-to-door distribution, compared with the normal distribution, and the SEA mitigation measures observed in the

household survey, in combination with the feasibility of carrying out the door-to-door distribution while executing most safety measures as observed during the safety audit, indicate that CARE, URDA and other NGOs could feasibly increase satisfaction and feelings of safety at distributions by utilizing a door-to-door distribution modality.

Post-distribution monitoring tools and their ability to better capture women and girls' perceptions of risk and safety in relation to SEA and other forms of GBV

The next section reviews the ability of the adapted post-distribution monitoring tools to capture perceptions of SEA and other forms of GBV risks amongst women and girls. Three main findings emerged from the analysis: (1) that the tools capture increased safety within the door-to-door distribution modality; (2) where women and girls go to access reporting mechanisms and services; and (3) what other types of gender-based violence or abuse women may experience due to distributions that may be linked to the COVID-19 pandemic.

Women and men expressed increased safety with the door-to-door distribution modality

The household survey captured perceptions of safety and fear surrounding the aid distribution, but did not capture instances of SEA either observed or heard about, likely due to sensitivity of the topic and the nature of the HHS as a telephone interview (again, due to COVID-19). SEA mitigation measures can be reported and observed in safety audit tools but do not directly ask about SEA amongst aid recipients. The household survey was not designed to capture rates of SEA as specialized surveys are required to measure the prevalence of violence.

However, it did capture a variety of SEA-related risks and some reports of abuse, which were safely referred for follow-up. For example, as mentioned above, fear increased significantly from normal distribution and voucher redemption (pre-pandemic) to door-to-door distribution and voucher redemption (post-COVID) for men, but not for women. Also during the door-to-door distribution, when asked about safety measures that helped reduce risk for women and girls during distribution, 53% of respondents wrote-in comments about the safety and comfort of the door-to-door modality. Based on safety measures identified, we asked respondents to further describe how these measures increased safety for women and girls. Below is some of the feedback they shared during the household survey:

"It is safer so I can stay home with my kids and not being forced to leave them alone" – Syrian woman living in Lebanon as a refugee

"The ladies weren't in danger of transportation, and the presence of female staff made it safer" – Syrian man living in Lebanon as a refugee

"It [door-to-door] protects them from any kind of verbal harassment." – Syrian man living in Lebanon as a refugee

The research team was unable to complete focus group discussions as we had planned due to COVID-19, but a sister study in Uganda on food aid found focus group discussion to be a good tool for capturing SEA related risk as well.³

SEA mitigation measures were well captured in the safety audit and household survey tools, but do not directly ask about SEA amongst aid recipients. As an example of how the monitoring data generated by this suite of tools complements each other and informs action: information from the survey and point of distribution questionnaire about where women and girls felt unsafe in the distribution process can be used to better target where in the process SEA mitigation measures should be implemented. Due to COVID-19, the survey tool was adapted from an in-person household survey to one conducted by telephone. This necessitated shortening the survey time and the team also noted several specific challenges related to administering the phone survey, including loss to follow up due to: deactivated lines due to lack of financial means and access to livelihood opportunities; secondary movement; and, unwillingness to speak (particularly about sensitive issues) due to lack of privacy when using the family telephone.

Understanding where and how women and girls can access reporting mechanisms and services

The adaptations to the safety audit and household survey tools also allowed for the research team to better capture where, how, and if women and girls access reporting mechanisms and services, and how messages on these services are delivered. According to the safety audits, during both the normal and door-to-door distributions, the URDA team conducted information sessions in each area prior to the distribution, explaining to aid recipients how to submit a distribution-related complaint and introducing hotlines for PSEA-related complaints and access complaints. No materials using pictures or posters for illiterate aid recipients were used, but the session was explained in Arabic. 13% of the respondents from the household survey at the non-adapted distribution said that they observed education of women and girls on how to report an incident surrounding the distribution. This was not mentioned during the door-to-door distribution as it was not relevant (mass information sessions were not delivered).

Information from both tools complement one another to paint a clearer picture on whether women and girls are made aware of the services available to them and how. This data on reporting mechanisms and services captured by the adapted tools is critical in supporting SEA and GBV survivors in accessing services and reporting mechanisms in a safe and comfortable manner that centers them in the process, and ensures that community stakeholders who are involved in reporting mechanism processes and services have the resources and knowledge they need to support survivors and have been trained on PSEA.

Other types of gender-based violence or abuse related to COVID-19 or reported as increasing due to the pandemic

No instances of other types of gender-based violence, including COVID-19 related violence, were reported in the household survey or the observed during the safety audit. This could be related to the fact that conversations around gender-based violence are sensitive and uncomfortable for women and girls to talk about, as well as the more limited nature of the phone survey that did not allow for data collectors to

³ For more on Uganda's pilot reports, reference the contacts on the first page of the report or visit <https://globalwomensinstitute.gwu.edu/empowered-aid-resources>.

establish face-to-face connection and rapport that can help respondents feel more comfortable in discussing sensitive topics. However, the safety and risk related questions in the tools still allow for CARE, URDA, and aid actors to target ways in which women and girls may be exposed to gender-based violence and therefore close those gaps.

Despite the constraints of COVID-19 on data collection in order to prioritize aid delivery to communities in need, the research team in Lebanon was able to capture actionable information on GBV/SEA safety and risk, during a time when many mechanisms of community feedback and complaint are cut-off. Additionally, this report showcases how the adaptations and tools can be further applied by aid organizations in Lebanon to better capture and mitigate SEA risks in aid distribution. Hopefully in future, less constrained circumstances, CARE, URDA and other aid organizations can utilize the toolkit to collect a robust set of data that can further close gaps that expose women and girls to SEA and create safer programming.

Recommendations

Based on the findings from the post-distribution monitoring data collected, below are recommendations for CARE Lebanon and URDA to improve the safety of women and adolescent girls at distribution sites. These can also be adapted by other NGOs and humanitarian actors at a wide range of distributions throughout Lebanon.

- 1. Apply the adapted distribution modality (door-to-door distributions) to increase feelings of safety in aid distribution.** The increased satisfaction levels for the door-to-door distribution (90% in comparison to 56% at the non-adapted site) and other SEA mitigation measures applied point to the possibility of increasing feelings of safety and satisfaction by using these door-to-door distributions modalities more frequently.
 - **Mixed-gender or all-female teams** can reduce risk to women and girls and are their stated preferred, especially when aid is delivered at the household level. To further increase safety, reinforce the presence of female distribution workers and volunteers who can be approached for complaints and/or raise awareness on how to report an incident.
 - Additionally, when scheduling the door-to-door distributions, ensure recipients are aware of the schedule of the distribution, and call ahead to alert them that a distribution team is on its way. If it is necessary to meet outside the home for any reason, ensure the meeting point is nearby and easy to reach, is in a safe location, and can avoid stigma of being seen receiving aid in a public location if this is a concern.
- 2. Utilize the Empowered Aid toolkit to better capture women and girls' safety and risks in fuel aid distribution through use of the adapted distribution monitoring tools—i.e., the safety audit, point-of-distribution questionnaire, post-distribution survey and focus group guide.** These tools improved data collection on women and girls' safety and risk in the distribution process, as well as men and boys' concerns and recommendations. By using the adapted tools, fuel and other aid actors can better identify these risks and mitigate them in future distributions and programming. By understanding the ways women and girls are exposed to SEA throughout the distribution process, and collecting routine monitoring data on this, aid actors can track how risks evolve as well as how effective their risk mitigation measures are, and where improvements or adjustments are needed. This will help all

distribution actors take a more proactive role in better preventing known risks from happening in the first place.

- 3. Consider gender when determining the timing and location of distributions.** Ask both women and men about their preferred location and timing of the distribution, so that it coincides with their daily commitments such as housework, employment, schools, health commitments etc. Delivering aid to women and girl during the early hours also decreases the risk of SEA to and from the distribution site, especially as it tends to get dark early during winter.
- 4. Create and utilize multiple and diverse methods for sharing information and receiving complaints.** Information is power, and Empowered Aid's findings highlight how important it is to use multiple gender-responsive and inclusive channels for sharing information. It is also important to provide feedback mechanisms such as complaint boxes and hotline services.
 - At distribution sites and in the community, **visual, low-literacy-friendly PSEA awareness messages and information on complaint and feedback mechanisms** should be displayed in addition to written signage. Drama or other creative methods are also helpful for disseminating key messages.
 - **Complaint mechanisms** should include community-based actors such as women's networks, and must be shared broadly with women and girls, so they can report incidences that occur at aid distributions. Ensure and share an easily reachable helpline widely, as well as non-technological methods for reporting, taking into considerations PSNs.
- 5. Talk with women and girls to support gendered needs around safely traveling to and from distribution points & transporting aid.** Women report feeling unsafe traveling to/from distribution sites because this presents risk factors for sexual harassment or abuse, particularly related to taxis. *Conducting distributions at household level can mitigate this risk, if implemented in the ways described here (i.e., with female or mixed-gender teams).* Supporting women and girls to be accompanied on the way to/from distributions is also an important measure to mitigate transport- and travel-related SEA risk, and is one of the most-requested, yet challenging recommendations to implement. By asking women and girls directly, CARE, URDA, and other aid actors can use their expertise and prioritize their voices in any planning and implementation of transport support.
- 6. Ensure the presence of female staff at all times when aid is delivered at household level, and reinforce the presence of female distribution workers and volunteers who can be approached for complaints and/or raise awareness on how to report an incident.** This includes mixed-gender teams when delivering at the household level (including for shelter or WASH repair teams). Staff could be either all female, or mixed gender teams. This can reduce risk of SEA, especially towards vulnerable groups such as widows and single women, and help increase women and girls' sense of safety when accessing reporting and complaints mechanisms. Community actors engaged in distributions (directly as staff/volunteers, or in other roles) should include women's groups and other community groups (including the women's co-researchers in this project) who are experts in contextual safeguarding.
- 7. Ensure sex-segregated lines and WASH facilities at distribution sites.** Sex-segregated lines and WASH facilities were observed to be an important safety measure for women and girls during a distribution. Ensure all latrines are sex-segregated, lockable, and that there are latrines available with appropriate

accommodations for PSNs, such as the elderly and those living with disabilities. In Mhammra, residents indicated latrines are understood to be sex-segregated, however signage could be provided. In Sahel, latrines and handwashing facilities were not visible; follow up should be conducted to ensure these communities have adequate WASH access particularly considering the pandemic.

- **Designing lockable, lighted and gender-identifiable toilet facilities** in a proper accessible location that is accessible during the day and night is central to eliminating protection threats for women and children. When planning distributions, the team must also take into consideration the planned distribution site(s) location and its constraints – such as lack of visible signs for handwashing stations or latrines – and prepare ways to improve or augment the environment (for example, by bringing signage) so it increases safety during the distribution.
- 8. Undertake monitoring during and post-distributions, to identify what is working well and areas for improvement, with action plans to address any concerns uncovered.** For example, within this distribution the issue of financial exploitation arising from some fuel vendors not honoring the full amount of the voucher arose, both through calls to the complaints line shared and in the post-distribution monitoring. This was promptly addressed by CARE and URDA. In future, better monitoring of redemption sites, and clearer communication around where and how to redeem vouchers, may help mitigate this.
- Within M&E activities during the COVID-19 pandemic, **recognize the limits of conducting surveys via telephone, particularly for sensitive topics.** Phone surveys may result in loss to follow up by phone for a variety of reasons. Many aid recipients were unreachable due to factors such as de-activated lines due to lack of financial means and access to livelihood opportunities; secondary movement; and, unwillingness to speak due to high levels of stress and anxiety.
 - **Lastly, ensure trained staff are present to identify and monitor the distribution process,** using monitoring tools that take into account known safety and risk factors for SEA and other types of violence and abuse—such as the tools being adapted through Empowered Aid. These tools also include questions specific to the needs of PSNs.

Empowered Aid Lebanon: Fuel Voucher Distribution Safety Audit Findings

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Overview

In February 2020, URDA, CARE Lebanon, and the Global Women's Institute distributed fuel voucher kits to 132 Syrian refugee families who met UNHCR vulnerability criteria. 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

Based on recommendations made by Syrian women and girls during Phase I of the Empowered Aid study², URDA and CARE staff distributed the first month of vouchers via a targeted mass distribution (the

¹ For more information about Empowered Aid, visit <https://globalwomensinstitute.gwu.edu/empowered-aid>.

Findings from the first phase in Lebanon can be found in the report online here:

<https://globalwomensinstitute.gwu.edu/empowered-aid-resources>.

² See the recommendations on pages 3-4 of Empowered Aid's [policy brief on reducing SEA risks in food distribution](#), or page 14 of the Empowered Aid [Lebanon Country Report](#).

“normal” distribution modality) in February 2020, and the second month of fuel vouchers to the same families via a door-to-door Distribution (an “adapted” distribution modality incorporating Phase 1 recommendations) in April 2020.

By this time, the COVID-19 pandemic had arrived in Lebanon causing delays to the onset of monitoring as planned in-person training by GWI was adapted to remote modalities. However, the ‘door to door’ distribution modality recommended by women and girls in Phase 1 and applied to the April 2020 distribution was not changed, as it aligned with COVID-19 health and safety restrictions. Personal protective equipment (PPE) and social distancing guidance were utilized, and the methods for distribution monitoring were also adapted. Safety audits at the distribution sites were maintained, however the post-distribution in-person surveys were conducted via phone instead, and focus group discussions were dropped completely.

TABLE 1. FUEL VOUCHER DISTRIBUTION SUMMARY		
TYPE OF DISTRIBUTION	TARGETED MASS DISTRIBUTION ('NORMAL')	DOOR-TO-DOOR DISTRIBUTION ('ADAPTED')
LOCATION OF DISTRIBUTION	BEKNINE (38), BIREH (40) AND TRIPOLI (54)	BEKNINE (38), BIREH (40) AND TRIPOLI (54)
DATE OF DISTRIBUTION	20 FEBRUARY 2020	3 APRIL 2020
# OF PEOPLE REACHED	132	132 (SAME PEOPLE)
# OBSERVATIONAL SAFETY AUDITS	6	3
COVID-19 SITUATION	PRE-COVID-19	DURING COVID-19

It is important to note that, given the context of COVID-19, some of the challenges reported in the distribution monitoring reports may reflect the strict conditions of Lebanon’s ‘general mobilization state’ (put in place to limit the spread of COVID-19) rather than challenges specific to the distribution being monitored. This report shares findings from the safety audits, and findings from the post-distribution phone survey 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) in the context of COVID-19 lockdowns and other restrictions.

Methods

GWI, CARE and URDA adapted the safety audit from an existing tool used by aid actors like CARE and IRC, and GWI trained staff on how to safely and systematically conduct safety audits. A safety audit was carried out in each distribution location by inter-agency teams from the two operational partners (one staff from URDA and one from CARE). 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.

After introducing the tool and its objectives to the CARE/URDA staff, a 'Gender Analysis Observation Activity' was conducted where participants were asked to take part in an observational gender analysis, walking around the room/office/surrounding area, observing what types of safety risks may exist for women and girls, and taking note. Moreover, participants were also trained on ethical and safety considerations for GBV-related data collection.

Nine safety audits were carried out across both the normal and adapted voucher distributions. These occurred at three sites in North Lebanon: Bebnine and Bireh in Akkar Caza, and the City of Tripoli in Tripoli Caza. The safety audits documented observations around access, safety, dignity, equity, and information across the different distribution modalities.

Checklist of Key Findings

Findings from the safety audits are summarized below in a 'checklist' that allows for quickly reviewing key findings and areas for improvement (in red), followed by a full discussion of the main findings and recommendations.

SAFETY AUDIT CHECKLIST										
Location										
District	Akkar					Tripoli				Summary of Findings
Distribution site	Bire	Bire	Bire	Bebnine	Bebnine	Tripoli	Tripoli	Tripoli	Tripoli	
ACCESS										
Clear method for handling complaints	√	√	√	√	√	√	√	√	√	
Accessible visibility materials for complaints										No visuals were used in the information cards
Clear & timely communication on the distribution	√	√	√	√	√	√	√	√	√	Reminder text message sent one day before the distribution
Did the distribution	√	√	√	√	√	√	√	√	√	

<i>start on time?</i>										
<i>If not, were aid recipients informed?</i>										
<i>Appropriate behavior of staff/volunteers</i>	√	√	√	√	√	√	√	√	√	Support was provided to elderly, pregnant women and PSNs.
<i>Inappropriate behavior of staff/volunteers</i>										
<i>Defined distribution area</i>	√	√	√	√		√	√			
<i>Separate access points for men and women</i>	√	√								
<i>Separate access points for PSNs</i>										
<i>Distribution area is clean and free of dangerous objects</i>	√	√				√	√			
SAFETY										
<i>Overcrowding at distribution point</i>	√	√	√	√		√	√			
<i>Adequate crowd control measures</i>										
<i>Shade/covered area at</i>										

<i>distribution point</i>										
<i>More female than male staff/volunteers</i>	√	√	√	√		√	√			
<i>An equal number of female and male staff/volunteers</i>										
<i>More male than female staff</i>					√			√	√	
<i>Alternative fuel voucher collectors for PSNs</i>			√			√	√	√		
<i>Active measures in place to prevent or mitigate SEA</i>	√	√	√	√	√	√	√	√	√	SEA risks observed include no female staff present at the adapted distribution in Bire, and a lack of visual sensitization materials.
<i>Interactions between taxi drivers and aid recipients</i>				√	√					
<i>Handwashing facilities available</i>	√	√	√	√		√	√			
<i>Refugees not on the list registered on the spot and</i>										No refugees were registered on the spot, as it was a targeted

<i>distributed fuel voucher</i>										distribution with a list provided by UNCHR. No one approached the distribution team asking to be registered.
<i>If no, they are registered for the next distribution</i>										
DIGNITY										
<i>Model of distribution considers the dignity of aid recipients</i>	√	√		√	√	√	√	√	√	All but one audit reported that the distribution took dignity of the aid recipients into account. One audit reported issues of cleanliness, far-off location, and poor lighting.
<i>Latrines at the distribution point</i>	√	√	√	√		√	√			As the distribution took place in pre-existing halls, distribution staff could provide visibility signs in the future to indicate location and sex-segregation of latrines.
<i>Latrines are lockable</i>	√	√	√	√						
<i>Latrines are sex-segregated</i>	√	√								
<i>Latrines have visibility and are well lit</i>										
<i>PSNs treated with respect at distribution</i>	√	√	√	√		√	√			
EQUITY OF THE DISTRIBUTION										
<i>Everyone received the same agreed upon food</i>	√	√	√	√	√	√	√	√	√	All aid recipients received the same fuel

<i>parcel content</i>										voucher in each audit.
<i>Do vulnerable individuals receive their due ration?</i>	√	√	√	√	√	√	√	√	√	All vulnerable individuals received their due ration in each audit.
INFORMATION ON THE DISTRIBUTION										
<i>Information dissemination on distribution conducted by staff</i>	√	√	√	√	√	√	√	√	√	Information was disseminated verbally, through phone calls, or text messages for all distribution sites.
<i>Information dissemination for vulnerable groups</i>	√	√	√	√	√	√	√	√	√	Refugees in special situations were identified by staff and given special attention for questions and needs.
<i>Pre-address understood by all aid recipients</i>	√	√	√	√	√	√	√	√	√	Pre-address understood by all recipients in all audits

Findings

Access

Method for handing distribution complaints

During both the normal and adapted distributions, the URDA team conducted information sessions in each area prior to the distribution, explaining to aid recipients how to submit a distribution-related complaint and introducing hotlines for PSEA-related complaints and access complaints. No materials using pictures or posters for illiterate aid recipients were used, but the session was explained in Arabic. One safety auditor mentioned that, specifically in Bire, it was not clear if the aid recipients could directly approach one of the aid distributions staff to ask a question or make a complaint.

Communication around schedule and status update; timeliness of distribution

Overall, the distribution schedule was communicated to aid recipients prior to the distribution taking place. For the normal distribution, aid recipients were contacted by phone 2-3 days before the distribution and had a reminder text message indicating the location and time of the distribution sent to them in Arabic one day before the distribution. In addition, some aid recipients called URDA and CARE staff for additional information or clarification. The normal distributions generally started on time, within a 15-minute margin, and many aid recipients arrived early to await distribution. Sometimes aid recipients were late or missed the distribution, in which case staff placed phone calls in Arabic to the missing aid recipients, inviting them to attend another distribution instead. Many of these calls, however, did not go through due to closed lines and in some cases the aid recipient declined to receive the voucher. In one case, the recipient did not prioritize receiving the assistance and thus did not make time to collect the voucher. In another case, a recipient refused to receive the voucher, saying that he is living with a stable income and believed other families might be benefit from the assistance more.

Prior to the adapted distribution, aid recipients were called to confirm their addresses for door-to-door distribution, to inform them of the date of distribution, and to agree upon a time. In some cases, during the adapted distribution, aid recipients were called to come to a meeting point (e.g., near a bank, pharmacy, or open space) to speed the distribution process or facilitate distribution recipients whose household was difficult to locate. During the adapted distribution, phone calls in Arabic were placed to aid recipients one day before the door-to-door distribution.

Conduct of those distributing fuel vouchers, or their intermediaries, toward recipients

Overall, positive behavior toward recipients was observed in both distribution modalities in all three areas. No safety audits reported incidents of disrespect or inappropriate conduct by the distribution team or their intermediaries.

Examples of positive behaviour during the normal (mass) distribution include: constant briefing about the distribution process, its purpose, and how to use the card; respectfully offering elderly and pregnant women to sit on the chairs instead of standing to wait in line in Bire; priority given to women and elderly to receive the fuel vouchers; and taking care of the recipients' children (by either holding them or playing with them, during the distributions that took place pre-COVID) while they sign to receive the assistance.

In Bebnine, one of the male recipients recommended having one male receive the fuel voucher after each five women so that they do not wait for a long period of time.

In the door-door distributions, different views on appropriate behavior were identified. Staff were reported to behave in a positive way during the distribution. In some cases, however, distributors called aid recipients and asked them to meet them at a known location near their household. One safety auditor pointed out that this could have been avoided. In some cases, the house was not identifiable after speaking to the recipient many times. As a result, the staff decided to ask them to meet them under their building or someplace very close to their house that was more identifiable. Another said that distributors did this due to limited time and resources and pointed out that they were acting as an emergency response team during COVID-19. This auditor expressed concern that calling aid recipients to leave their homes could negatively impact the ability of staff to share the PSEA and COVID-19 key messages and effectively inform the aid recipients about the content of the information card, purpose of the fuel voucher and how/where to use it.

One safety auditor gave the counterexample of the Tripoli team calling the recipients beforehand to ask them to propose a time that was suitable for them. In case the aid recipient was not at their house once the team arrived, the distributor would wait for them for a maximum of ten minutes and/or call them back to set another time for their distribution.

Layout, accommodation, and cleanliness of distribution points

All normal distributions were conducted in areas defined by a concrete wall. In Bebnine and Tripoli, men and women had the same access points, whereas in Bire there were separate waiting areas for men and women. Regardless of separate waiting areas, it was noted that men and women received aid in sex-segregated lines at time of distribution. There were no separate access points for persons PSNs, although in one location a path for disabled persons was under construction. Four safety audits in Bire and Tripoli reported that distribution points were clean, with no dangerous objects present. Two safety audits in Tripoli, however, pointed out that the distribution point was cluttered with trash, there were no chairs to wait in, no lights, and no tables. Four of the six normal distribution sites had hand-washing facilities, whereas two did not.

Safety

Crowding and crowd control

For the normal distribution, no distribution points were reported to be overcrowded. Overall, adequate crowd control measures were in place, including sex-segregated lines, though safety auditors disagreed on whether any of the staff present were exclusively crowd control staff. One auditor reported that the building manager in Tripoli also served in a crowd-control function. Additionally, it was reported that the Bebnine site could have benefited from one additional female distributor beyond the two distributors already in place. The distribution team was always wearing jackets for visibility, while the monitoring team was wearing IDs.

During the adapted distribution, the door-to-door modality meant that crowding was not an issue. In the case that aid recipients were called to come to a meeting point to pick up the voucher, staff ensured

adequate spacing between aid recipients (partly due to COVID-19 social distancing measures) and moved quickly to distribute vouchers. Distributors were wearing vests with URDA or CARE logos.

Waiting area attributes and accommodation for PSNs

During the normal distribution, PSNs attended and in three of the nine audits they were not supported by alternate fuel voucher collectors because there was no need. In some cases, pregnant women and elderly recipients came alone, and in others they were supported by a family member or alternative. Sick and disabled individuals were accompanied by an alternate, such as a relative. In Bebnine, it was noted that there were no separate lines for PSNs. During the adapted distribution PSNs were supported by an alternate to collect the fuel voucher if they needed to meet in a central location outside the home.

Timing of distribution & registration details

The normal distribution took around 2 hours and occurred in the morning from around 10-11am, or in the afternoon from around 3-4pm. The adapted distribution took 1-2 more hours and occurred from around 10 or 11am until late afternoon/evening. It should be noted that only pre-registered refugees received vouchers. Recipients were vulnerable families from a list provided by UNHCR. Workers at distribution sites were not able to register new recipients.

Table 2: Time and location of distributions

Type of distribution	Location	Distribution time
Normal distribution	Bireh	10:10am - 11:15am
	Bireh	10:10am - 11:15am
	Bebnine	10:00am - 10:40am
	Bebnine	10:00am - 10:45am
	Tripoli	02:40pm - 04:00pm
	Tripoli	02:40pm - 04:00pm
Adaptive distribution	Tripoli	11:00am - 03:30pm
	Bireh	10:00am - 05:00pm
	Tripoli	N/A

Staffing and volunteers

Both the normal and adapted distributions included more female than male staff and volunteers, except for the adapted distributions in Bireh and Tripoli. No female staff were present at the adapted distribution in Bireh, as the distribution team was divided to execute door-to-door distribution. Staff/volunteer totals ranged from 1 – 7.

Table 3: Staffing at distributions

<i>Type of distribution</i>	Location	# male staff/vol.	# female staff/vol.	Totals
<i>Normal distribution</i>	Bireh	3	4	7
	Bireh	3	4	
	Bebnine	3	4	7
	Bebnine	3	4	
	Tripoli	1	4	5
	Tripoli	1	4	
<i>Adapted distribution</i>	Tripoli	2	1	3
	Bireh	1	0	1
	Tripoli	2	1	3
Overall average ratio of female: male staff/volunteers		Approx. 3 males: 4 females		

Sexual exploitation and abuse (SEA)

No SEA incidents were reported; however some risks were observed, such as the absence of any female staff or volunteers in the Bireh adapted distribution. All safety audits during the normal distribution pointed to active safety measures taken to prevent or mitigate SEA, including: sex-segregated lines for men and women, making explicit that the voucher was free and no exchange was needed, presence of a female staff member, previous PSEA training for distribution workers, having a staff member on site who was trained to handle SEA complaints, and explaining clearly how to use the voucher. It was recommended by one auditor to add an extra female staff member to ensure information about fuel voucher use was communicated thoroughly, particularly among illiterate recipients.

During the adapted distribution, safety audits at all locations reported active measures taken to prevent or mitigate SEA, such as sharing the feedback hotline with the voucher, explicitly saying that vouchers were free, and distributing a list of places where the voucher could be redeemed. In Akkar specifically, when visiting a woman recipient, the team asked if the husband could be present even though both male and female staff were present. Social distancing measures implemented due to COVID-19, such as avoiding any direct contact when handing out the voucher, also helped to reduce stress and risk.

Transportation observations

Only two safety auditors observed interactions between aid recipients and taxi drivers, in transporting recipients to or from the normal distribution site. One observed only normal interactions, with the taxi driver transporting several female aid recipients and waiting for them during the distribution to transport them home. The other observed a taxi driver become impatient and causing a scene while waiting for male aid recipients. This occurred because the distribution team was not large enough to service both female and male lines at once, so female aid recipients received service first and the male aid recipients had to wait longer.

Dignity

Overall, the normal model of distribution considered the dignity of recipients in cases where there was ample space, a clean environment, and chairs, particularly for PSNs. However, auditors found that in some cases the sites were dirty, had limited chairs, no light, were far from the main road and confusing to find, lacked latrines and handwashing stations, or did not have enough staff. For the adapted distribution model, auditors found that overall, the model considered the dignity of the recipients well, but in the cases where aid recipients had to leave their homes and walk to a meeting point to receive the aid, this was reduced.

Latrines

Four of the six normal distribution sites had latrines available, but only three of these facilities were lockable, and only two were sex-segregated latrines. Additionally, two of these sites had no light. No sites had latrines available for PSNs.

Treatment of PSNs

All auditors reported that PSNs were treated with respect at the distributions yet noted there were no separate lines for PSNs. Pregnant women and the elderly were offered chairs while waiting. Disabled aid recipients were supported by spouses or an alternate who was made known to the staff beforehand or on the spot with the presence of the recipient themselves.

Equity of Distribution

All safety auditors reported that in both the normal and adapted distributions, everyone received the same agreed-upon fuel voucher amount. There was no discrimination reported by age, sex, or disability.

Information on Distribution

Across all distributions, refugees were informed of the vulnerability criteria for receiving fuel vouchers, the amount, where and how to use it, and who to call in case of complaint. This information was disseminated by phone call, verbally and by text. Special attention was given to explaining distribution information, and particularly how to use the voucher, verbally to elderly recipients who may be less likely to use text or phone. In some cases, when speaking by phone with an elderly beneficiary, a relative was asked to write the information down for clarity. All communication was done in Arabic.

Follow Up

Several points were noted for follow up:

Location	Action	Person Responsible	Done
Bebnine	Aid recipients faced difficulty spelling the name of the gas station and locating it.	Farah/Georgette	During the second distribution, a list of the stations' location was distributed to the recipients with the staff explaining the locations in addition to the numbers recipients can call for support.
All	COVID-19 prevention: For future distributions it would be better to find alternative solutions for taking the signatures of the aid recipients in order to avoid close contact and the use of the same pen/paper. The auditor suggested to have a box of pens and to give each beneficiary a new one. Additionally, having a large hand sanitizer on hand is important.	Loujine	These COVID-19 adaptations were shared with CARE and URDA teams for future distributions.
All	During door-to-door distribution, staff should prioritize going to the door of the recipient, unless it is very clear that the recipient is comfortable meeting them outside the home.	Loujine	The distribution team and recipient should agree on a time and exact location of distribution beforehand.

Recommendations

1. **Consider gender when determining the timing and location of distributions.** Ask both women and men on their preferred location and timing of the distribution so that it coincides with their daily commitments such as housework, employment, schools, health commitments etc. Delivering aid to women and girl during the early hours also decreases the risk of SEA to and from the distribution site, especially as it tends to get dark early during winter.
2. **Organize aid recipients in sex-disaggregated lines and, if possible, organize the space to be able to service both lines at once.** Women reported that sex-segregated lines make them

more comfortable. Lines can be defined by a sign and/or rope. Servicing both lines simultaneously can speed up the distribution process and provide a comfortable environment to divide both lines.

3. **Ensure gender-balance in distribution teams** by having equal numbers of women and men staff/volunteers throughout the distribution process (from information dissemination to verification, distribution and supporting safe transport and storage of goods). For distributions targeting women and girl aid recipients, it is preferable to have all or most staff/volunteers be female. Community actors engaged in distributions (directly as staff/volunteers, or in other roles) should include women's groups and other community groups (including the women's co-researchers in this project) who are experts in contextual safeguarding.
4. Following on the above, **ensure the presence of female staff at all times when aid is delivered at household level**. Staff could be either all female, or mixed gender teams. This can reduce risk of SEA especially towards vulnerable groups such as widows and single women.
5. Ensure all **latrines are sex-segregated, lockable, and that there are latrines available with appropriate accommodations for PSNs**, such as the elderly and those living with disabilities. In Mhamra, residents indicated latrines are understood to be sex-segregated, however signage could be provided. In Sahel, latrines and handwashing facilities were not visible; follow up should be conducted to ensure these communities have adequate WASH access particularly considering the pandemic.
6. **Create and utilize multiple and diverse methods for sharing information and receiving complaints**. Information is power, and Empowered Aid's findings highlight how important it is to use multiple gender-responsive and inclusive channels for sharing information. It is also important to provide feedback mechanisms such as complaint boxes and hotline services. At distribution sites and in the community, **visual, low-literacy-friendly PSEA awareness messages and information on complaint and feedback mechanisms** should be displayed in addition to written signage. Drama or other creative methods are also helpful for disseminating key messages. **Complaint mechanisms** should include community-based actors such as women's networks.
7. Ensure **trained staff are present** to identify and monitor the distribution process, using distribution monitoring tools that take into account known safety and risk factors—such as those being adapted through Empowered Aid. These tools also include questions specific to the needs of PSNs.

EMPOWERED AID
Fuel Voucher Post-Distribution Monitoring
Household Phone Survey Results

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Overview

In February and April 2020, URDA, CARE Lebanon, and the Global Women’s Institute conducted two fuel voucher distributions to a targeted group of 132 Syrian refugee households in Akkar who met UNHCR vulnerability criteria. This not only supported needs identified by the humanitarian response but also was 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

¹ For more information about Empowered Aid, visit <https://globalwomensinstitute.gwu.edu/empowered-aid>. Findings and recommendations from the first phase in Lebanon can be found in the report online here: <https://globalwomensinstitute.gwu.edu/empowered-aid-resources>.

These distributions meet recognized humanitarian response gaps while also piloting new distribution modalities based on the SEA risk reduction recommendations provided by Syrian women and girls during Phase I of the Empowered Aid study.² The first fuel voucher distribution on February 20, 2020 was carried out normally, as a targeted mass distribution. The second fuel voucher distribution was delayed, due to the onset of the COVID-19 pandemic, from March to April 3, 2020, and was carried out among the same population piloting a “door-to-door” approach in which vouchers were distributed directly to each household.

The beginning of the COVID-19 pandemic in Lebanon caused delays to the onset of monitoring, as planned in-person training by GWI was adapted to remote modalities. However, the ‘door to door’ distribution modality recommended by women and girls in Phase 1 and applied to the March 2020 distribution was not changed, as it aligned with COVID-19 health and safety restrictions. Personal protective equipment (PPE) and social distancing guidance were utilized, and the methods for distribution monitoring were also adapted. Safety audits at the distribution sites were maintained, however the post-distribution in-person surveys were conducted via phone instead, and focus group discussions were dropped completely.

Table 1. Post Fuel Distribution Monitoring Overview

Distribution Modality	Targeted Mass Distribution (Normal)	Door-to-Door Distribution (Adapted)
Distribution Locations (Number of recipients)	Bebnine (38) & Bireh (40) in Akkar; Tripoli (54)	Bebnine (38) & Bireh (40) in Akkar; Tripoli (54)
Date of Distribution	February 20, 2020	April 3, 2020
Number of Fuel Voucher Recipients	132	132
Number of Recipients Interviewed	76 (58%)	72 (55%)
COVID-19 Situation	Pre-COVID-19	During COVID-19

It is important to note that, given the context of COVID-19, some of the challenges reported in the distribution monitoring reports may reflect the strict conditions of Lebanon’s ‘general mobilization state’ (put in place to limit the spread of COVID-19) rather than challenges specific to the distribution being monitored. This report shares findings from the post-distribution phone survey, and the safety audit findings 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) in the context of COVID-19 lockdowns and other restrictions.

² See the recommendations on pages 3-4 of Empowered Aid’s [policy brief on reducing SEA risks in food distribution](#), and on page 14 of the Empowered Aid [Lebanon Country Report](#).

Methodology

As part of distribution monitoring, the Empowered Aid research team carried out a Post-Distribution Monitoring (PDM) Survey examining recipients' perceptions of safety and satisfaction, particularly among women and girls, and comparing results across distribution modalities. While initially planned as an in-person survey, this was moved to telephone due to the onset of the COVID-19 pandemic in Lebanon. With the onset of COVID-19, Phase 2 was adapted to not only test the recommendations arising from refugee women and girls in Phase 1, but also to understand the pandemic's effects on SEA risks and access to services—at a time when refugee communities had few other avenues for communicating this information with aid actors.

The adapted distribution modality recommended by women and girls (receiving aid 'door-to-door') coincidentally aligned with COVID-19 health and safety restrictions. As noted above, the door-to-door distribution occurred after an increase in COVID-19 cases and subsequent mobilization restrictions put in place by the Lebanese government. The door-to-door distribution also occurred during a worsening economic crisis across the country. Both of these contextual factors may be reflected in participant responses.

Research Team

The GWI team consists of two researchers who, due to COVID travel restrictions, now provide technical guidance and training through fully remote modalities (Zoom). In Lebanon, two Empowered Aid research staff from CARE worked with three partner staff from URDA's distribution team.

Research Tools and Training

Post-distribution monitoring tools used by CARE and URDA, as well as Empowered Aid's partners in Uganda, IRC and World Vision, were reviewed and modified to incorporate questions on SEA risks (building on the findings from Phase 1) as well as questions about safe programming in the context of the COVID pandemic. Tool development was done in a participatory workshop by all partners.

GWI and CARE then facilitated data collection training with all team members, paying special attention to the survey tool, research ethics, and protection against exploitation and abuse (PSEA) measures. Due to COVID-19 travel restrictions, training was moved to Zoom. The training built on previous trainings on gender/GBV core concepts, PSEA, the Empowered Aid study, and delved deeper into:

- I. Purpose and importance of PDM
- II. Trauma-informed interviewing skills
- III. Informed consent process

- IV. Reviewing the household survey tool
- V. Practicing the tool (including administering it via Kobo)
- VI. Introduce ethics, referrals and managing distress
- VII. Review outstanding issues on telephone survey administration

Sampling Approach

The research team aimed to conduct a census of all aid recipients who participated in both the normal distribution at timepoint 1 and the adapted distribution at timepoint 2, in order to analyze differences within matched pair data across timepoints. Non-response due to phone issues (described below), the changing situation around COVID-19, and the economic crisis, led to a response rate of 58% during the normal distribution and 55% during the adapted.

Data Collection Protocol & Ethics

Data collectors began collecting data using the phone household survey towards the end of April, after the door-to-door distribution of fuel vouchers that took place in North Lebanon between February and May 2020. The main challenges reported were an inability to reach the sample targeted numbers due to phone numbers no longer being active, the timeframe of the survey (average of 30 minutes) being too long for some respondents, and greater difficulty developing a trusting relationship with the respondent in which they feel free to speak about sensitive issues such as SEA.

Data collectors reached out to aid recipients by phone approximately 30 days after the distribution, asking to speak with the recipient. Data collectors called all recipients and noted in the tracking sheet if recipients answered, did not answer, or if there was a problem with the phone number or connection. After gaining informed consent, data collectors conducted the interview verbally by phone, noting recipient responses in a tablet-based Kobo survey. Referral pathways were in place for any recipients who expressed frustration regarding their lack of access to specialized services, indicated lack of safety, need for psychosocial support, or experience of PSEA or GBV. Recipients were also given information about how to submit complaints around the aid distribution. Overall ethical review and approval was provided by the George Washington University Institutional Review Board.

Findings

Description of Sample

We carried out a total of 148 total survey interviews among 96 respondents, resulting in a total of 52 matched pairs (persons who responded during both timepoint 1 and timepoint 2). Among all respondents (Annex Table 1), slightly less than half were female (43%). The majority of respondents were between ages 26-40 (65%), living in male-headed households (84%), and

reported that the head of household was married (79%). Average family size was 4.7 people and average household size was 6 people (including non-family members).

Demographics of the 52 matched pairs were similar (Annex Table 2), with 37% of respondents being female and the majority (71%) being between ages 26-40. The majority of respondents (65%) resided in Akkar, while 35% resided in Tripoli. Of these, 70% resided in an apartment, 15% lived in a tent, and the remaining 15% lived in a garage, a warehouse, or a rented room. Average family size was 5 people, and the average household size was 6.75 people. All analysis in this report pertains to these 52 pairs.

Figure 1: Gender of respondents

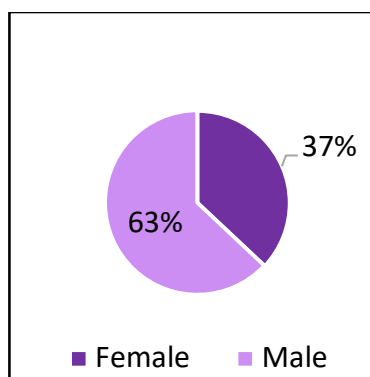


Figure 2: Age of respondents

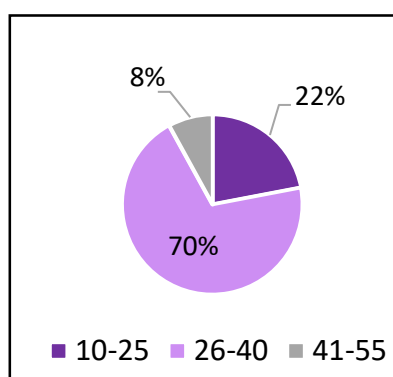


Figure 3: Gender of household head

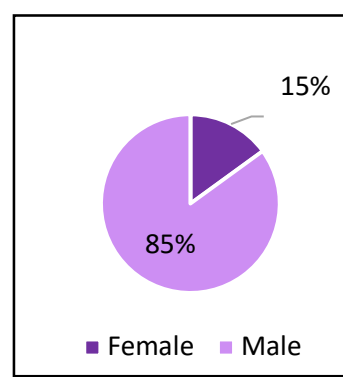
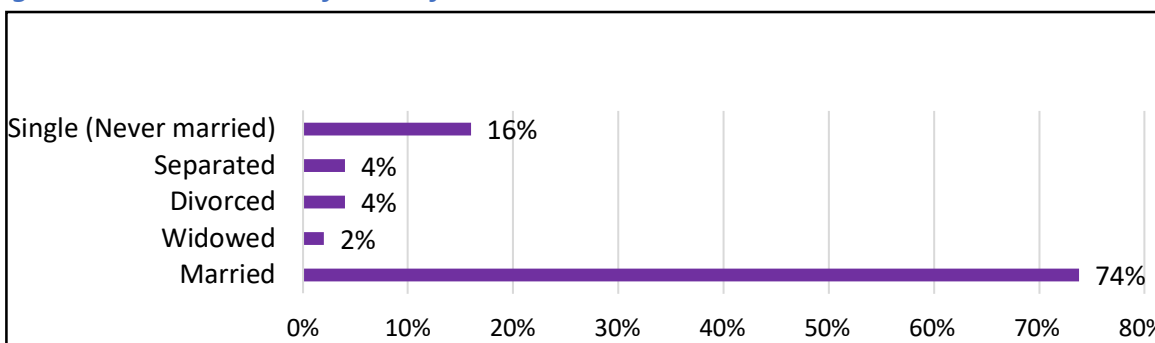


Figure 4: Marital status of head of household



Freedom of Movement

We asked aid recipients about their general freedom of movement at two timepoints: (1) during the normal (mass) distribution that occurred before COVID-19 and the deepening of the economic crisis in Lebanon, and (2) during the adapted (door-to-door) distribution which occurred during COVID-19 and the worsening economic crisis.

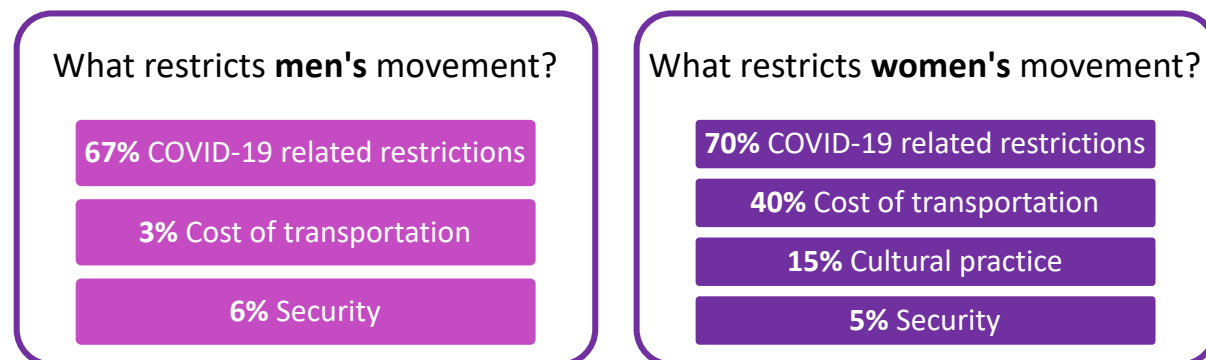
Time 1: Before COVID-19 General Restrictions

At timepoint 1, women expressed significantly higher levels of unrestricted movement (41%) and accompanied movement (31%), and a lower level of movement being impossible (28%), as compared with men (Pearson Chi-Squared test, $p=.000$). Conversely 91% of men said no movement was possible at timepoint 1. The main reason they gave was lack of work (14%), whereas for women the main reasons for lack of movement were cultural acceptance (13%), security (22%), and the cost of transport (25%). Men's higher restricted movement, compared with women, could be related to the fact that during the uprising in Lebanon in early 2020 there was an increase in checkpoints, and renewing legal stay paperwork became more difficult. Women were less likely to be stopped at checkpoints, so they often went out on behalf of the family. It should be noted that this could also increase women's exposure to SEA or GBV risk.

Restricted movement also corresponded with shelter type, as those living in tents were most likely to report unrestricted movement (67%), and those living in other types of shelter, such as warehouses, were most likely to report no movement possible (83%). Those living in apartments were least likely to report unrestricted movement (14%) and were in between those living in tents and those living in other types of shelter when reporting movement possible (69%). These differences were statistically significant ($p=.001$).

Time 2: During COVID-19 General Restrictions

During timepoint 2, women still expressed significantly higher levels of unrestricted movement (70%) and accompanied movement (25%), and a lower level of restricted movement (5%) as compared with men ($p=.000$). Again, this may be related to security risks that are unique to men traveling through checkpoints. Male levels of restricted movement were lower overall than pre-COVID, but still higher than female levels. 55% of men reported no movement was possible, while 45% said they had unrestricted movement. Reasons given by women for restricted movement included COVID-19 (70%), cost of transport (40%), cultural acceptance (15%), and security (5%). Men similarly cited COVID-19 (67%) and security (6%), as well as cost of transport (3%). While restricted movement was not significantly correlated with Caza or shelter type, those in Akkar Caza were significantly more likely to report COVID-19 reasons for restricted movement.



Satisfaction

Based on ten questions about aid recipient satisfaction with different aspects of the fuel voucher distribution, we created a score variable. Participants were asked about their satisfaction with the following components: information about date/time of distribution, information about fuel vouchers, eligibility information, distance to the distribution, scheduling, treatment by staff/volunteers, treatment by security personnel, timeliness, waiting conditions, and WASH facilities. Answers to these questions were recoded using satisfaction scales (0-dissatisfied, 1-neutral, 2-satisfied) and a mean satisfaction score was computed (total of individual scale values / number of questions answered). Mean scores were analyzed by time period using independent samples t-test and by individual change in satisfaction using paired-samples t-test.

Overall, the mean satisfaction score increased significantly from the normal distribution (timepoint 1) to the door-to-door distribution (timepoint 2) (Using a paired samples t-test, $p=0.0035$). This increase was statistically significant in both male ($p=0.0425$) and female ($p=0.0165$) aid recipients but was greater among female recipients. Female participants saw an increase in satisfaction from 56% being satisfied with all aspects of the fuel voucher in timepoint 1 to 90% in timepoint 2. Among male recipients, satisfaction rose from 84% in timepoint 1 to 100% in timepoint 2.

Figure 5. Change in satisfaction by gender across distribution timepoints, from normal to adapted distribution modality



About 6 in 10 (58%) aid recipients in the normal distribution reported that the fuel voucher redemption site (typically a gas station) was close enough for them, and similarly 50% of door-

to-door respondents said the same. During the normal distribution, the majority of recipients traveled to the distribution site by taxi (46%), by bicycle (23%) or by bus (15%). For the majority of aid recipients, it took less than 30 minutes to travel to the distribution site (83%) and less than 30 minutes to travel back home (94%). (This question was not applicable to adapted distribution as recipients received the vouchers at their homes.)

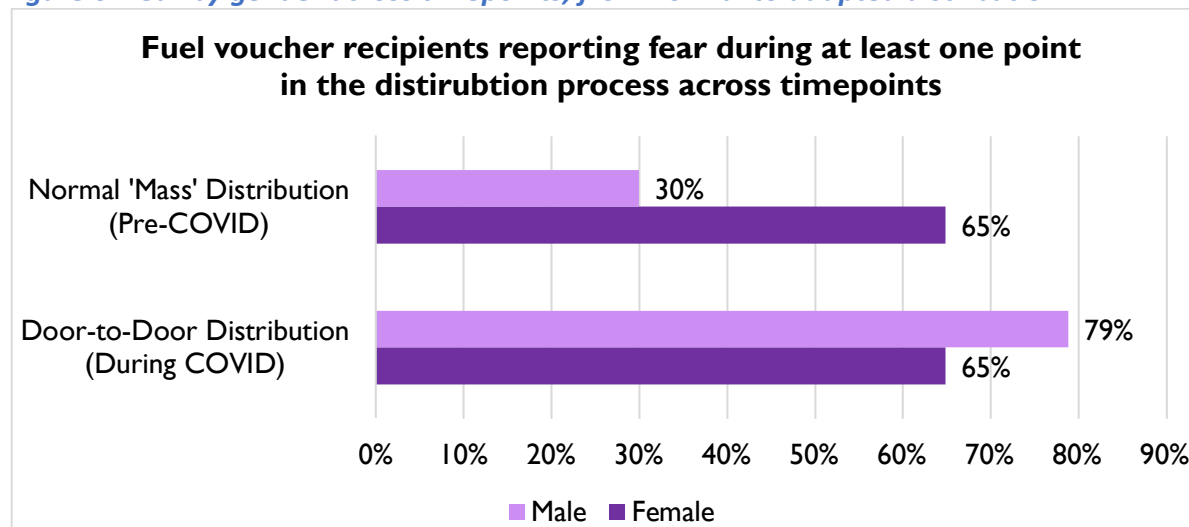
Perceived SEA risk or safety

We asked respondents to rate their level of fear regarding aspects of distributions identified as SEA risks in Phase 1, including: accessing information related to the distribution or redemption, registration, traveling to and from the distribution or redemption point, at the distribution or redemption point, and safety storing goods.

SEA risks during distribution of fuel vouchers

Overall, fear increased significantly from the normal to adapted distribution, according to a Pearson Chi-Square Test ($p < .000$). This is likely due to the dramatic changes to the Lebanese context during this time—namely, the onset of the COVID-19 pandemic and the worsening of the economic crisis.

Figure 6. Fear by gender across timepoints, from normal to adapted distribution



Women reported a significantly higher level of fear (65%) than men (30%) at timepoint 1 (baseline). While the level of fear increased overall, we only see a significant increase in men. During timepoint 1 (normal distribution), 30% of men felt fear, compared to 65% of women. During timepoint 2 significantly more men felt fear (79%, $p = .003$), whereas the percent of women feeling fear remained the same. The change in distribution modality from normal to door-to-door may have moderated a potential increase in fear specifically among women.

In addition, recipients who were under age 30 expressed a significantly lower level of fear (28%) during the normal distribution than recipients over age 30 (61%) ($p=.004$). However, this difference did not hold during the adapted distribution, with 73% of those under 30 expressing higher level of fear and 74% of those over 30 expressing higher level of fear. Recipients in Tripoli Caza felt significantly higher levels of fear (63%) than those in Akkar Caza (30%) during the normal distribution ($p=.005$), and this difference held during the adapted distribution as well.

Table 2. Fear during fuel voucher distribution by timepoint, from normal to adapted distribution

	% Feeling Fear at Any Point During the Fuel Voucher Distribution	
	Normal Distribution (Time point 1)	Adapted Distribution (Time point 2)
Gender of respondent:		
Female	65%	65%
Male	30%*	79%**
Age of respondent:		
<30	28%	73%**
=>30	61%*	74%
Caza or District:		
Akkar	30%	64%**
Tripoli	63%*	96%*, **

*Significant difference between groups within column at the $p<.05$ level

**Significant difference across timepoints at the $p<.05$ level

Despite this overall increase in fear levels, satisfaction with the distribution (as discussed above) increased. One possible explanation is that the increase in fear is associated with outside circumstances previously described (i.e., worsening economic crisis and COVID-19 restrictions).

SEA risks during redemption of fuel vouchers

Questions about redemption refer to recipients taking the vouchers received to vendors to redeem them for fuel. Overall, there is a small but significant increase in fear during redemption between the two timepoints ($p=.005$). Again, this increase is only significant for men ($p=.010$), and not for women ($p=.271$). There was no significant difference between feelings of fear by gender or age during either timepoint. We see a significant difference between feelings of fear by Caza, with those in Tripoli again reporting higher levels of fear (72%) than those in Akkar (46%) during the first timepoint, but this difference does not persist in the second (adapted) distribution (Table 4).

Table 3. Fear during fuel voucher redemption by timepoint, from normal to adapted distribution

	% Feeling Fear at Any Point During the Redemption of Fuel Vouchers	
	Normal Distribution (Timepoint 1)	Adapted Distribution (Timepoint 2)
Gender of respondent:		
Female	63%	74%
Male	55%	81%**
Age of respondent:		
<30	56%	76%**
=>30	59%	82%
Caza or District:		
Akkar	46%	68%**
Tripoli	72%*	88%

*Significant difference between groups within column at the p<.05 level

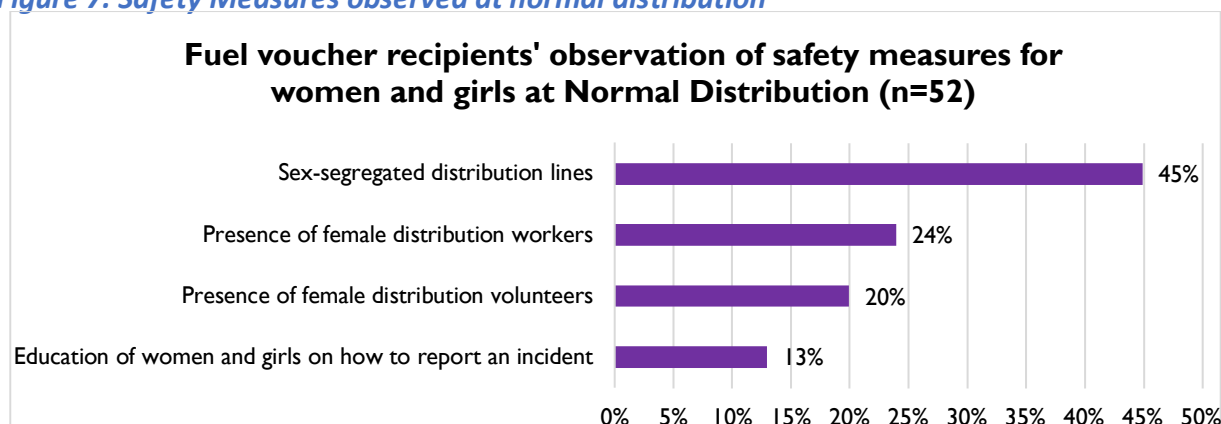
**Significant difference across timepoints at the p<.05 level

As we see in both the distribution and redemption of fuel vouchers, women reported a higher baseline level of fear, and were less likely to report increased fear with the onset of COVID and the worsening economic crisis between timepoint 1 and timepoint 2, as compared to men. We know that men’s freedom of movement has become more limited, which may contribute to their increased fear. Additionally, because men had a lower ‘baseline’ of fearfulness around distributions, they may have been more susceptible to new fears due to the changing circumstances of COVID-19 and worsening economic conditions, in comparison to women who already held a higher ‘baseline’ of fear around safely accessing distributions.

SEA and COVID-19 Related Safety Measures

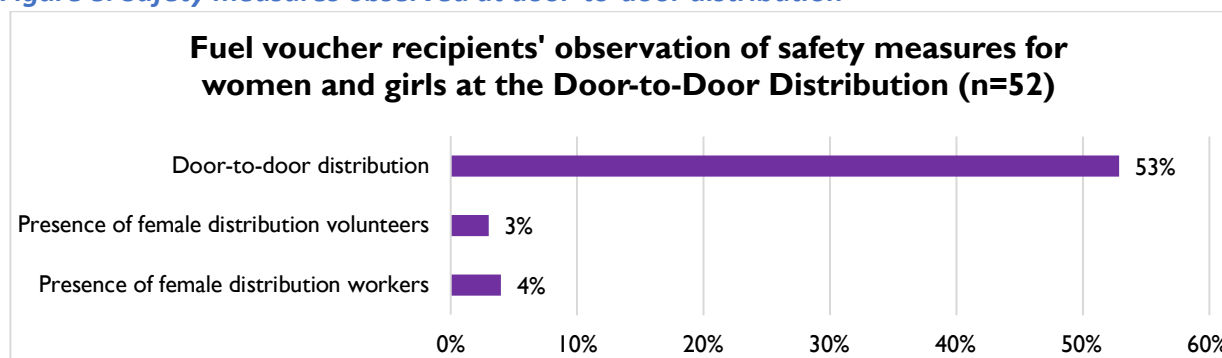
We asked aid recipients to report which measures they have observed being put in place to mitigate risk for women and girls during each distribution modality. Of those who responded to this question at timepoint 1 (normal ‘mass’ distribution), they pointed to the presence of female distribution workers (24%) and volunteers (20%), education of women and girls on how to report an incident (13%), and sex-segregated distribution lines (45%) as the most common risk mitigation tools. There were no significant differences in observations by sex, age, caza, or shelter type.

Figure 7. Safety Measures observed at normal distribution



Of those who responded during the door-to-door distribution, they primarily pointed to the door-to-door approach as a safety measure (53%), and also noted the presence of female workers (4%) and volunteers (3%). Again, there were no statistically significant differences in observations by sex, age, caza, or shelter type.

Figure 8. Safety measures observed at door-to-door distribution



Key responses to both this question regarding safety measures observed, and a follow-up question asking aid recipients to further describe how they saw these measures increasing safety for women and girls, are highlighted in Table 5.

Table 4. Observations & Recommendations by aid recipients on how distributions can mitigate SEA and/or COVID-19 related risks

Targeted Mass Distribution (Timepoint 1)	Door-to-Door distribution (Timepoint 2)
“Protect women and girls from being exploited by the workers in the gas station.” -Male	“Door to door distribution reduced the risk of getting infected by Covid-19” -Male
“These lines did not make them wait for long.” –Female	“It is safer so I can stay home with my kids and not being forced to leave them alone” -Female
“Priority was given to elderly women and women with children accompanying them” -Female	“It [door-to-door] protects us women from racist words that we hear on a daily basis” -Female
“I didn’t notice anything above average” -Female	“Presence of ladies in the staff and presence of relatives in the house” -Male
“Sex-segregated lines, and because there are a lot of people, I wouldn’t feel scared.” -Female	“Presence of the husband limit the danger, and contacting the family before” -Male
“Have an active hotline to receive complaints when redeeming the fuel voucher in the gas station, especially if a woman went there by herself in order to mitigate any kind of exploitation” - Male	“This way of distribution is better. Actually, I was able to take care of my children and even I didn't have money for transportation” –Female
	“The ladies weren’t in danger of transportation, and the presence of female staff made it safer” - Male
	“This will protect women and girls from the problems they might face on their way to the distribution center” -Male
	“I came recently to Lebanon and I feel scared to leave the house alone, so I felt safe and comfortable when the team came to my house.” - Female
	“It [door-to-door] protects them from any kind of verbal harassment.” -Male

Violence, exploitation and abuse

Overall, during both the normal distribution and adapted distribution no one reported instances of violence, exploitation, or abuse when asked about a list of types of violence or SEA. Ten people (10%), however, selected 'other' and specified that the gas station worker where they went to redeem their fuel took advantage of them financially.

"The worker in the IPT gas station near Al Salam roundabout took the voucher from me and gave me 85 LBP instead of 112 thousand LBP" – Male respondent

"I went to the gas station to take fuel as agreed during the distribution, but the worker at the IPT gas station in Halba gave me fuel for 95 thousand LBP instead of the full amount." – Male respondent

"I was deceived from the worker at JARJOURA gas station. He lied and told me that he has instructions from Beirut to give us 95 thousand LBP instead of the full amount." – Male respondent

Redeeming Fuel Vouchers

Recipients were informed about how to use the fuel voucher in writing (in Arabic), and the distributors explained the purpose of the voucher during distributions. A list of all fuel stations (referred to as "IPT stations" above) in the respective areas was communicated to aid recipients during the second distribution. CARE followed up directly with the fuel stations to share any complaints received in relation to redeeming the vouchers, and ensured those issues were addressed.

Recommendations

1. **Recognize the limits of conducting surveys via telephone, particularly for sensitive topics:** Phone surveys may result in loss to follow up by phone for a variety of reasons. Many aid recipients were unreachable due to factors such as de-activated lines due to lack of financial means and access to livelihood opportunities; secondary movement; and, unwillingness to speak due to high levels of stress and anxiety.

2. **Ensure female and/or mixed-gender teams when conducting door-to-door aid distribution:** All female or mixed-gender teams are cited by women and girls as reducing their risk of SEA, and are noted as especially important when aid is delivered at household level (including for shelter or WASH repair teams).
3. **Reinforce the presence of female distribution workers and volunteers** who can be approached for complaints and/or raise awareness on how to report an incident. Following on the above recommendation, this helps to increase women and girls' sense of safety when accessing reporting and complaints mechanisms.
4. **Ensure recipients are aware of the schedule of the distribution, and call ahead to alert them that a distribution team is on its way:** If it is necessary to meet outside the home for any reason, ensure the meeting point is nearby and easy to reach, is in a safe location, and is relatively private—which is important for avoiding the stigma of being seen receiving aid in a public location, if this is a concern.
5. **Ensure sex-segregated lines and WASH facilities at distribution sites:** Sex-segregated lines and WASH facilities were observed to be an important safety measure for women and girls during a distribution.
6. **Talk with women and girls to support gendered needs around safely traveling to and from distribution points & transporting aid.** Women report feeling unsafe traveling to/from distribution sites because this presents risk factors for sexual harassment or abuse, particularly related to taxis. *Conducting door-to-door distributions at household level can mitigate this risk, if implemented in the ways described here (i.e., with female or mixed-gender teams).* Supporting women and girls to be accompanied on the way to/from distributions is also an important measure to mitigate transport- and travel-related SEA risk.
7. **Implement post-distribution monitoring to identify what is working well and areas for improvement, with action plans to address any concerns uncovered.** For example, within this distribution the issue of financial exploitation arising from some fuel vendors not honoring the full amount of the voucher arose, both through calls to the complaints line shared and in the post-distribution monitoring. This was promptly addressed by CARE and URDA. In future, better monitoring of redemption sites, and clearer communication around where and how to redeem vouchers, may help mitigate this.
8. **Educate women and girls, as well as the broader community, on how to report incidents occurring surrounding aid distribution:** Ensure and share an easily reachable helpline widely, as well as non-technological methods for reporting, taking into considerations PSNs.

Annex I: Additional Demographics

Annex Table 1. Sample demographics of all respondents (n=96)

Demographics	No. (%) or Mean (SD)
Gender of Respondent:	
Female	41 (42.7%)
Male	55 (57.3%)
Age of Respondent:	
10-25	19 (25.0%)
26-40	49 (64.5%)
41-55	6 (7.9%)
56+	2 (2.6%)
Caza	
Akkar	54 (56.3%)
Tripoli	42 (43.8%)
Shelter	
Apartment	66 (68.8%)
Tent	13 (13.5%)
Other (Garage, Warehouse, Room)	17 (17.7%)
Gender of Household Head:	
Female	12 (15.6%)
Male	65 (84.4%)
Marital status of household head:	
Married	60 (78.9%)
Widowed	2 (2.6%)
Divorced	2 (2.6%)
Separated	2 (2.6%)
Single (Never married)	10 (13.2%)
Family size	4.74 (SD 2.76)
Household size (no. of people living in HH including non-family)	6 (SD 6.23)

Note: All percents are valid percents (missing excluded); SD=standard deviation

Annex Table 2. Sample demographics of matched pairs (n=52)

Demographics	No. (%) or Mean (SD)
Gender of respondent:	
Female	19 (36.5%)
Male	33 (63.5%)
Age of respondent:	
10-25	11 (21.6%)
26-40	36 (70.6%)
41-55	4 (7.8%)
56+	0
Caza	
Akkar	34 (65.4%)
Tripoli	18 (34.6%)
Shelter	
Apartment	36 (69.2%)
Tent	8 (15.4%)
Other (Garage, Warehouse, Room)	8 (15.4%)
Gender of household head:	
Female	8 (15.4%)
Male	44 (84.6%)
Marital status of household head:	
Married	38 (74.5%)
Widowed	1 (2.0%)
Divorced	2 (3.9%)
Separated	2 (3.9%)
Single (Never married)	8 (15.7%)
Family size	5 (SD 2.90)
Household size (no. of people living in HH including non-family)	6.76 (SD 6.27)

Note: All percents are valid percents (missing excluded); SD=standard deviation

Section 2:

Empowered Aid Lebanon Food Parcel Distribution

Pilot Reports



Empowered Aid Lebanon – Food Distribution Pilot 2

Summary Report

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Introduction

Empowered Aid: Transforming Gender & Power Dynamics in Aid Distribution is a three year project that aims to reduce the risks that may lead to sexual exploitation and abuse (SEA) in aid distributions. The project utilizes participatory action research methods to engage women and girls throughout, and apply their knowledge on how to better understand and prevent SEA. In the first year of Empowered Aid, the Global Women's Institute (GWI) and the CARE International in Lebanon worked with Syrian refugee women and girls to document SEA risks when accessing food, WASH, shelter, and cash assistance, and share recommendations on how to improve their safety and reduce feelings of fear in aid distribution processes.¹

In the second phase of Empowered Aid, GWI is working with the NGOs CARE and URDA, to adapt distribution monitoring tools that more proactively identify and address risks for sexual exploitation and abuse (SEA). These tools build on the findings from Empowered Aid's first phase, which identified ways in which the distribution processes can put women and girls at risk of SEA, and how to mitigate those risks.

Individual monitoring reports are also available for each of the tools used in the food pilot:

- Safety audits;
- Household survey
- Point of distribution questionnaire on COVID-19-related safety and risk;

These reports include detailed methodology on how each tool and the research team was prepared for data collection. Contact Loujinefattal (at) careliban.org or APotts (at) gwu.edu for more information. <https://globalwomensinstitute.gwu.edu/empowered-aid>.

¹ For more information about Empowered Aid, visit <https://globalwomensinstitute.gwu.edu/empowered-aid>. Findings from the first phase in Uganda can be found in the report online here: <https://globalwomensinstitute.gwu.edu/empowered-aid-resources>.

Overview of the Distribution and Methodology

In May 2020, URDA, CARE Lebanon, and the Global Women's Institute distributed 500 food parcels to a targeted group of Syrian refugees who met UNHCR vulnerability criteria. 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).

Specifically, this food distribution was designed using recommendations made by Syrian refugee women and girls during Phase I of the Empowered Aid study, in which they described the SEA risks they face when accessing distributions and ways to minimize these risks. With the onset of COVID-19, the research team 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. The research team decided to move forward with plans to distribute food parcels despite the inability to collect all the data intended, in order to prioritize providing assistance amidst the pandemic and economic crisis. Accountability to women, girls, and other refugee community members was ensured through a lighter-touch distribution monitoring plan: FGDs were dropped due to COVID-19 regulations, and the team shortened the household survey as well as conducted it over the phone. The safety audit, an observational tool, allowed for safe data collection. The team also created the “point of distribution questionnaire” (PODQ) to ensure women and girls—especially those without access to phones or other mobile services—were able to provide feedback in-person, while minimizing interaction time.

The food parcel distribution took place in two informal settlements (IS)² in Sahel Akkar (251 families) and Mhamra Akkar (250 families), and applied two different distribution modalities recommended in the first phase of Empowered Aid. In Sahel Akkar, aid recipients were organized to arrive in small groups of 20 people at a time, at pre-assigned times. In Mhamra Akkar (managed by URDA), items were distributed directly to recipients' homes through a “door-to-door” process. Both of these modalities coincidentally aligned with COVID-19 health and safety restrictions. It is important to note that, given the context of COVID-19, some of the challenges reported in distribution monitoring may reflect the strict conditions of Lebanon's ‘general mobilization state’ (put in place to limit the spread of COVID-19) rather than challenges specific to the distribution being monitored.

LEARNING SPOTLIGHT: COVID-19 Adaptations to Monitoring SEA in humanitarian aid distributions

With the onset of the COVID-19 pandemic when data collection was about to begin, the research team developed a short point of distribution questionnaire to ask questions on safety and risk related to the COVID-19 pandemic and response. The questionnaire was administered to women respondents covering six main areas on women's experiences in relation to distributions, particularly in context of the COVID-19 pandemic: information and communication on distributions, feelings of fear during the distribution process, SEA risk during aid distribution, other types of violence linked to the COVID-19 pandemic, places to report complaints or obtain support, and safety measures observed at distributions.

² Throughout this report, we will use the term informal settlement or “IS” to refer to any type of informal settlement or informal camp setting where refugees in Lebanon are living.

TABLE 1. FOOD DISTRIBUTION SUMMARY			
TYPE OF DISTRIBUTION BEING PILOTED	TARGETED, PRE-ASSIGNED TIMES DISTRIBUTION (ADAPTED MODALITY)	DOOR-TO-DOOR DISTRIBUTION (ADAPTED MODALITY)	
LOCATION OF DISTRIBUTION	SAHEL AKKAR INFORMAL SETTLEMENT (IS), UNMANAGED	MHAMMRA AKKAR INFORMAL SETTLEMENT (IS), MANAGED BY URDA	
DATE OF DISTRIBUTION	05 MAY 2020	05 MAY 2020	
# OF PEOPLE REACHED	251 (102 WOMEN, 149 MEN)	250 (218 WOMEN, 32 MEN)	
DISTRIBUTION MONITORING CONDUCTED	2 OBSERVATIONAL SAFETY AUDITS	2 OBSERVATIONAL SAFETY AUDITS	05 MAY 2020
	5 (5% OF WOMEN) POINT OF DISTRIBUTION QUESTIONNAIRES (PODQ)	33 (15% OF WOMEN) POINT OF DISTRIBUTION QUESTIONNAIRES (PODQ)	05 MAY 2020
	65 (26% OF TOTAL RECIPIENTS) PHONE HOUSEHOLD SURVEY (HHS) INTERVIEWS POST-DISTRIBUTION	88 (35% OF TOTAL RECIPIENTS) PHONE HOUSEHOLD SURVEY (HHS) INTERVIEWS POST-DISTRIBUTION	15 JUNE – 15 JULY 2020
COVID-19 SITUATION	DURING COVID-19	DURING COVID-19	

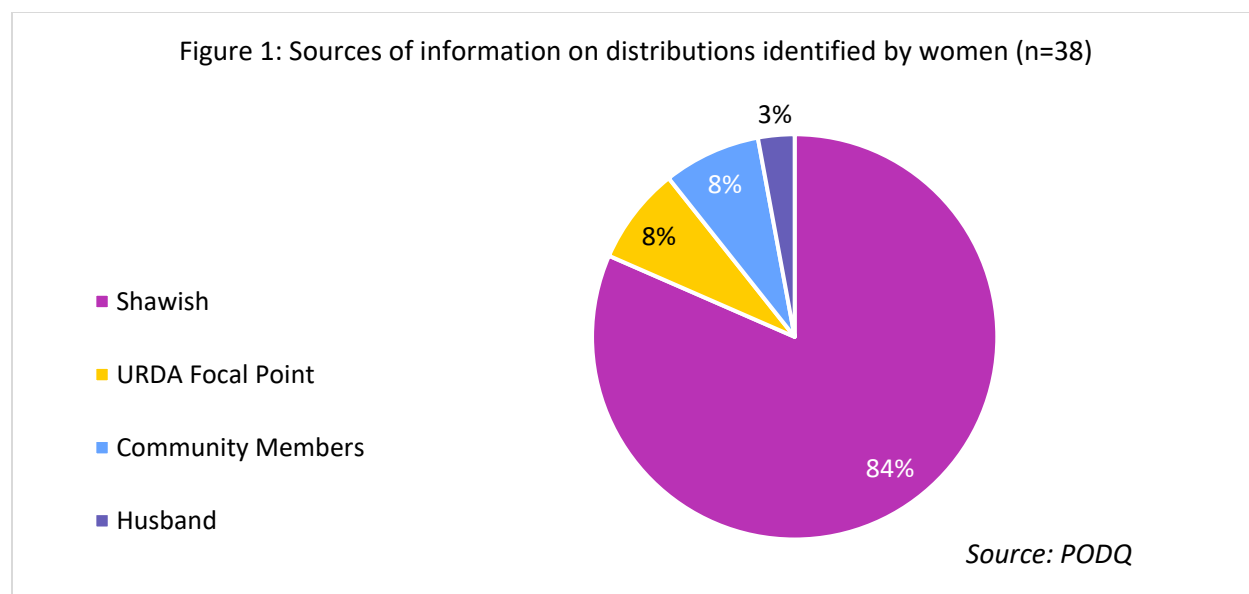
Reducing SEA Risk at Distributions: Analysis of Feasibility, Acceptability and Effectiveness To better understand the feasibility, acceptability, and effectiveness of the adapted distribution model, we analyzed data from across the three types of post-distribution monitoring conducted. Results are summarized here, as well as details on how well the adapted monitoring tools developed by Empowered Aid were able to capture women and girls' perceptions of safety and risk in relation to SEA, GBV, and accessing food aid.

Feasibility of the adapted distribution model

GW, CARE, and URDA applied two of the key recommendations made by women and girls in Empowered Aid's first phase: arranging small groups of aid recipients to come to the distribution site at pre-assigned times and conducting a second distribution through door-to-door drop off of food packages. First, the research team brought together key stakeholders involved in the project to plan and ensure investment amongst senior leadership from both organizations. Prior to the distribution, trainings were held on PSEA and GBV core concepts with all the research and data collection teams, followed by trainings on the adapted tools.

Findings from the household survey indicate that both modalities were feasible to execute, even during COVID-19. In comparison to a 'normal' or non-adapted distribution, fewer logistical resources, such as

transportation and venue rental, were required in the door-to-door distribution. Challenges associated with travel to and from the distribution point were also reduced. Given the circumstances of COVID-19, the door-to-door distribution was preferable to some to meet social distancing and non-congregant requirements in Lebanon. PODQ and safety audit findings indicate that spreading information about an upcoming pre-assigned-times or door-to-door distribution was feasible in the context of an informal settlement – though information-sharing occurred primarily through the *Shawish*, or the appointed community leader of the informal settlement who is typically a man, and therefore did not adequately account for potential risk. The below figures showcases the importance of the *Shawish* in delivering information, as 84% of respondents from both informal settlements where the distributions took place identified the *Shawish* as how they find out about distributions.



Acceptability of the adapted distribution model

Respondents from the household survey reported high satisfaction from both distribution modalities (82%), with the pre-assigned times distribution reported slightly higher levels of satisfaction than the door-to-door distribution (82% and 77% respectively), although these results were not statistically significant. Among the respondents that were less than completely satisfied, the top five aspects of the distribution that respondents said they were not completely satisfied with included information about eligibility for the distribution (9%), treatment by staff or volunteers at the distribution point (8%), waiting

"The door-to-door modality was very useful, especially for women, as they do not have to leave their tents" – Syrian woman living in Lebanon as a refugee

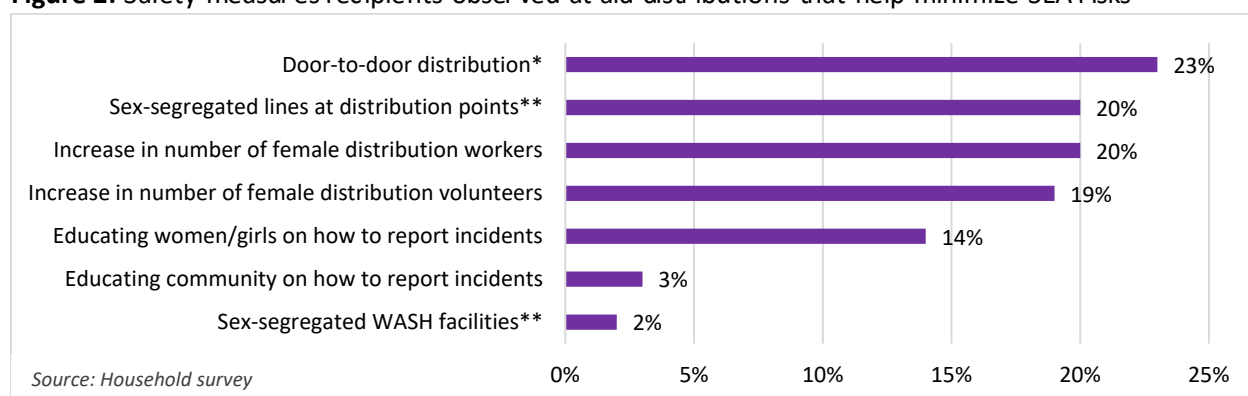
conditions at the pre-assigned times distribution (5%), information about contents of the food parcel (5%), and the schedule or hours of the distribution (3%).

Effectiveness of adapted distribution model at increasing women and girls' safety

Within Empowered Aid's objectives, effectiveness refers to whether the adapted distribution modality results in the target group (women and girls) reporting greater perceived safety, and/or lower perceived risk, when accessing aid. Within this food pilot, the post-distribution monitoring tools were adapted to measure women and girls' perceptions of SEA risk at the distribution sites, and whether the adapted model – small groups attending at pre-assigned times and door-to-door distributions – would impact feelings of safety. Household survey and point of distribution questionnaire respondents found both adapted distributions to be generally safe for women and girls, and findings from both tools also suggested that female and male respondents found the door-to-door distribution to be a good safety measure to prevent risk for women and girls during aid distributions.

Other safety measures observed to help minimize risk included: sex-segregated lines (pre-assigned times distribution only) (20%), increase in the number of female distribution workers (20%), increase in the number of female distribution volunteers (19%), educating women/girls on how to report an incident (14%), educating community members on how to report an incident (3%), sex-segregated WASH facilities (pre-assigned times distribution only) (2%). Below, in Figure 2, are some of the observed safety measures identified by respondents of the household survey.

Figure 2: Safety measures recipients observed at aid distributions that help minimize SEA risks



*Only applies to the door-to-door modality; **Only applies to the pre-assigned times distribution

Note: all percents are valid percents.

Female respondents prioritized sex-segregated lines, female distribution workers, safe transport to/from distributions, educating women/girls on how to report incidents as measures that should be implemented to make women and girls feel safe at distributions going forward.

"We as women felt comfortable because staying in our tent protect us from various difficulties including holding heavy boxes or being exploited from taxi drivers." – Syrian woman living in Lebanon as a refugee

"I don't leave the camp [ITS] unless for emergencies. The distributions happen inside the camp and here I feel safe all the time." – Syrian woman living in Lebanon as a refugee

The safety audits found it was feasible to implement most safety measures recommended during both distribution modalities, such as clear methods for handling complaints, appropriate behavior of staff or volunteers, and timely information communication on distributions that reached all audiences. More safety measures were observed to have been met at the door-to-door distribution than the pre-assigned times distribution. However, the lack of certain safety measures had less to do with the modality and more with the varying environments in Lebanon at which distributions are held. For example, lack of permanent structures to protect aid recipients from bad weather created over-crowding when wind and rain occurred at the distribution; lack of visibility for handwashing stations and latrines and poor lighting inside the distribution site and latrines were also issues reported in the safety audits. Therefore, distribution teams in Lebanon must pre-plan around how to potentially improve or augment some of these locations to mitigate potential SEA and other GBV risk when they act as distribution sites. The safety audit findings also illustrate the importance of distribution monitoring tools such as these observational audits, and their use during a crisis like the COVID-19 pandemic. While the research and data collection teams may not be able to interact for long periods with aid recipients, safety audits and other observational tools can be utilized to ensure accountability and proactively respond to SEA risk in monitoring and evaluation activities.

The feelings of satisfaction expressed at the adapted distributions and the SEA mitigation measures observed in the household survey, in combination with the feasibility of carrying out these adapted models while executing most safety measures as observed during the safety audit, indicate that CARE, URDA and other NGOs could feasibly increase satisfaction and feelings of safety at distributions by utilizing a door-to-door distribution modality (preferred) or a pre-assigned times distribution modality.

Post-distribution monitoring tools and their ability to better capture women and girls' perceptions of risk and safety in relation to SEA and other forms of GBV

The next section reviews the ability of the adapted post-distribution monitoring tools to capture perceptions of SEA and other forms of GBV risks amongst women and girls. Three main findings emerged from the analysis: (1) that the tools capture SEA risk in the aid distribution process; (2) where women and girls go to access reporting mechanisms and services; and (3) what other types of gender-based violence or abuse women may experience due to distributions that may be linked to the COVID-19 pandemic.

Women expressed that they had seen or heard of SEA surrounding the aid distribution in the PODQ

According to the point of distribution questionnaire 11% (4) of women respondents expressed that they had seen or heard of SEA in their communities. Of these, 3 out of 4 said SEA risk occurred in relation to aid, outside the informal settlements, and with aid workers as perpetrators. This tool proved to best capture SEA related risks in aid distribution.

"Yes, I heard about that [SEA] but outside this camp [ITS]. No one [does] a good thing unless there is something in return..." – Syrian woman living in Lebanon as a refugee

"... Some widows who have children find themselves forced to give their phone numbers to the NGO workers who ask them to go for a date with them in exchange for the assistance. Usually, the worker asks the woman to be in a relationship with him in exchange for the aid." – Syrian woman living in Lebanon as a refugee

"Yes, I heard many stories about this [SEA]. During the registration workers ask women to go on a date with them in exchange for the assistance." – Syrian woman living in Lebanon as a refugee

The research team was unable to complete focus group discussions as we had planned due to COVID-19, but a sister study in Uganda found focus group discussion to be a good tool for capturing SEA related risk as well.³ SEA mitigation measures were well captured in the safety audit and household survey tools, but do not directly ask about SEA amongst aid recipients. As an example of how the monitoring data generated by this suite of tools complements each other and informs action: information from the survey and point of distribution questionnaire about where women and girls felt unsafe in the distribution process can be used to better target where in the process SEA mitigation measures should be implemented.

The household survey captured perception of safety or fear surrounding aid distribution at low rates, and did not capture any SEA risks (respondents reporting that they had seen or heard of SEA in their community), likely due to sensitivity of the topic and the changed nature of the household survey as a telephone interview. The household survey was not designed to capture rates of SEA as specialized surveys are required to measure the prevalence of violence. However, it did capture a variety of SEA-related risks and some reports of abuse, which were safely referred to a social worker for follow-up.

Due to COVID-19, the survey tool was adapted from an in-person household survey to one conducted by telephone. This necessitated shortening the survey time and the team also noted several specific challenges related to administering the phone survey, including loss to follow up due to: deactivated lines due to lack of financial means and access to livelihood opportunities; secondary movement; and, unwillingness to speak (particularly about sensitive issues) due to lack of privacy when using the family telephone.

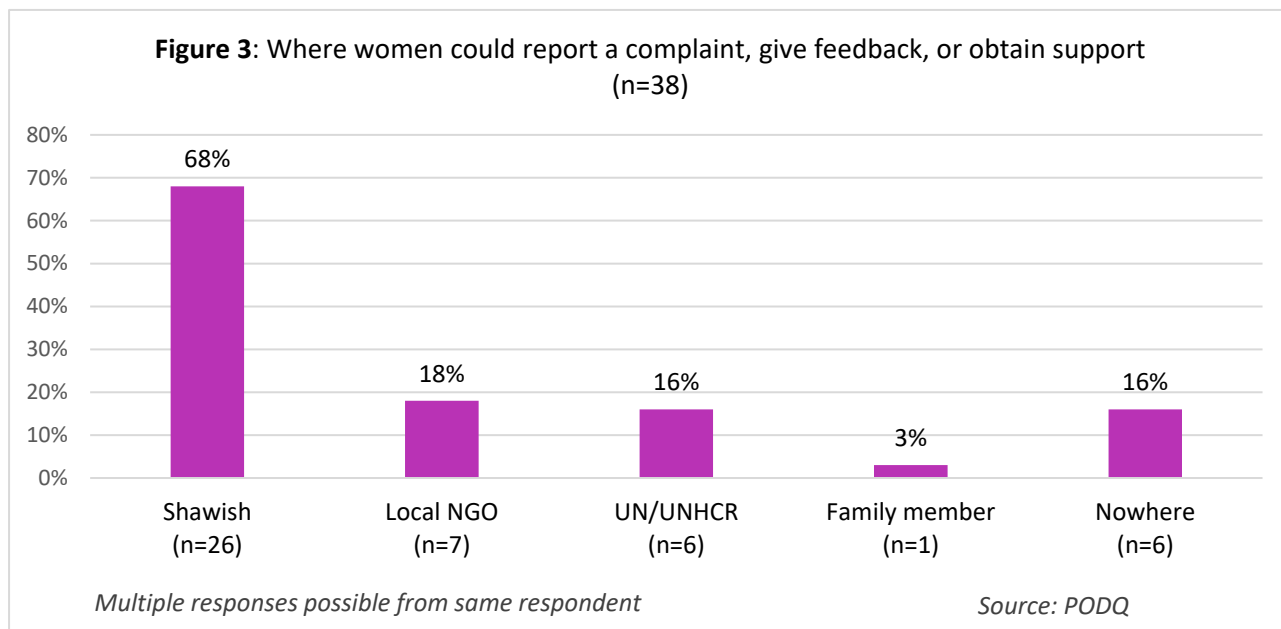
³ For more on Empowered Aid Uganda's pilot reports, reference the contacts on the first page of the report or visit <https://globalwomensinstitute.gwu.edu/empowered-aid-resources>.

Understanding where, how, and if women and girls access reporting mechanisms and services

The point of distribution questionnaire and safety audit tools also proved to be very effective in capturing where or to whom aid recipients could go to report complaints or access services, as well as why they would not report complaints. The vast majority (68%) of respondents of the PODQ identified the *Shawish* as where they could go to report a complaint or seek support. This can be concerning when multiple outlets for reporting are not available, such as women's or community organizations, hotlines, complaints desks, etc.

"I only tell the Shawish...I don't complain to UNHCR, they say that they are not responsible to help us." – Syrian woman living in Lebanon as a refugee

Other places respondents said they could report complaints and obtain support included reporting to local NGOs, UN/UNHCR, and family members. Additionally in the PODQ, 16% (6) of respondents said they would not report to anyone and preferred to remain silent. Of those respondents who commented on the quality of the support they received after reporting, 57% (7) reported that the service provider gave no answer and/or took no action after the complaint was filed. 57% (7) also reported a lack of trust in the service provider due to a negative past experience or response.



The Safety Audits pointed to a clear method for handling complaints and visibility materials for complaint mechanisms at both the pre-assigned times and door-to-door distributions. Like the PODQ, the Safety Audit also observed that the *Shawish* was the main method of handling complaints for aid recipients in the informal settlements. Additionally, aid recipients approached one safety auditor to express frustration about where to submit a complaint. A leaflet with information on complaint submission was shared, in addition to hotlines for PSEA-related complaints (all in Arabic).

This data on reporting mechanisms and services captured by the adapted tools is critical in supporting SEA and GBV survivors in accessing services and reporting mechanisms in a safe and comfortable manner that centers them in the process, and ensures that community stakeholders like the *Shawish* have the resources and knowledge they need to support survivors and have been trained on PSEA.

Other types of gender-based violence or abuse related to COVID-19 or reported as increasing due to the pandemic

The point of distribution questionnaire represented an opportunity to quickly and safely capture feedback from women and girls on how COVID-19 impacted their access to distributions, as well as any new or changing risks related to gender-based violence and sexual exploitation and abuse.

No instances of non-SEA types of violence, including COVID-19 related violence, were reported in the household survey, the point of distribution questionnaire (though this question was only asked in the unmanaged IS), or the observed during the Safety Audit. The lack of reporting in the household survey on experiences of non-SEA types of violence were likely related to the phone-based nature of the survey due to COVID-19. The data was not collected during the PODQ in the managed IS due to time constraints, and while it was asked in the unmanaged IS, data collectors observed that respondents wanted to rush through the questions and leave as quickly as possible, which could have affected their responses. One fight between two male aid recipients was observed via the safety audit, but was not clearly related to distribution design or gender-based.

Despite the constraints of COVID-19 on data collection in order to prioritize aid delivery to communities in need, the research team in Lebanon was able to capture actionable information on GBV/SEA safety and risk, during a time when many mechanisms of community feedback and complaint are cut-off. The supplement of the short point of distribution questionnaire for the food pilot helped to collect more robust data on safety and risk as the phone survey tended to be more limiting (versus an in-person interview). Additionally, this report showcases how the adaptations and tools can be further applied by aid organizations in Lebanon to better capture and mitigate SEA risks in aid distribution. Hopefully in future, less constrained circumstances, CARE, URDA and other aid organizations can utilize the toolkit to collect a robust set of data that can further close gaps that expose women and girls to SEA and create safer programming.

Recommendations

Based on the findings from the post-distribution monitoring data collected, below are recommendations for CARE Lebanon and URDA to improve the safety of women and adolescent girls at distribution sites. These can also be adapted by other NGOs and humanitarian actors at a wide range of distributions throughout Lebanon.

- 1. Utilize the adapted distribution modalities—providing aid to small groups of recipients at pre-assigned times, or door-to-door—to increase feelings of safety in aid distribution.** The satisfaction levels for both modalities and other SEA mitigation measures applied point to the possibility of increasing feelings of safety and satisfaction by using these methods. **Mixed-gender or female teams**

can reduce risk to women and girls and are their stated preferred, and were noted as especially important when aid is delivered at household level. To further increase safety, reinforce the presence of female distribution workers and volunteers who can be approached for complaints and/or raise awareness on how to report an incident. Additionally, when scheduling the door-to-door distributions, ensure recipients are aware of the schedule of the distribution, and call ahead to alert them that a distribution team is on its way. If it is necessary to meet outside the home for any reason, ensure the meeting point is nearby and easy to reach, is in a safe location, and can avoid stigma of being seen receiving aid in a public location if this is a concern.

2. **Utilize the Empowered Aid toolkit to better capture women and girls' safety and risks in food aid distribution through use of the adapted distribution monitoring tools—i.e., the safety audit, point-of-distribution questionnaire, post-distribution survey and focus group guide.** These tools improved data collection on women and girls' safety and risk in the distribution process, as well as men and boys' concerns and recommendations. By using the adapted tools, food and other aid actors can better identify these risks and mitigate them in future distributions and programming. By understanding the ways women and girls are exposed to SEA throughout the distribution process, and collecting routine monitoring data on this, aid actors can track how risks evolve as well as how effective their risk mitigation measures are, and where improvements or adjustments are needed. This will help all distribution actors take a more proactive role in better preventing known risks from happening in the first place.
3. **In these and many other informal settlements in Lebanon, the *Shawish*—local leaders who already hold a great deal of power within aid systems—served as the main source of both information about how to receive aid, and about complaint mechanisms or services if someone has been abused, exploited or otherwise. Information is power and ensuring that power is not concentrated only in the hands of a few is an important part of SEA risk mitigation.** URDA and CARE, along with women's organizations active in these areas, should work to establish multiple, varied methods for information on aid distributions and SEA/protection reporting in these informal settlements, such as through women's or community organizations, hotlines, and (mobile) helpdesks. For future distributions, information should be communicated via multiple channels, particularly those women and girls noted to be most useful (i.e., via community mobilization).
4. **SEA risk is recognized and observed in these ISs, often in relation to aid, and is perpetrated by aid workers, yet complaints and response mechanisms are not reported or used.** As stated in the PODQ findings, over 1 in 10 respondents said they had seen or heard of SEA in their communities. URDA, CARE, UNHCR, and community actors should work with women's organizations and community-based organizations to hold awareness and information sessions on what mechanisms exist to address SEA and ensure that residents of both managed and unmanaged informal settlements are able to access them. Again, multiple methods should be available and accessible for these populations, especially considering COVID-19 restrictions that make travel more difficult. Ensuring women and girls, PSNs, and the broader community know how to report incidents and have accessible means to do so (including and beyond hotlines) is vital. Conducting awareness raising on reporting and complaint mechanisms *during* distributions is also useful, for example when mobilizing, during the pre-address, or while aid recipients are waiting to receive their items. This can be done through visual materials, and gender and protection staff should always be present to receive complaints and provide referrals.

5. **Continue to utilize sex-segregated lines at distributions and ensure sex-segregated latrines and WASH facilities are available.** Women and girls involved in Empowered Aid's Phase 1 and other distribution pilots have reported that these two measures increase their safety and reduce the risk of SEA or other forms of gender-based violence while at distributions. Designing **lockable, lighted and gender-identifiable toilet facilities** in a location that is accessible during the day and night is central to eliminating protection threats for women and children. When planning distributions, the team should take into consideration the planned distribution site(s) and any constraints – such as lack of visible signs for handwashing stations or latrines – and prepare ways to improve or augment the environment (for example, by bringing signage).
6. **Implement other safety measures that women, girls, and other community members have recommended as increasing their safety at distributions, but which have not been widely observed.** Based on Empowered Aid's findings from Phase 1 and the Phase 2 pilots conducted by the research team, this includes increasing the proportion of female aid workers and volunteers present, awareness raising on incident reporting mechanisms, distributing aid items door-to-door or to small groups at a time, and providing transport and/or accompaniment support while traveling. Safety measures that teams have observed occurring already in aid distribution processes include sex-segregated lines and some increase in the number of female staff and volunteers at distributions.
7. Building on one of the most-requested, yet challenging to implement recommendations above: **Talk with women and girls to support gendered needs around safely traveling to and from distribution points & transporting aid.** Women report feeling unsafe traveling to/from distribution sites because this presents risk factors for sexual harassment or abuse, particularly related to taxis. *Conducting door-to-door distribution will mitigate this risk, or supporting women and girls to be accompanied on the way to/from distributions.*

**Empowered Aid - Lebanon
Food Distribution (Pilot 2): Safety Audit Findings**

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Overview

In May 2020, URDA, CARE Lebanon, and the Global Women’s Institute distributed 500 food parcels to a targeted group of Syrian refugees who met UNHCR vulnerability criteria. 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, this food distribution was designed using recommendations made by Syrian refugee women and girls during Phase I of the Empowered Aid study, in which they described the SEA risks they face when accessing distributions and ways to minimize these risks.² 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

¹ For more information about Empowered Aid, visit <https://globalwomensinstitute.gwu.edu/empowered-aid>. Findings from the first phase in Lebanon can be found in the report online here: <https://globalwomensinstitute.gwu.edu/empowered-aid-resources>.

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.

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.

The food parcel distribution took place in two informal tented settlements (ITS)³ in Sahel Akkar (251 families) and Mhammra Akkar (250 families), and applied two different distribution modalities recommended in the first phase of Empowered Aid. In Sahel Akkar, aid recipients were organized to arrive in small groups of 20 people at a time, at pre-assigned times. In Mhammra Akkar ITS (managed by URDA), items were distributed directly to recipients' homes through a “door-to-door” process.

Both of these modalities recommended by women and girls in the first phase of Empowered Aid in 2019, coincidentally aligned with COVID-19 health and safety restrictions. It is important to note that, given the context of COVID-19, some of the challenges reported in distribution monitoring may reflect the strict conditions of Lebanon's ‘general mobilization state’ (put in place to limit the spread of COVID-19) rather than challenges specific to the distribution being monitored.

TABLE 1. FOOD PARCEL DISTRIBUTION MONITORING SUMMARY		
TYPE OF DISTRIBUTION	TARGETED DISTRIBUTION AT PRE-ASSIGNED TIMES (ADAPTED)	DOOR-TO-DOOR DISTRIBUTION (ADAPTED)
LOCATION OF DISTRIBUTION	SAHEL AKKAR INFORMAL TENTED SETTLEMENT (ITS), UNMANAGED	MHAMMRA AKKAR INFORMAL TENTED SETTLEMENT (ITS), MANAGED BY URDA
DATE OF DISTRIBUTION	05 MAY 2020	05 MAY 2020
# OF PEOPLE REACHED	251	250
# OBSERVATIONAL SAFETY AUDITS	2	2
COVID-19 SITUATION	DURING-COVID-19	DURING COVID-19

Several tools were used to monitor the distribution. At the distribution, staff carried out both safety audits and a ‘point of distribution’ short, in-person questionnaire. After the distribution, a post-distribution monitoring (PDM) survey was conducted via phone. This report shares findings from the safety audits, and findings from the point of distribution questionnaire and longer post-distribution phone survey 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) in the context of COVID-19 lockdowns and other restrictions.

Methods

GW, CARE and URDA adapted the safety audit from an existing tool used by aid actors like CARE and IRC, and GWI trained staff on how to safely and systematically conduct safety audits. To ensure that the entire

³ Throughout this report, we will use “ITS” interchangeably with “settlement.”

team understood the newly adapted distribution monitoring tools and were comfortable with administering each, separate trainings were held on each tool. The safety audit (observational tool) training began with a review of the purpose of a safety audit and the importance of using gender analysis when observing distributions. The team also reviewed the WHO ethical and safety considerations when conducting research related to gender-based violence in emergencies⁴, spent ample time in the training practicing with the safety audit tool, and planned for data collection.

After introducing the tool and its objectives to the CARE/URDA staff, a 'Gender Analysis Observation Activity' was conducted where participants are asked to take part in an observational gender analysis, walking around the room/office/surrounding area and observing what types of safety risks that may exist for women and girls and taking note of each. Moreover, participants were trained on ethical and safety considerations for GBV-related data collection.

Two safety audits were carried out in each distribution location by inter-agency teams consisting of one staff from each of the two operational partners, URDA and CARE. 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.

Checklist of Key Findings

Findings are first summarized in an easy-to-review checklist and then detailed more thoroughly, before sharing recommendations arising from these findings.

SAFETY AUDIT CHECKLIST			
Location			
Distribution site	Sahel Akkar <i>(Pre-assigne d times)</i>	Mhammra Akkar <i>(Door-to-door)</i>	Notes <i>*Red text denotes areas for improvement</i>
ACCESS			
Clear method for handling complaints	√	√	Additional channels for receiving complaints, in addition to the Shawish, are needed.
Accessible visibility materials for complaints	√	√	Additional channels for communicating distribution information, in addition to the Shawish, are needed.
Clear & timely communication on the distribution	√	√	

⁴ World Health Organization (WHO). (2007) *WHO Ethical and safety recommendations for researching, documenting and monitoring sexual violence in emergencies.*
www.who.int/gender/documents/OMS_Ethics&Safety10Aug07.pdf

<i>Did the distribution start on time?</i>	√	√	Both distributions started on time, however the average time in the unmanaged camp was more due to the challenging weather conditions.
<i>Appropriate behavior of staff/volunteers</i>	√	√	
<i>Inappropriate behavior of staff/volunteers</i>			No inappropriate behavior observed. On the contrary, staff was very supportive by carrying the food parcels on behalf of the PSNs and giving priority to the elderly to collect the aid.
<i>Defined distribution area</i>	√	√	
<i>Separate access points for men and women</i>		√	The URDA-managed ITS had a gate, thus had separate access points for men and women, unlike the unmanaged settlements in Sahel Akkar.
<i>Distribution area is clean and free of dangerous objects</i>		√	Unmanaged ITS in Sahel Akkar had garbage and stray animals.
SAFETY			
<i>Overcrowding at distribution point</i>	√		There was a bit of over-crowding in the unmanaged ITS due to the weather on the day of distribution (it was windy and rainy) with no cover. Staff put in place crowd control measures such as placing the chairs (used to ensure social distancing while waiting) in an area between the houses to minimize wind flow. Recommendation: Provide distribution teams with portable, wind and rain resistant structures in case the site has limited or no options for protecting aid recipients from bad weather.
<i>Adequate crowd control measures</i>	√	√	
<i>Shade/covered area at distribution point</i>		√	In the unmanaged camps, there was no shade or covered area to protect aid recipients from the rain
<i>Ratio of male to female staff/ volunteers</i>	Equal women	Equal sex-ratio	This is one of the Phase 1 recommendations applied to these distributions.
<i>More male than female staff</i>			The staff was divided equally among females and males.

Alternative food parcel collectors	√		Recipients who wished to send alternatives to collect the aid informed URDA staff beforehand when they called to remind them of the distribution.
Active measures in place to prevent or mitigate SEA	√	√	PSEA helpline numbers were shared with the aid recipients. Female staff was present during all times of distributions in both location.
Interactions between taxi drivers and aid recipients			Distributions occurred within the settlements where recipients live, therefore there was no interaction with taxi drivers.
Handwashing facilities available		√	Handwashing facilities were not visible in the unmanaged ITS. At a minimum, future distribution teams should install a mobile handwashing station to ensure COVID-19 safety practices can be followed.
Refugees not on the list registered on the spot and distributed food parcels	N/A	N/A	All 501 families targeted by URDA received food parcels.
DIGNITY			
Model of distribution considers the dignity of aid recipients	√	√	Door-to-door distribution was reportedly a safe and comfortable modality to the aid recipients considering the weather conditions (rainy) at the day of the distribution. On the other hand, this was a bit challenging at the pre-assigned times distribution as there was no shade/cover to protect the aid recipients from the rain.
Latrines at the distribution point	√	√	Latrines are present but are not visible and it is unclear whether they are publicly available
Latrines are lockable		√	Not visible in the unmanaged ITS
Latrines are sex-segregated		√	Not visible in the unmanaged ITS; in the managed ITS they are understood to be sex-segregated but not visibly marked as such
Latrines have visibility and are well lit		√	Latrines were visible and well-lit at the managed ITS but not the unmanaged ITS.
PSNs treated with respect at distribution	√	√	PSNs were given priority in terms of support. For example, staff supported elderly by

			carrying their boxes into the tent keeping social distancing measures in place.
EQUITY OF THE DISTRIBUTION			
<i>Everyone received the same agreed upon food parcel content</i>	√	√	All aid recipients received the same agreed upon food parcel content at each distribution site.
<i>Do vulnerable individuals receive their due ration?</i>	√	√	All vulnerable individuals received their due ration at each distribution site.
INFORMATION ON THE DISTRIBUTION			
<i>Informed about criteria for receiving food parcels</i>	√	√	All aid recipients were informed of criteria for receiving food parcels at each distribution site. However, this was done by passing all information through the Shawish and therefore does not adequately account for the potential risk. Multiple information channels should be used.
<i>Informed of changes to the criteria</i>	√	√	There were no changes to criteria at each distribution site.
<i>Information dissemination for vulnerable groups</i>	√	√	Information cards were distributed to all aid recipients
<i>Pre-address understood by all aid recipients</i>	√	√	
<i>Persons with special needs (PSNs) participated in post-distribution monitoring (PDM)</i>	√	√	A short questionnaire was administered to a sample of aid-recipients, including PSNs, as well as a follow-up phone survey. These findings are captured in separate reports.

Main Findings

Access

Method for handling distribution complaints

In both distributions, CARE and URDA staff were identified as wearing their respective organization's vests for visibility purposes. In terms of access to information, a safety auditor in Mhammra stated that the beneficiaries in the managed ITS had a clear method of handling complaints due to the presence of the *Shawish*, (usually defined as the person in charge and the most powerful decision maker in the ITS) to whom they would approach in case of such incidents.

In the unmanaged ITS in Sahel, one safety auditor was approached by many refugee women, who expressed frustration about their lack of awareness on how to submit a distribution (or other)-related complaint. They were thankful the team shared and explained a leaflet (see Annex A) in addition to hotlines for PSEA-related complaints, all in Arabic.

Annex A:

جميع المساعدات الإنسانية هي مجانية. من غير المسموح لأي أحد أن يطلب منك أي خدمات مالية، جنسية أو غيرها بمقابل الحصول على هذه المساعدات. في حال واجهت أي سوء سلوك: قبل، خلال أو بعد إستلام من قبل منظمة كير الدولية في لبنان و (الجمعية الشريكة)، يمكنك الإبلاغ بأمان وسرية من خلال التواصل مع منظمة كير الدولية في لبنان عبر الإتصال، أو إرسال رسالة صوتية أو خطية على الرقم التالي: 81212331. لن يمنعك الإبلاغ من الحصول على المساعدة

All humanitarian aid is free. No one can ask you for any financial, sexual or other services in exchange for this aid. In case you faced any inappropriate behaviour: before, during or after receiving by CARE International in Lebanon and (the partner organization), you can report safely and confidentially by contacting CARE International in Lebanon through calling or sending voice or text message on the following number: 81212331. Reporting will not prevent you from getting assistance.

Communication around schedule and status update; timeliness of distribution

The *Shawishs* were the focal points for communicating distribution information in all distribution sites. Prior to distribution, URDA staff communicated with the *Shawishs* who, in turn, verbally communicated the time and date of distribution to the aid recipients. ‘Shawish’ is the term used for an ITS leader, typically a Syrian or Lebanese community leader who acts as a gatekeeper of information about aid distributions and other important events. *Shawish* are the primary brokers between refugees living in informal tented settlements and aid workers, municipal officials, employers, security agents, or journalists.⁵

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 the Recommendations, using multiple and varied points for information sharing and communication (i.e., people, women’s organizations, hotlines, SMS, billboards, dramas, etc.), instead of concentrating information in one or a few interlocutors, is one way to minimize SEA risk.

Layout, accommodation, and cleanliness of distribution points

The unmanaged ITS in Sahel did not have a defined area in which the distribution was conducted and there were no separate access points for men, women and persons with specific needs (PSNs). Alternatively, the managed ITS distribution site in Mhammra was defined by a large gate with adequate crowd control measures with a guard, especially when the distribution was taking place.

⁵ “Whether a camp receives aid, whether farmers hire its residents, and how many security raids it endures all depend on the skill, savvy, and connections of its *Shawish*.” For more on the extremely powerful role of the *Shawish* in administering humanitarian aid and other forms of assistance in Lebanon, see for example: Dziadosz, Alexander, “State of Exception”, *Harper’s Magazine*, November 2020. <https://harpers.org/archive/2020/11/state-of-exception-lebanon-refugee-crisis>.

Safety

Crowding and crowd control

Distributing food parcels to smaller groups of aid recipients at pre-assigned times in itself served as a useful measure of crowd control; hence the distribution point in Sahel was not overcrowded. The team placed plastic chairs one meter apart in two sex-segregated lines for each group of 20 aid recipients. In one of the unmanaged ITS, two of the aid recipients started negatively shouting at each other due to personal disputes while waiting in line to receiving the assistance. This escalated into a physical fight which was eventually stopped by their family members and neighbours who separated the two men. One of the men went back to his tent and then only came back to receive the food box. The other man went back to the tent and sent his son to receive the box on his behalf.

In the managed ITS in Mhammra, the door-to-door distribution modality meant that crowding was not an issue, as food parcels were delivered directly to recipients' households. Distributors maintained adequate spacing during these household visits (due to COVID-19 social distancing measures). Distributors wore vests with URDA or CARE logos.

Waiting area attributes and accommodation for PSNs

In Sahel, there was no shade or covered area to protect aid recipients from the elements while waiting for the distribution, which proved challenging on one day of the distribution as it was raining. In Mhammra on the other hand, recipients were waiting inside their tents as aid was delivered to their doors.

Timing of distribution & registration details

In both settlements, the distribution timing was similar with an average of 4 hours each (10am-3pm in Mhammra and 11am-3:30pm in Sahel) to deliver to all 501 aid recipients, both starting in the morning and ending in the afternoon. In the URDA-managed settlement in Mhammra, the 250 food parcels were delivered to all families as this is the number of households present in the settlement. In the unmanaged settlement in Sahel, the same number of food parcels (251) was distributed to families identified as vulnerable according to URDA criteria. In one of the unmanaged settlement, other Syrian refugee families, in addition to Lebanese nationals residing in the settlements or nearby, approached the staff asking if they can register for assistance. URDA staff informed them of the process and that they would communicate this need to relevant organizations who might be able to provide support.

Staffing and volunteers

The ratio of female and male staff and volunteers is below. The larger number of staff present during distribution at the unmanaged settlement was due to the more challenging circumstances within an unmanaged settlement.

Type of distribution	Location	# female staff.	# female volunteers	# male staff	# male volunteers	Totals
Door-to-Door distribution	Mhammra (managed settlement)	2	-	2	-	4

Pre-assigned times distribution	Sahel (unmanaged settlement)	3	-	2	1	6
Ratio of female: male staff/volunteers overall:				<i>Approx. 5 females: 5 males</i>		

Sexual exploitation and abuse (SEA)

No incidents were reported. In terms of SEA risks, in addition to the risks noted in other sections of this report, in Sahel several tents had ununlockable doors which may increase risk of SEA or other abuse or theft post-distribution, as those households have no way to secure the goods they received.

Dignity

In Sahel, where groups of 20 people came at pre-assigned times, there was a large space that had pre-placed chairs spaced at 1 meter for social distancing. Unfortunately, one safety auditor reported witnessing visible trash throughout the ITS site. In contrast, both safety auditors in Mhammra said the managed ITS was extremely clean, organized with no visible trash.

Several alternative food box collectors were identified, either through a prior phone call or during the distribution in both distribution locations. In Sahel, some of the women recipients bought their children with them to help carry the food box. In the managed ITS in Mhammra, URDA male staff (with the presence of a female staff) supported the recipients, especially PSNs, by placing the food box directly on the front door area of the tents, taking into account social distancing and not entering the tent fully.

Both safety auditors in Mhammra highlighted the positive outcome of the door-to-door modality, which they believe reduced the sensitive circumstance of receiving aid that might be humiliating to some of the recipients.

Latrines

In Mhammra, all latrines were identified as lockable and sex-segregated by “awareness of the residents”; however, no signs were visible on the door nor did they have light. In the unmanaged ITS, facilities were not visible nor indicated by signs, which suggests that the aid recipients who live there are otherwise made aware how to access latrines.

Equity of Distribution

All safety auditors reported that in both distributions, everyone received the same agreed-upon food box. There was no discrimination observed by age, sex, or disability.

Information on the Distribution

Across both distributions, aid recipients from the Syrian refugee community were informed of the criteria for receiving food boxes by the *Shawish*, who disseminated the information verbally after being informed by URDA staff about the location and timing. All communication was done in Arabic.

Follow Up

Issues identified during the distributions for immediate follow-up, and details of actions taken:

Location	Action	Person Responsible	Done
Sahel	Inform relevant agencies of Syrian refugee families & Lebanese host community who would like to register for assistance.	URDA	URDA Focal point ensured URDA has the targeted list of beneficiaries in the camps and will deliver assistance if in line with their needs.
Sahel	Women and girls reported they do not have access to complaint-services in their area and lacked information on who to call to file a complaint or ask for information.	LF/CARE	A list of helpline numbers was provided to the PSNs
Mhammra	Women and girls asked if URDA/CARE can conduct awareness sessions on parenting skills.	LF/CARE	Request was shared internally within CARE and URDA. The helpline and accountability officer in CARE is looking to detect NGOs for such services. Moreover, the helpline number was shared in the information card and it was explained that they can call and ask support for such services.

Recommendations

- 1. Specialized childcare volunteers during distribution:** Women often were observed coming to distributions with small children, with difficulties supervising them and attending to the distribution simultaneously. A dedicated mother/childcare space staffed by specialized volunteers will help to provide a safe, clean, and nurturing environment for both distributors and aid recipients.
- 2. Sex disaggregated lines.** Women reported that sex-segregated lines make them more comfortable. This can also be defined by a sign and/or rope to divide both lines.

3. **Ensure gender-balance in distribution teams:** Have equal if not more, female staff present during all process of distributions, particularly those interfacing directly with women aid recipients. This could include women's groups and other community groups (including the women's co-researchers in this project) who are experts in contextual safeguarding.
4. **Ensure all latrines are sex-segregated, lockable, and provide accommodation for PSNs** such as the elderly and those living with disabilities. In Mhammra, residents indicated latrines are understood to be sex-segregated, however signage could be provided. In Sahel, latrines and handwashing facilities were not visible; follow up should be conducted to ensure these communities have adequate WASH access particularly considering the pandemic. Latrine accommodation for PSNs is also needed specifically.
5. **Ensure the presence of female staff at all times when aid is delivered at household level.** Staff could be either all female, or mixed gender teams. This can reduce risk of SEA especially towards vulnerable groups such as widows and single women.
6. **Create/utilize multiple and diverse methods for sharing information and receiving complaints:** Information is power, and Empowered Aid's phase 1 findings highlight how important it is to create/use multiple gender-responsive and inclusive channels for sharing information. It is also important to provide feedback mechanisms such as complaint boxes and hotline services.
7. **Additional complaint mechanisms**, such as women community workers or networks, are needed to ensure that there are multiple and diverse ways to report complaints.
8. **Establish defined areas for distributions with sex-segregated, crowd control measures.** These may include a controlled area with a restricted sex-segregated entrance and exit.
9. **Identify safe ways to aid transport of heavy items.** For example, if aid recipients and particularly PSNs require help carrying the parcel into their tent, this can be done by mixed-sex teams of male and female staff or volunteers.
10. Ensure **trained staff are present** to identify and monitor the distribution process, paying attention to refugees with specific needs.

**EMPOWERED AID - Lebanon
Food Parcel Post Distribution Monitoring
Household Phone Survey Results**

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ANNEX I. 13

Background

In May 2020, URDA, CARE Lebanon, and the Global Women’s Institute distributed 501 food parcels to a targeted group of Syrian refugees who met UNHCR vulnerability criteria. 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).

Specifically, this food distribution was designed using recommendations made by Syrian refugee women and girls during Phase I of the Empowered Aid study, in which they described the SEA risks they face when accessing distributions and ways to minimize these risks.¹ 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

¹ 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.

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.

Both distributions took place on May 5, 2020 during the ‘general mobilization state,’ when safety measures were put in place by the Lebanese Government in response to the COVID-19 pandemic. Based on recommendations from Syrian women and girls during Phase I of the Empowered Aid project on how to reduce risk of SEA during aid distribution, two types of adapted distribution modalities were used: (1) a targeted, pre-assigned times distribution modality, and (2) a door-to-door distribution modality (see Table 1).

Table 1. Post Food Distribution Monitoring Overview

Distribution Modality	Pre-Assigned Times Distribution	Door-to-Door Distribution
Distribution Location	Sahel Akkar	Mhammra Akkar
Informal Tented Settlement (ITS) Type	Unmanaged	URDA-Managed
Date of Distribution	May 5, 2020	May 5, 2020
Number of Food Parcel Recipients	251 (102 women, 149 men)	250 (218 women, 32 men)
Number of Recipients Interviewed	65 (26%)	88 (35%)

The pre-assigned time distribution allowed groups of 20 aid recipients to receive aid at a time and took place in an unmanaged informal tented settlement (ITS)² in Sahel Akkar. The door-to-door distribution took place in an URDA-managed ITS in Mhammra Akkar.³

The Empowered Aid research team, in partnership with URDA, carried out a Post Distribution Monitoring Survey by phone after each food parcel distribution to investigate recipient perceptions of safety, risk and satisfaction during each type of distribution.

The findings of the phone survey are summarized here, and alongside the other distribution monitoring conducted (safety audits and brief in-person interviews, summarized in separate reports), provide recommendations for improving this specific distribution as well as general

² In this report, we will use “informal tented settlement,” “ITS,” and “settlement” interchangeably.

³ Unmanaged settlements are characterized by the spontaneous and undefined nature of their layout, often with tents positioned at random, visible garbage, and animals such as dogs and cats roaming. Managed settlements have defined borders and physical layout of tents, often with a security gate and little visible garbage.

information that can be used by all distribution actors to improve the safety of aid recipients, particularly women and girls, in the context of COVID-19 lockdowns and other restrictions. It is important to note that, given the context of COVID-19, some of the challenges reported in distribution monitoring may reflect the strict conditions of Lebanon's 'general mobilization state' (put in place to limit the spread of COVID-19) rather than challenges specific to the distribution being monitored.

Methodology

Research Team

The GWI team consists of two researchers who, due to COVID travel restrictions, now provide technical guidance and training through fully remote modalities (Zoom). In Lebanon, two Empowered Aid research staff from CARE worked with four partner staff from URDA's distribution and protection teams. GWI and CARE led data collection training with all research team members. Trainings centered on gender & gender-based violence (GBV). Core concepts included SEA, principles of participatory research, centering women and girls, research ethics,⁴ the data collection tool, and referral processes, and protection against exploitation and abuse (PSEA)/COVID-19 measures. Team members practiced obtaining informed consent and delivering the household survey tool. Special attention was paid to the new questions on safety and risk pertaining to the Empowered Aid study.

Sampling Approach

The research team conducted a census of all 501 aid recipients across both food distribution modalities. Due to non-response and issues with some of the phone numbers in the list received from UNHCR, the team was able to conduct interviews with 31% (153) of aid recipients: 26% (65) of those who attended the pre-assigned times distribution, and 35% (88) of those who received the door-to-door distribution.

Data Collection Protocol

Data collectors reached out to aid recipients by phone approximately one and a half months after the distribution, asking to speak with the recipient. Data collectors called all recipients and noted in the tracking sheet if recipients answered, did not answer, or if there was a problem with the phone number or connection. The recipient was asked if it was a good time to speak; if so, the data collector proceeded with informed consent and if not, asked to schedule another time. After obtaining informed consent and checking that the recipient felt they could safely and comfortably talk, data collectors conducted the interview verbally, noting recipient responses in an electronic Kobo survey form.

⁴ Drawing on WHO's ethical and safety considerations when conducting research related to sexual violence in emergencies: https://www.who.int/gender/documents/OMS_Ethics&Safety10Aug07.pdf

Information and referrals

Referral pathways were in place for any recipients who expressed need for humanitarian services or indicated lack of safety, need for psychosocial support, or experience of PSEA or GBV. Recipients were also given information about how to submit complaints around the aid distribution through established mechanisms, i.e. the UNHCR hotline. General information on aid feedback and PSEA reporting mechanisms, and COVID-19-related safety and support measures, was provided as part of each interview.

Findings

Description of Sample

The survey was carried out among 153 Syrian refugee food parcel recipients, 65 who were part of the pre-assigned times distribution modality, and 88 who were part of the door-to-door distribution modality. Most survey respondents were female (74%), and 70% reported that they were from male-headed households. Among respondent households, most household heads were married (77%), followed by widowed (12%). All but one of the respondents were living in a tent in an informal settlement, and all respondents were residents of Akkar (a region in the north of Lebanon).

Among those who participated in the pre-assigned times distribution, 49% of respondents were female as compared to 92% female among those who participated in the door-to-door distribution. Average family size and household size were slightly larger among those attending the pre-assigned times distribution (Table 2).

Table 2. Sample demographics by distribution modality

Demographics:	Distribution Modality Number (%) or Mean (SD)		Overall (n=153)
	Pre-Assigned Times / Unmanaged ITS (n=65)	Door-to-Door / Managed ITS (n=88)	
Gender of respondent:			
Female	32 (49%)	81 (92%)	113 (74%)
Male	33 (51%)	7 (8%)	40 (26%)
Age of respondent:			
10-25	12 (19%)	21 (27%)	33 (23%)
26-40	29 (45%)	33 (42%)	62 (44%)
41-55	14 (22%)	18 (23%)	32 (22%)
56+	9 (14%)	6 (8%)	15 (11%)
Gender of household head:			
Female	15 (25%)	20 (24%)	35 (25%)
Male	45 (75%)	63 (76%)	108 (75%)

Marital status of household head:			
Married	45 (70%)	33 (77%)	78 (73%)
Widowed	5 (8%)	8 (18%)	13 (12%)
Divorced/separated	7 (11%)	2 (5%)	9 (8%)
Single (Never married)	7 (11%)	0	7 (7%)
Family size	5.5 (SD 3.76)	3.9 (SD 1.53)	4.6 (SD 2.87)
Household size (no. of people living in HH including non-family)	5.7 (SD 4.99)	4.4 (SD 3.35)	5.2 (SD 4.44)

Note: All percent are valid percent's (missing excluded).

Freedom of movement

We asked several questions to understand freedom of movement among all refugee aid recipients, both before and since the onset of the COVID-19 mobilization restrictions imposed by the Lebanese government. Before COVID-19 restrictions, 27% of respondents reported that no movement was possible, 46% reported accompanied movement was possible, and 28% reported unrestricted movement was possible. After COVID-19 restrictions were put into place, movement was reported to be more limited.

Figure 1. Freedom of movement related to COVID-19 among all recipients

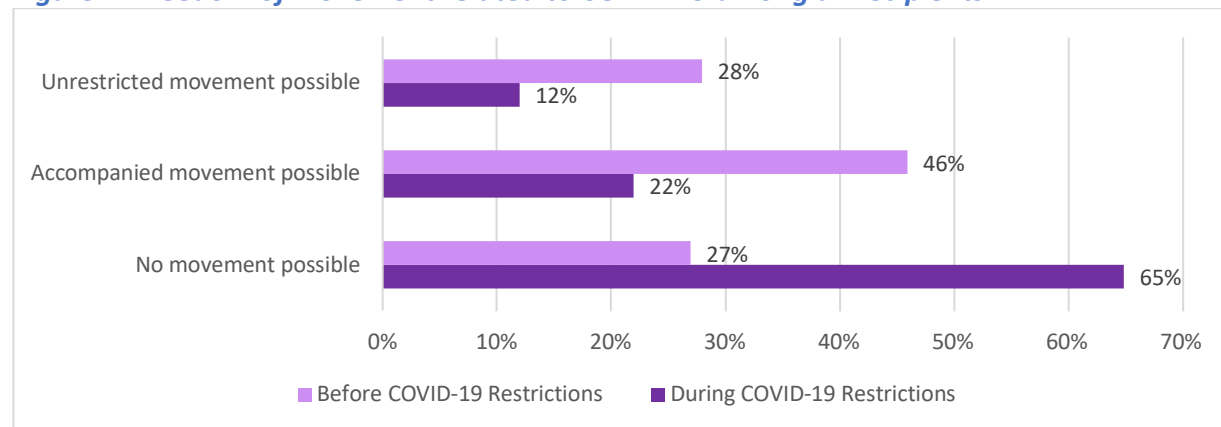
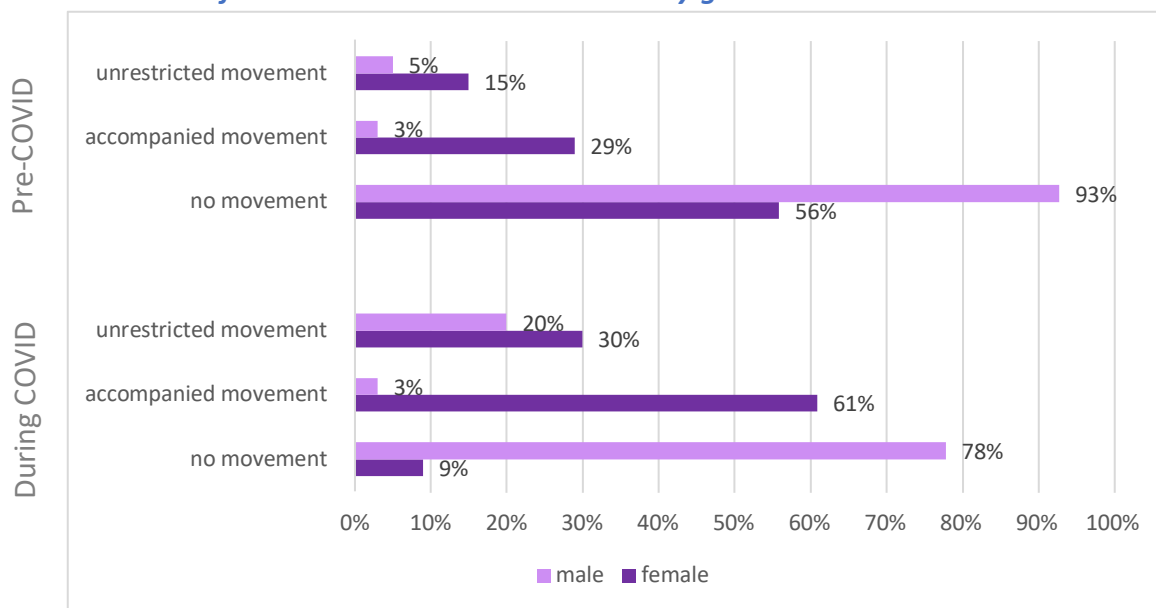
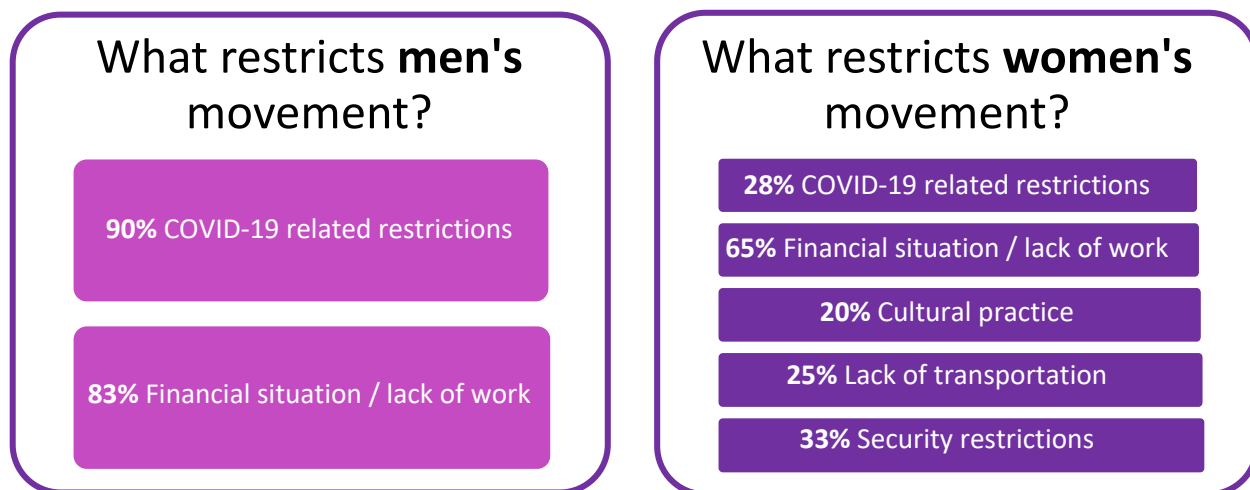


Figure 2. Freedom of movement related to COVID-19 by gender



Before COVID-19 restrictions, female Syrian refugee respondents reported greater freedom of movement than males ($p=.000$), with 78% of males reporting no movement possible compared to only 9% of females. This could be related to the fact that during the protests in Lebanon in early 2020, there was increase in checkpoints and renewing legal stay paperwork became more difficult. Women were less likely to be stopped at checkpoints, so they often went out on behalf of the family. It should be noted that this could potentially increase women’s exposure to SEA or GBV risk.

Overall, men’s movement was more restricted than women’s under COVID-19 related conditions, with 93% of male refugees reporting no movement possible compared to only 56% of women ($p=.000$). Furthermore, 15% of women reported ability for unrestricted movement since COVID-19, compared to only 5% of men. Despite this difference, we see that accompanied movement was the most common form of movement for women before the pandemic (61%); but this freedom has been reduced by half since the pandemic, with only 29% reporting that accompanied movement was possible. This was likely related to men’s restricted movement, as they previously accompanied women.



When asked in general what things restrict their freedom of movement (not specific to COVID-19), men and women had statistically different responses across the board. Men reported being restricted by both COVID response (90%) and by their financial situation or lack of work (83%). Women also reported these reasons for restriction, but to a lesser degree. Women further cited constricted movement due to cultural practice (20%), lack of transportation (25%) and security restrictions (33%). Restrictions due to cultural practice were significantly greater among younger respondents (ages 10-25), both male and female, as compared to respondents over age 25 (p=0.000).

Finally, all respondents from the unmanaged ITS reported more restricted movement both before and during COVID-19, compared to those from the URDA-managed ITS. Unmanaged ITS residents also reported their movement to be more impacted by the COVID response (66%) than those in the managed ITS (28%). Conversely, managed ITS residents reported movement restricted by cultural practices (22%) at higher levels than those in the managed ITS (6%). These findings appear to reflect the same gender patterns in freedom of movement noted above, as the managed ITS had a higher percent of female respondents than the unmanaged ITS (92% vs. 49%, respectively).

Satisfaction

When asked about overall satisfaction with the food distribution process, 125 (82%) responded that they were satisfied. Satisfaction with various aspects of the food distribution process varied (see Table 3), with the majority across all aspects reporting satisfaction.

Table 3. Satisfaction with various aspects of the food parcel distribution

How satisfied were you with...	Less than completely satisfied
Info about date/time	4 (3%)

<i>Info about contents of food parcels</i>	8 (5%)
<i>Info about eligibility</i>	13 (9%)
<i>Distance to distribution point*</i>	-
<i>Hours/schedule of distribution</i>	5 (3%)
<i>Treatment by staff/volunteers at distribution point</i>	12 (8%)
<i>Timeliness/keeping on schedule</i>	3 (2%)
<i>Waiting conditions*</i>	6 (5%)
<i>WASH facilities*</i>	2 (2%)

Note: All percent are valid percent's (excluding missing, non-response, or not applicable)

*Not applicable to door-to-door distribution

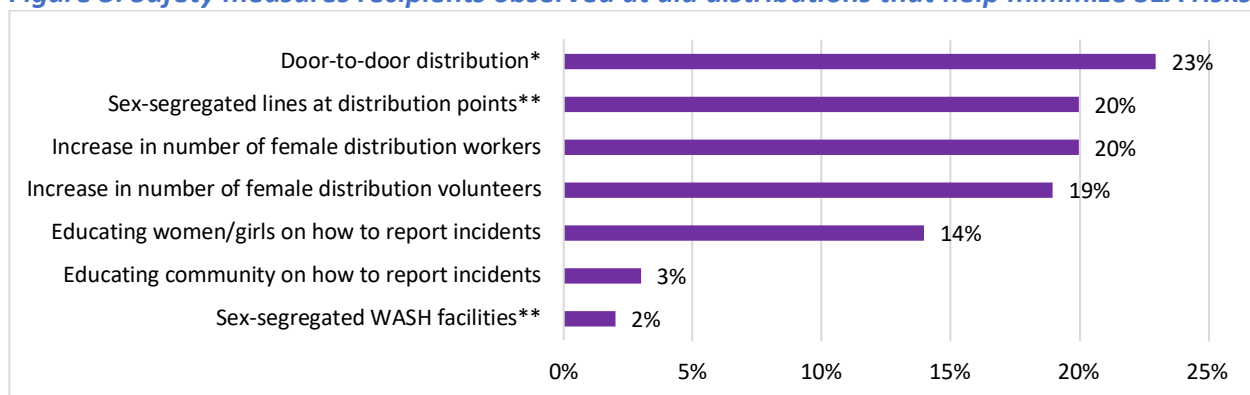
Female aid recipients were significantly less likely to report being completely satisfied with the distribution process (75%) compared with male aid recipients (95%) across both the door-to-door and the pre-assigned times distribution modalities ($p=.011$). Additionally, satisfaction appeared to increase with age, with those under 25 reporting only 76% satisfaction, while those 56 and over were completely satisfied, though the difference was not statistically significant. More respondents in the pre-assigned times distribution reported being satisfied with the distribution process (88%) compared to those in the door-to-door distribution (77%), though the difference was not significant.

Perceived SEA risk or safety

Respondents across both distribution modalities overwhelmingly reported “feeling safe” at all points during the food parcel distribution (99.3%). The single respondent who reported feeling unsafe at any point, expressed uncertainty the location of the distribution. Similarly, when asked about feelings of fear associated with different points during the distribution, almost all recipients said they were “free from fear” at all points. One respondent was “somewhat fearful” during the registration and verification exercises associated with the distribution. Another was “somewhat fearful” while transporting the food parcel from the distribution point. There was no statistically significant difference between the two distribution modalities.

Further, when asked to select any safety measures they observed during the distribution that may limit potential SEA risks to women and girls, respondents pointed to a few key measures: female distribution workers and volunteers, sex-segregated lines, education on how to report incidents, and the door-to-door delivery modality.

Figure 3: Safety measures recipients observed at aid distributions that help minimize SEA risks



*Only applies to the door-to-door modality; **Only applies to the pre-assigned times distribution
Note: all percents are valid percents.

Overall, respondents noticed female distribution workers/volunteers as a key safety measure, with 28% of males and 17% of females noting the presence female distribution workers and volunteers (not a statistically significant difference). One female respondent stated: *"We feel safe as women and girls when we deal with women workers."*

Aid recipients observed that the education of community members on how to report incidents at a distribution was an important safety measure. Male respondents (8%) noted having observed this safety measure more often than female respondents (1%), which was statistically significant at the .05 level ($p=0.024$). Respondents also observed that the implementation of sex-segregated lines was a key safety measure. At the pre-assigned times distribution, 30 respondents (46%) noticed that sex-segregated lines when waiting for aid distribution was an important safety measure. Finally, 35 recipients (40%) from the door-to-door distribution selected "other" and specified that the door-to-door modality was a key safety measure, with participants under age 35 being more likely to observe this as a key safety measure ($p=.016$). Participants stated:

"The door-to-door modality was very useful, especially for women, as they do not have to leave their tents" – female respondent

"I felt safe because the box was delivered to the tent" – male respondent

"We as women felt comfortable because staying in our tent protect us from various difficulties including holding heavy boxes or being exploited from taxi drivers" – female respondent

Taking safety measures first proposed by women and girls during Phase I of the Empowered Aid study, we asked aid recipients to select the most helpful measures to apply universally to improve

aid distributions. Below we have ranked the safety measures accordingly and presented the top six measures selected. Participants could select as many safety measures as they wished.

Table 4. Aid Recipient Prioritization of Safety Measures

Of the measures listed, which do you think would be the most helpful to implement for all distributions to make women and girls feel safe?	Total Votes	% of females selecting this measure (n=113)	% of males selecting this measure (n=40)
Sex-segregated lines at distribution points	72	53%	30%
Increase in number of female distribution workers	71	48%	43%
Transport support to/from distribution	49	43%	3%
Educating women/girls on how to report incidents	47	41%	3%
Increase in number of female distribution volunteers	46	33%	23%
Sex-segregated WASH facilities	31	27%	3%

Sex-segregated lines at distribution points was the most commonly prioritized item, with female respondents being significantly more likely to select this response than male respondents ($p=.012$). This was followed by an increase in the number of female distribution workers, which respondents from the door-to-door distribution were significantly more likely to select ($p=.043$). For transport support, which was prioritized third, female respondents were much more likely to select this response than their male counterparts ($p=.000$). Educating girls/women on how to report incidents was also significantly more likely to be selected as a priority by women than men ($p=.000$), more likely to be prioritized by respondents under age 25 than respondents over 25 ($p=.050$), and more likely to be selected by recipients during the door-to-door distribution modality ($p=.000$). There were no statistically significant differences in who prioritized an increase in the number of female distribution volunteers. Additionally, female respondents were significantly more likely than males to select sex-segregated WASH facilities at distribution points as a priority measure ($p=.012$).

Violence, exploitation and abuse

The Empowered Aid team piloted both indirect and direct questions to understand risk of SEA around the distribution and assess broader observations and recommendations for reducing risk of SEA in other distributions. In addition to the above section, where respondents were asked about fear associated with different SEA risks that can be present in distributions, we also included a direct question about experience of violence or SEA related to the distribution. Trained staff and referral protocol were put into place to respond if incidents were reported. While the tool was initially designed to be conducted in-person, due to COVID-19 it was instead conducted remotely by phone, where it is harder to build respondent-interviewer rapport and ensure that privacy is maintained. These factors challenged the ability to ask such sensitive questions.

Feasibility

Both the pre-assigned times food distribution modality and the door-to-door food distribution modality were feasible to execute. In comparison to a 'normal distribution', fewer logistical resources, such as transportation and venue rental, were required. Risks/challenges associated with travel to and from the distribution point were also reduced. Given the circumstances of COVID-19, the door-to-door distribution was viewed as a preferable option by some of the interviewed aid recipients to meet social distancing and non-congregant requirements under the mobilization restrictions established in Lebanon.

Recommendations

1. **Prioritize in-person Post Distribution Monitoring surveys rather than phone-based:** Phone PDM surveys may result in loss to follow up by phone for a variety of reasons. Many beneficiaries were unreachable due to factors such as deactivated lines due to lack of financial means and access to livelihood opportunities; secondary movement; and, unwillingness to speak due to high levels of stress and anxiety.
2. **Ensure mixed-gender teams when conducting door-to-door aid distribution:** Mixed-gender teams can reduce risk to women and girls and are preferred by women and girls, and were noted as important when home visits are conducted.
3. **Ensure recipients are aware of the schedule of the distribution, and call ahead to alert them that a distribution team is on its way:** If it is necessary to meet outside the home for any reason, ensure the meeting point is nearby and easy to reach, is in a safe location, and can avoid stigma of being seen receiving aid in a public location if this is a concern.
4. **Reinforce the presence of female distribution workers and volunteers** who can be approached for complaints and/or raise awareness on how to report an incident. Creating an all-female distribution group.
5. **Ensure sex-segregated lines and WASH facilities at distribution sites:** Sex-segregated lines and WASH facilities were observed to be an important safety measure for women and girls during a distribution.
6. **Educate women and girls, as well as the broader community, on how to report incidents occurring surrounding aid distribution:** Ensure and share an easily reachable helpline widely, taking into considerations PSNs.
7. **Talk with women and girls to support gendered needs around safely traveling to and from distribution points & transporting aid.** Women report feeling unsafe traveling to/from distribution sites because this presents risk factors for sexual harassment or abuse, particularly related to taxis. *Conducting door-to-door distribution will mitigate this risk, or supporting women and girls to be accompanied on the way to/from distributions.*

Annex I.

Annex Table 1. Freedom of movement related to COVID-19 among all recipients

	Before COVID-19 Restrictions	During COVID-19 Restrictions
No movement possible	27%	65%
Accompanied movement possible	46%	22%
Unrestricted movement possible	28%	12%

Annex Table 2. Freedom of movement related to COVID-19 by Gender

	FREEDOM OF MOVEMENT BEFORE COVID-19 RESTRICTIONS			FREEDOM OF MOVEMENT DURING COVID-19 RESTRICTIONS		
	No movement possible	Accompanied movement possible	Unrestricted movement possible	No movement possible	Accompanied movement possible	Unrestricted movement possible
FEMALE	9%	61%	30%	56%	29%	15%
MALE	78%	3%	20%	93%	3%	5%

Note: all differences between female and male respondents are statistically significant at the $p < .05$ level

**Empowered Aid - Lebanon
Food Distribution (Pilot 2): Point of Distribution Questionnaire
Summary of Findings**

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Executive Summary

In May 2020, URDA, CARE Lebanon, and the Global Women’s Institute distributed 500 food parcels to a targeted group of Syrian refugees who met UNHCR vulnerability criteria. 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

With the onset of COVID-19, Phase 2 was adapted to not only test the recommendations arising from refugee women and girls in Phase 1, but also to understand how the pandemic affected their access to information, concerns related to SEA and other forms of violence, and knowledge of reporting

¹ For more information about Empowered Aid, visit <https://globalwomensinstitute.gwu.edu/empowered-aid>. Findings from the first phase in Uganda can be found in the report online here: <https://globalwomensinstitute.gwu.edu/empowered-aid-resources>.

mechanisms and services—at a time when refugee communities had few other avenues for communicating this information with aid actors. The findings of the questionnaire are summarized here, and alongside the other distribution monitoring conducted (safety audits and a phone survey), 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) in the context of COVID-19 lockdowns and other restrictions.

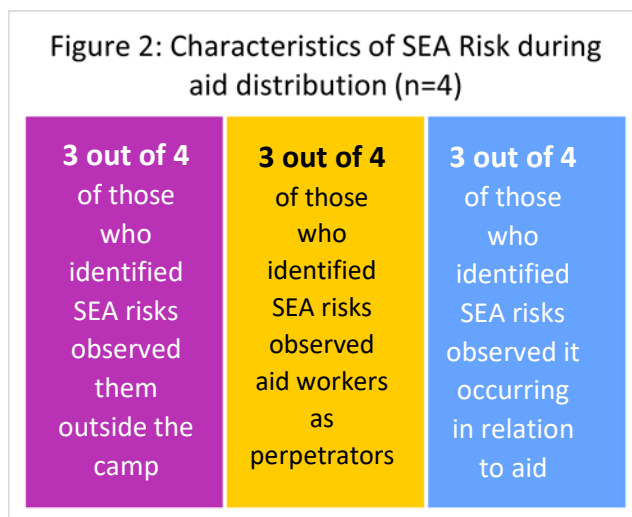
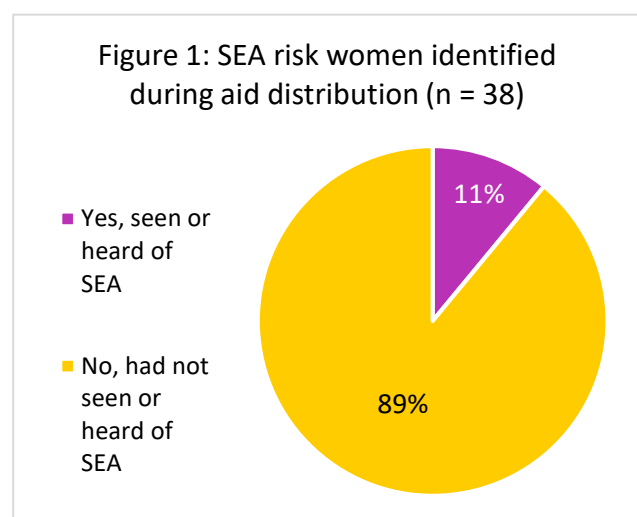
This questionnaire was carried out among a total of 38 adult women (12% of the 320 women included in the distribution; 218 in Mhammra and 102 in Sahel) who attended our food distributions in two sites: an unmanaged ‘informal tented settlement’ (ITS)² in Sahel Akkar consisting of 250 families, and a managed ITS in Mhammra Akkar (250 families).

Key findings

Distribution information was communicated by URDA to the *Shawish*, or leader of the ITS, and respondents also reported the *Shawish* as their most common source of information about aid. A majority of the respondents said they did not feel fear in the distribution process, that COVID-19 prevention measures are practiced in the ITS, and that they do not leave the informal settlement unless there is an emergency. This was especially true among those who lived in the managed ITS.

“Yes, I heard about that [SEA] but outside this camp. No one [does] a good thing unless there is something in return...” – Syrian woman living in Lebanon as a refugee

Of the 38 respondents, 11% (4) reported that they had seen or heard of SEA occurring. Of these, about three-fourths of the incidents described were related to aid, occurred outside the informal settlement, and were perpetrated by aid workers.



² We will use “ITS” and “informal settlement” interchangeably throughout the rest of this report.

In addition to serving as the gatekeeper for information about distribution, the Shawish was also the most commonly-reported provider to whom respondents would report complaints and seek support in the managed settlement.³ The majority of those in the unmanaged ITS said they would go to the URDA staff for support. Other places respondents said they could report complaints and obtain support included reporting to local NGOs, UN/UNHCR, and family members. However, 16% of respondents preferred to remain silent due to previous negative experiences with reporting complaints or obtaining support.

Of those respondents who commented on the quality of the support they received after reporting, 57% (7) reported that the service provider gave no answer and/or took no action after the complaint was filed. 57% (7) also reported a lack of trust in the service provider due to a negative experience or response.

"I don't report because I feel ashamed to ask for help. I prefer to remain silent and there is no place or someone to support us." – Woman living in Lebanon as a refugee

Observed safety measures in the managed and unmanaged informal settlements included sex-segregated lines, sex-segregated WASH facilities/latrines, transport support (particularly for vulnerable groups), more awareness raising and education on reporting and complaint mechanisms among women and girls, increased number of female aid workers at distributions, more door-to-door distributions, and more seating at distributions. All safety measures were less likely to be observed in the unmanaged ITS compared to the URDA-managed ITS.

Recommendations

1. **In these and many other informal settlements in Lebanon, the *Shawish*—local leaders who already hold a great deal of power within aid systems—served as the main source of both information about how to receive aid, and about complaint mechanisms or services if someone has been abused, exploited or otherwise. Information is power and ensuring that power is not concentrated only in the hands of a few is an important part of SEA risk mitigation.** URDA, along with women's organizations active in these areas, should work to establish multiple, varied methods for information on aid distributions and SEA/protection reporting in these informal settlements, such as through women's or community organizations, hotlines, and (mobile) helpdesks. For future distributions, information should be communicated via multiple channels, especially those identified below, as women and girls noted them to be most useful (i.e., via community mobilization).
2. **SEA is recognized and observed in these ITSs, often in relation to aid, and is perpetrated by aid workers, yet complaints and response mechanisms are not reported or used.** URDA, CARE, UNHCR, and community actors should work with women's organizations and community-based

³ For more on the extremely powerful role of the Shawish in administering humanitarian aid and other forms of assistance in Lebanon, see for example: Dziadosz, Alexander, "State of Exception", *Harper's Magazine*, November 2020. <https://harpers.org/archive/2020/11/state-of-exception-lebanon-refugee-crisis>.

organizations to hold awareness and information sessions on what mechanisms exist to address SEA and ensure that residents of both managed and unmanaged camps are able to access them. Again, multiple methods should be available and accessible for these populations, especially considering COVID-19 restrictions that make travel more difficult.

3. **Continue to utilize sex-segregated lines and distribution points that have sex-segregated latrines available.** Women and girls from Empowered Aid's findings in Phase 1 and other pilots have reported that these two measures increase their safety and reduce the risk of SEA or other forms of gender-based violence while at distributions. Ensure the elimination of protection threats, especially to women and girls, through **designing lockable, lighted and gender-identifiable toilet facilities** in a proper accessible location during the day and night.
4. **Implement other safety measures and recommendations that women and girls stated increases their safety at distributions but they have not widely observed.** Based on Empowered Aid's findings from Phase 1 and other pilots, this includes increasing female aid workers present, awareness raising on reporting and complaint mechanisms at distribution points – such as through the pre-address, during mobilization, through visual materials, and gender and protection staff present to receive complaints – distributing aid items door to door or home to home, and providing transport support when possible.

Overview and Methodology

The Empowered Aid team worked with partners CARE and URDA to design aid distributions using recommendations made by Syrian refugee women and girls during Phase I of the Empowered Aid study, in which they described the SEA risks they face when accessing distributions and ways to minimize these risks.⁴

URDA, CARE and GWI conducted two food distributions. The first distribution took place in an unmanaged ITS in Sahel Akkar (251 families) and applied the recommendation of distributing aid in small groups at pre-assigned times. The second distribution took place in an URDA-managed ITS in Mhamra Akkar (250 families) and applied the recommendation of distributing items directly to recipients' homes, or "door-to-door."

Both modalities recommended by women and girls coincidentally aligned with COVID-19 health and safety restrictions. It is important to note that, given the context of COVID-19, some of the challenges reported in distribution monitoring may reflect the strict conditions of Lebanon's 'general mobilization state' (put in place to limit the spread of COVID-19) rather than challenges specific to the distribution being monitored.

Several tools were used to monitor the distribution. At the distribution, staff carried out both safety audits and this 'point of distribution' short, in-person questionnaire. Two safety audits were carried out in each distribution location by inter-agency teams consisting of one staff from each of the two operational partners, URDA and CARE. 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. After the distribution, a post-distribution monitoring (PDM) survey was conducted via phone with 30.5% of aid recipients across both sites. The findings of the safety audits, and the PDM survey, are shared in separate reports.

The point-of-distribution questionnaire shared in this report was carried out jointly by one CARE and one URDA staff member among 38 adult women across the two distribution sites. All women recipients were asked if they would like to participate in the questionnaire, and bad weather was the main reason given for declining; given the questionnaire was conducted in a private outdoor space in line with COVID-19 guidance around minimizing indoor interactions. In addition, the questionnaire was developed to be very short (6 questions) to minimize interaction time, yet ensure key information about women's safety and protection needs could be collected at a time when many services were closed or reliant on mobile/virtual forms of communicating with women and girls, which many cannot access. Specifically, the questionnaire collects information on women's access to distribution information, safety and/or SEA risks related to distribution processes, violence-related risks related to the COVID-19 pandemic, and their access to complaint mechanisms and services, as well as their observations on how to make distributions safer. A short consent form was read at the outset, and if verbal consent was given, the interview proceeded. The

⁴ See the recommendations on pages 3-4 of Empowered Aid's [policy brief on reducing SEA risks in food distribution](#), or page 14 of the Empowered Aid [Lebanon Country Report](#).

average time of each interview was ten minutes. Public health measures (i.e., masks, social distancing) were utilized while also ensuring privacy was maintained.

Of the 218 refugee women in Mhammra in the managed ITS, 33 agreed to participate and of the 102 women in Sahel in the unmanaged ITS, five agreed to participate. Managed ITS aid recipients were much more willing to take part in the questionnaire, engaging with the staff and offering thoughtful open-ended responses, while the unmanaged ITS recipients were less willing to engage with the staff and were eager to leave the distribution location. In the unmanaged ITS, aid was distributed to groups of 20 people at a time in a designated location. In the managed ITS aid was brought to each recipient's door. The added privacy and convenience of answering questions at one's home rather than in a common area is one factor that may have encouraged greater participation among women living in the managed ITS.

TABLE 1. FOOD PARCEL DISTRIBUTION MONITORING SUMMARY			
TYPE OF DISTRIBUTION		TARGETED DISTRIBUTION AT PRE-ASSIGNED TIMES (ADAPTED)	DOOR-TO-DOOR DISTRIBUTION (ADAPTED)
LOCATION OF DISTRIBUTION		SAHEL AKKAR ITS (UNMANAGED)	MHAMMRA AKKAR ITS (MANAGED BY URDA)
DATE OF DISTRIBUTION		05 MAY 2020	05 MAY 2020
# OF PEOPLE REACHED		251 (102 WOMEN, 149 MEN)	250 (218 WOMEN, 32 MEN)
DISTRIBUTION MONITORING CONDUCTED	# OBSERVATIONAL SAFETY AUDITS	2	2
	SHORT QUESTIONNAIRES AT DISTRIBUTION SITE	5 (5% OF WOMEN)	33 (15% OF WOMEN)
	PHONE INTERVIEW POST-DISTRIBUTION	65 (26% OF TOTAL RECIPIENTS)	88 (35% OF TOTAL RECIPIENTS)

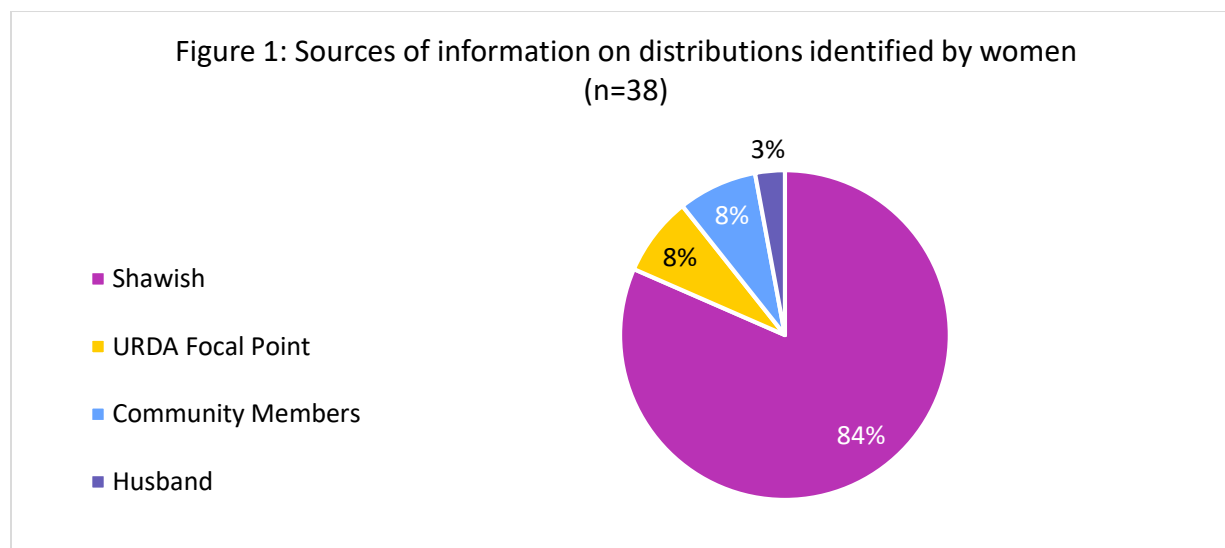
Findings

Information and communication mechanisms

Sources of information on the distribution

'Shawish' is the term used for an ITS leader, typically a Syrian or Lebanese community leader who acts as a gatekeeper of information about aid distributions and other important events. Shawish are the primary brokers between refugees living in informal tented settlements and aid workers, municipal officials, employers, security agents, or journalists.⁵

⁵ For more on the important role of the Shawish in administering humanitarian aid and other forms of assistance in Lebanon, see for example: Dziadosz, Alexander, "State of Exception", *Harper's Magazine*, November 2020. <https://harpers.org/archive/2020/11/state-of-exception-lebanon-refugee-crisis>.



Across both ITSs, women 84% of women reported accessing information on distributions from Shawish (Figure 1). In the managed ITS, 94% (32) of the respondents said they access information on distributions from the Shawish while 8% (3) said they heard from other members of the community, such as friends or family members. Three of the five respondents from the unmanaged ITS received information from URDA focal points, one received information from her husband, and one received information from the Shawish of the ITS.

Methods of receiving information communication

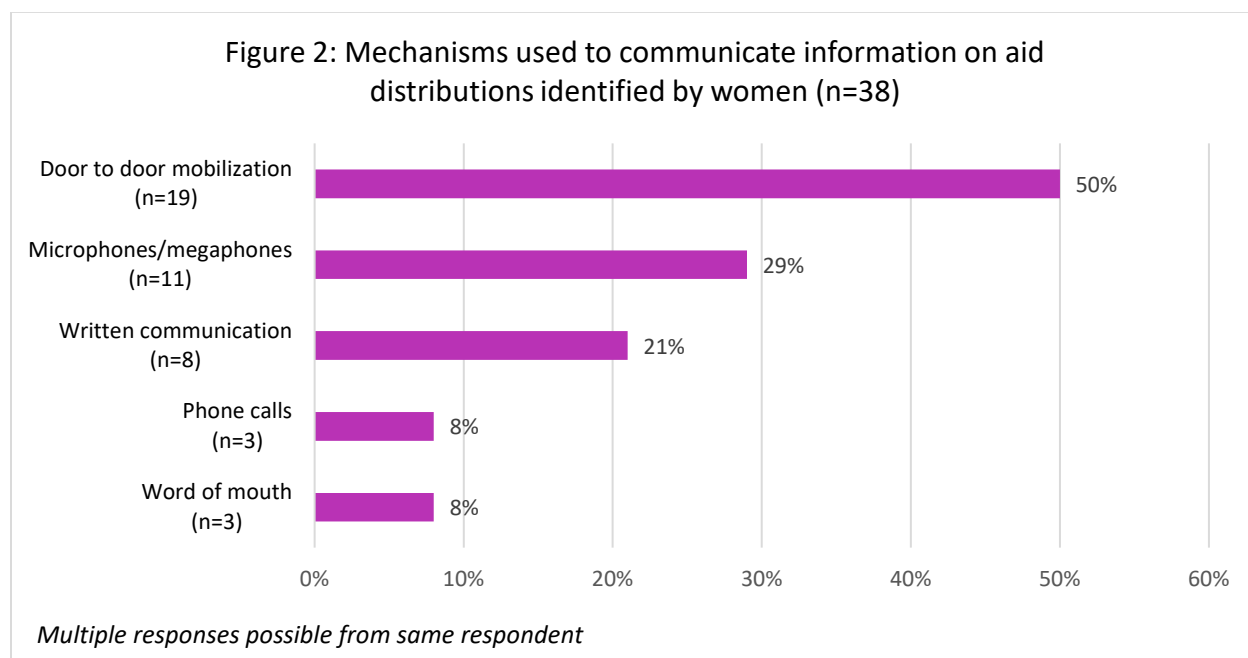
When asked about the most typical methods to communicate information on humanitarian assistance, half of the respondents reported hearing about distributions via door-to-door mobilization, followed by megaphones/microphones (29%), written communication (21%), word of mouth (8%), and phone calls (8%). Respondents who received information door to door commonly mentioned that the governing bodies (i.e., Shawish) of the ITS visited them at their tents to inform them of the distribution. This was the method used to inform beneficiaries of the food parcel distribution for the Empowered Aid pilot.

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 the Recommendations, using multiple and varied points for information sharing and communication (i.e., people, women’s organizations, hotlines, SMS, billboards, dramas, etc.), instead of concentrating information in one or a few interlocutors, is one way to minimize SEA risk.

Respondents who received information through megaphones/microphones stated that the NGO mobilizer of the ITS and his assistant will move through the ITS with a megaphone and make announcements to the community on an upcoming distribution.

Respondents who receive information from written communication said that the governing body of the ITS distributes cards to each family in the ITS one day before the distribution, and during the distribution they show the card to the worker, who gives them back the assistance.

Respondents who receive information by phone call expressed that the NGO staff call them one day before the distribution to make the announcement.



Who do these information mechanisms reach most?

Respondents stated that women are most likely to hear information communicated through door-to-door mobilization because they stay at home and inside the informal settlements more often than men, and because they are more concerned with their family's welfare and therefore listen for distribution information. However, one respondent stated that many men are jobless and now home more often, in which case they hear about the distributions as often as women.

"The Shawish tells the families when a distribution is happening. Women mostly hear about it because men don't worry like women and they don't care if we receive an assistance or not." – Syrian woman living in Lebanon as a refugee

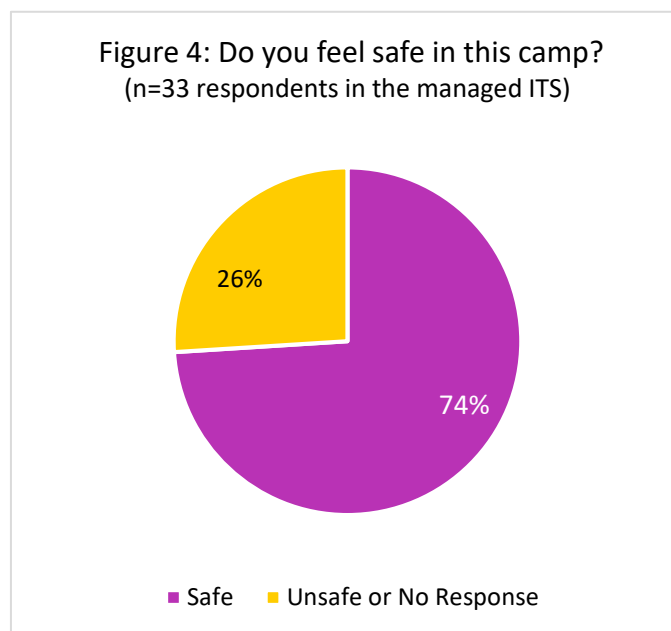
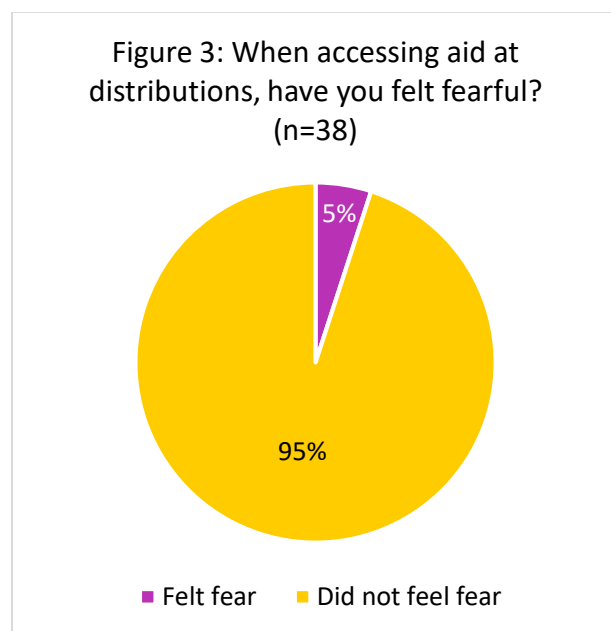
Distribution-related fears since the COVID-19 pandemic began

About three-quarters (28) of respondents said they felt the managed ITS was a safe space; one recipient in particular said that safety precautions to prevent COVID-19 exposure and spread were taken in the managed ITSs, while many said that they felt all safety measures are taken in the informal settlements but did not specify COVID-19 safety precautions.

"Since the beginning of Covid-19 all the camp [ITS] was sanitized. We rarely leave the camp; here we feel safe." – Syrian woman living in Lebanon as a refugee

Two respondents said that they only leave the informal settlements in case of emergencies; however, many of the respondents stated they feel safe inside the informal settlement, implying that they would only leave the ITS for emergencies.

"I don't leave the camp [ITS] unless for emergencies. The distributions happen inside the camp and here I feel safe all the time." – Syrian woman living in Lebanon as a refugee



Respondents were asked about which, if any, points of the distribution process caused them to feel fearful since the COVID-19 pandemic began. The specific points of distribution explored include accessing information related to distributions, during registration/verification exercises, while traveling to or from distributions, while at a distribution, and in safely storing goods received.

Two of the 33 respondents from the managed ITS said they felt fear at all points of distribution processes. The five women who took part in the interviews from the unmanaged ITS did not report feeling fearful.

SEA risk in the managed and unmanaged ITS

Of the 38 respondents, 11% (4) said that they had seen or heard of SEA occurring. All the respondents were from the managed ITS.

Of the respondents who said they had seen or heard of SEA, three out of four said it happened outside the ITS.

"Yes, I heard about that [SEA] but outside this camp [ITS]. No one [does] a good thing unless there is something in return..." – Syrian woman living in Lebanon as a refugee

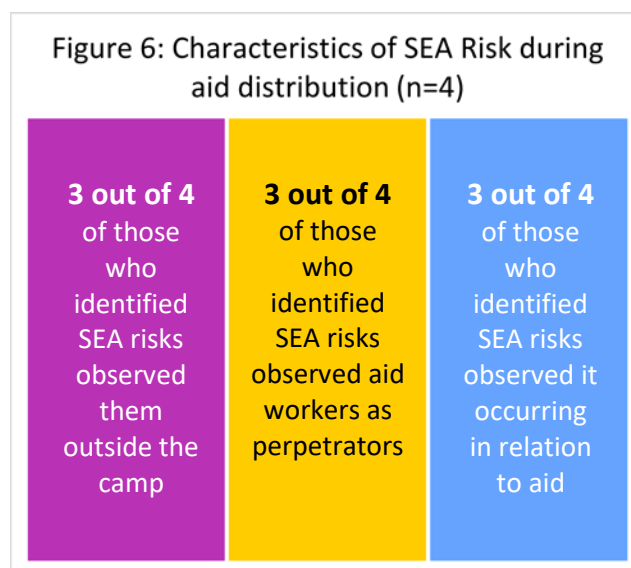
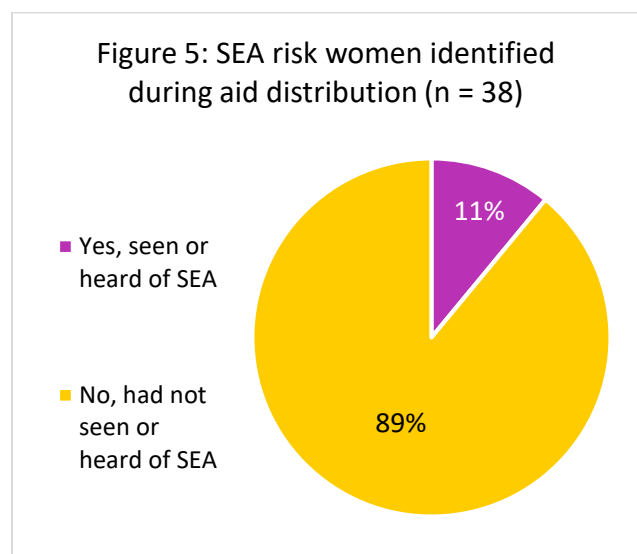
"This might happen outside the camp [ITS] and I heard a lot of stories related to sexual exploitation by an NGO worker." – Syrian woman living in Lebanon as a refugee

Among the same four respondents who said they had seen or heard of SEA, three out of four said that the perpetrator was an aid worker and the same number also said that the incident was related to receiving aid.

“... Some widows who have children find themselves forced to give their phone numbers to the NGO workers who ask them to go for a date with them in exchange for the assistance. Usually, the worker asks the woman to be in a relationship with him in exchange for the aid.” – Syrian woman living in Lebanon as a refugee

“Yes, I heard many stories about this [SEA]. During the registration workers ask women to go on a date with them in exchange for the assistance.” – Syrian woman living in Lebanon as a refugee

None of the five women who took part in the interviews from the unmanaged ITS reported observing or hearing of incidences of SEA.



Other types of COVID-19-related violence

None of the unmanaged ITS respondents reported observing any other forms of violence or abuse for women and girls linked to the COVID-19 pandemic and response. Due to time constraints, this question was skipped in the managed ITS questionnaire.

Complaints & reporting mechanisms and help-seeking

In addition to serving as the gatekeeper for information about distributions, the Shawish was also the most common person to whom respondents would report complaints and seek support. As noted above, this can be concerning when multiple outlets for reporting are not available, such as women’s or

community organizations, hotlines, complaints desks, etc. Other places respondents said they could report complaints and obtain support included reporting to local NGOs, UN/UNHCR, and family members.

"I only tell the Shawish...I don't complain to UNHCR, they say that they are not responsible to help us." – Syrian woman living in Lebanon as a refugee

Sixteen percent (6) of respondents said they would not report to anyone and preferred to remain silent.

"I would call the UNHCR hotline number or tell the Shawish. Sometimes I prefer to remain silent since UNHCR is not helping us." – Syrian woman living in Lebanon as a refugee

Respondents who said that they would not report to anyone, said that this was a secondary option. They would choose to remain silent if their first attempt at reporting to another source was unsuccessful.

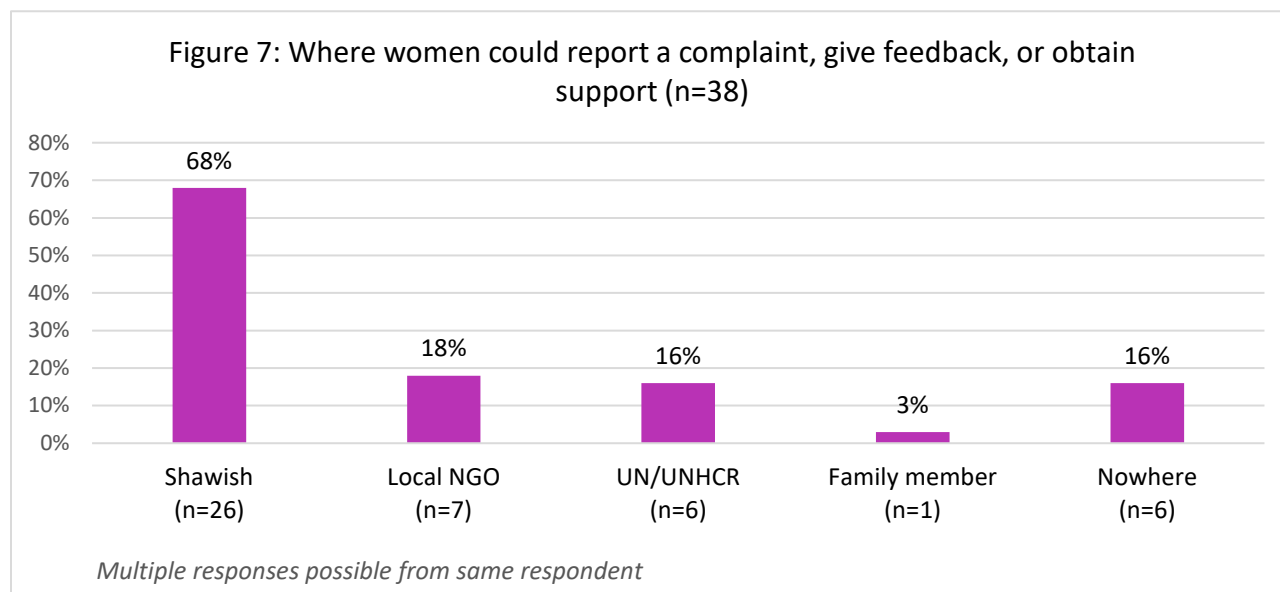
"I don't report because I feel ashamed to ask for help. I prefer to remain silent and there is no place or someone to support us." – Syrian woman living in Lebanon as a refugee

Many respondents who said that they would not report to anyone also cited God as their only source of support.

"I usually report to the Shawish and if he doesn't help me, I only have God..." – Woman living in Lebanon as a refugee

"...We can do nothing about it except praying to God." – Woman living in Lebanon as a refugee

Other reasons respondents shared for choosing not to report include feeling that there was no safe place to provide support or feeling ashamed for needing assistance.



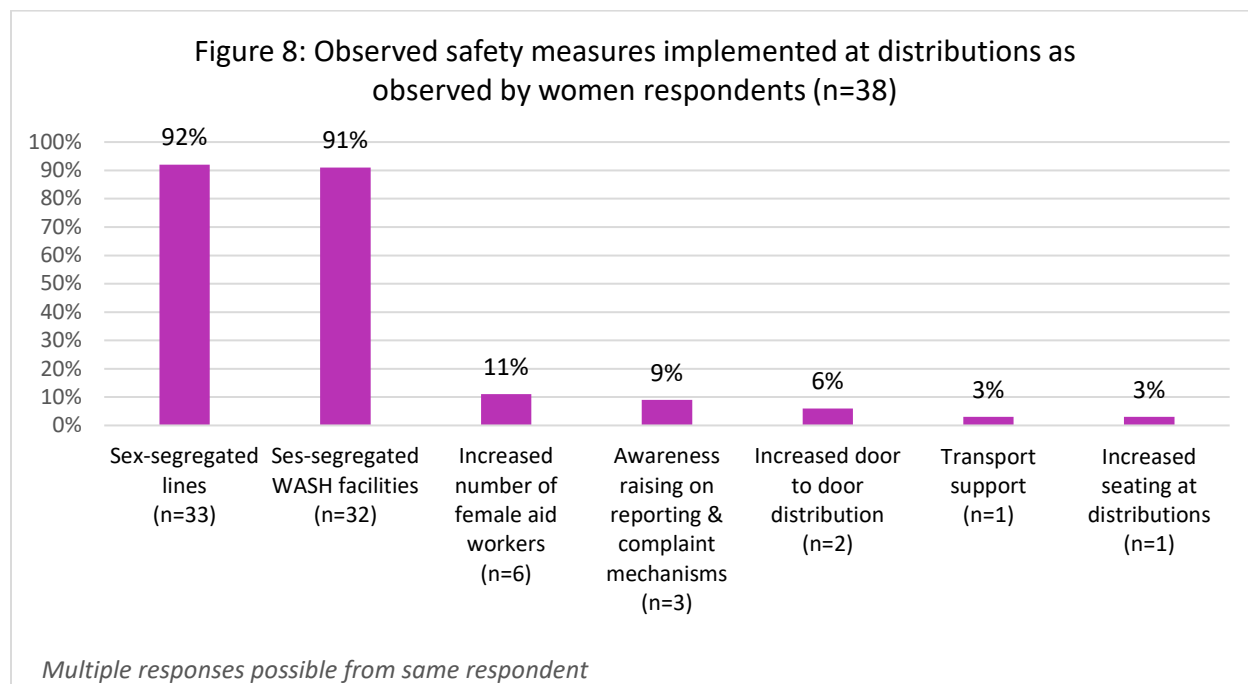
Of those respondents who commented on the quality of the support they received after reporting, 57% (7) reported that the service provider gave no answer and/or took no action after the complaint was filed. 57% (7) also reported a lack of trust in the service provider due to a negative past experience or response.

Most respondents from the unmanaged ITS said that they would report to URDA staff (local NGO).

Safety measures women have observed being put in place to minimize SEA risk

Observed safety measures in the managed and unmanaged informal settlements included sex-segregated lines, sex-segregated WASH facilities/latrines, transport support (particularly for vulnerable groups), an increase in awareness raising and education on reporting and complaint mechanisms among women and girls, increased number of female aid workers at distributions, more door-to-door distributions, and more seating at distributions.

All safety measures were less likely to be observed in the unmanaged ITS compared to the URDA managed ITS. This could be due in part to the small sample size; only 5 respondents from the unmanaged ITS and 33 from the managed ITS completed the survey. One respondent from the unmanaged ITS observed sex-segregated lines and an increase in female aid workers. Almost half (2 out of 5) of respondents from the unmanaged ITS observed more awareness raising and education on reporting and complaint mechanisms among women and girls. None of the five respondents from the unmanaged ITS reported observing sex-segregated latrines, transport support, increased door to door distributions, or increased seating at distributions. Additionally, one respondent from the managed ITS mentioned that the latrines are always crowded.



Recommendations

1. **In these and many other informal settlements in Lebanon, the *Shawish*—local leaders who already hold a great deal of power within aid systems—served as the main source of both information about how to receive aid, and about complaint mechanisms or services if someone has been abused, exploited or otherwise. Information is power and ensuring that power is not concentrated only in the hands of a few is an important part of SEA risk mitigation.** URDA, along with women's organizations active in these areas, should work to establish multiple, varied methods for information on aid distributions and SEA/protection reporting in these informal settlements, such as through women's or community organizations, hotlines, and (mobile) helpdesks. For future distributions, information should be communicated via multiple channels, especially those identified below, as women and girls noted them to be most useful (i.e., via community mobilization).
2. **SEA is recognized and observed in these ITS, often in relation to aid, and is perpetrated by aid workers, yet complaints and response mechanisms are not reported or used.** URDA, CARE, UNHCR, and community actors should work with women's organizations and community-based organizations to hold awareness and information sessions on what mechanisms exist to address SEA and ensure that residents of both managed and unmanaged camps are able to access them. Again, multiple methods should be available and accessible for these populations, especially considering COVID-19 restrictions that make travel more difficult.
3. **Continue to utilize sex-segregated lines and distribution points that have sex-segregated latrines available.** Women and girls from Empowered Aid's findings in Phase 1 and other pilots have reported that these two measures increase their safety and reduce the risk SEA or other forms of gender-based violence while at distributions. Ensure the elimination of protection threats, especially to women and girls, through **designing lockable, lighted and gender-identifiable toilet facilities** in a proper accessible location during the day and night. \
4. **Implement other safety measures and recommendations that women and girls stated increases their safety at distributions but they have not widely observed.** Based on Empowered Aid's findings from Phase 1 and other pilots, this includes increasing female aid workers present, awareness raising on reporting and complaint mechanisms at distribution points – such as through the pre-address, during mobilization, through visual materials, and gender and protection staff present to receive complaints – distributing aid items door to door or home to home, and providing transport support when possible.