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

Table of Contents

Executive Summary 1
Key findings 2
Recommendations 3
Overview and Methodology 5
Findings 6
Information and communication mechanisms 6
Sources of information on the distribution 6
Methods of receiving information communication 7
Who do these information mechanisms reach most? 8
Distribution-related fears since the COVID-19 pandemic began 8
SEA risk in the managed and unmanaged ITS 9
Other types of COVID-19-related violence 10
Complaints & reporting mechanisms and help-seeking 10
Safety measures women have observed being put in place to minimize SEA risk 12
Recommendations 12

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.

Figure 1: SEA risk women identified during aid distribution (n = 38)

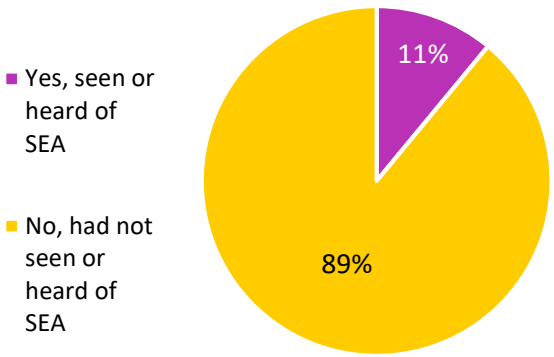


Figure 2: Characteristics of SEA Risk during aid distribution (n=4)

3 out of 4 of those who identified SEA risks observed them outside the camp	**3 out of 4** of those who identified SEA risks observed aid workers as perpetrators	**3 out of 4** of those who identified SEA risks observed it occurring in relation to aid

[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 Mhammra 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

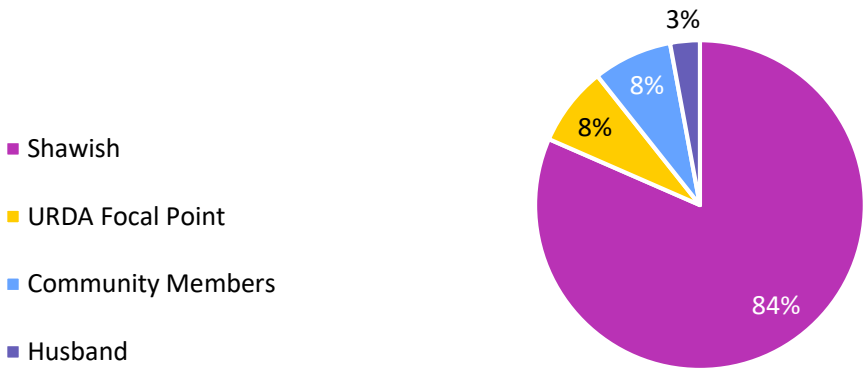
Information and communication mechanisms

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.

Figure 1: Sources of information on distributions identified by women (n=38)



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.

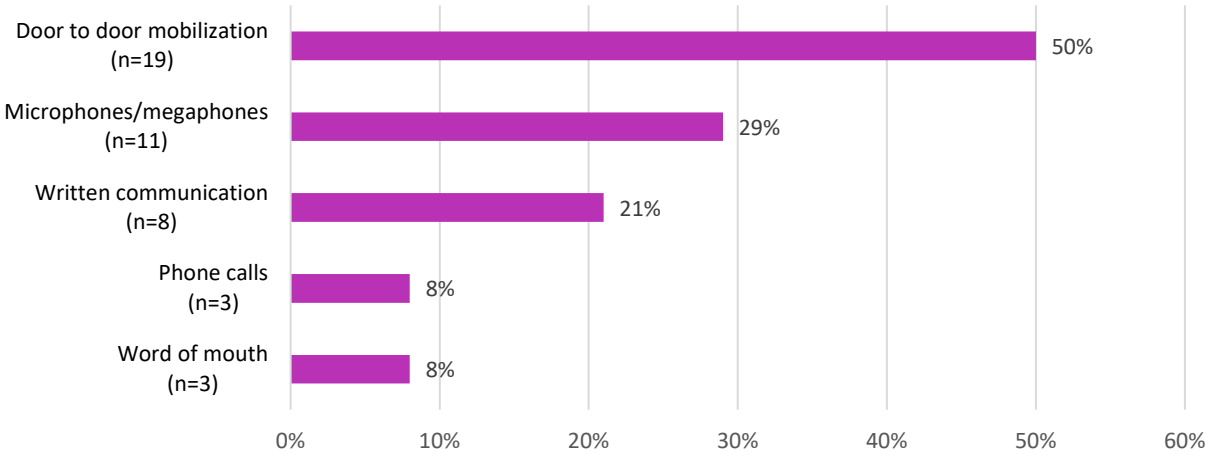
Information is power, especially information about how to receive aid, thus it is important to consider how, and through whom, information is communicated and/or gathered. As highlighted in the Recommendations, using multiple and varied points for information sharing and communication (i.e., people, 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.

Figure 2: Mechanisms used to communicate information on aid distributions identified by women (n=38)



Multiple responses possible from same respondent

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

Figure 3: When accessing aid at distributions, have you felt fearful? (n=38)

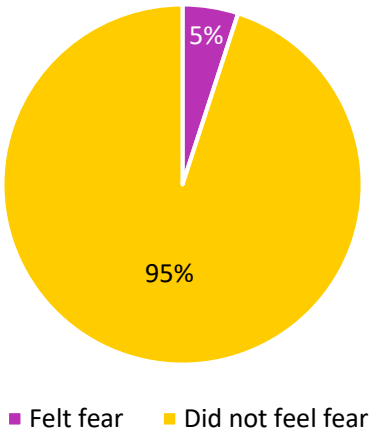
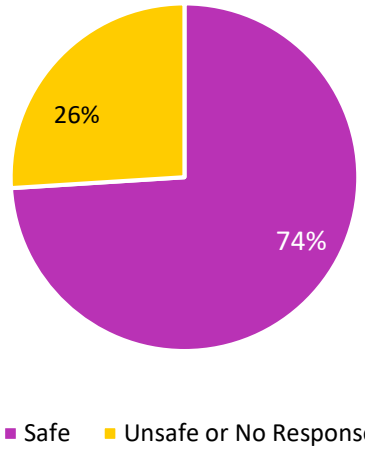


Figure 4: Do you feel safe in this camp? (n=33 respondents in the managed ITS)



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.

Figure 5: SEA risk women identified during aid distribution (n = 38)

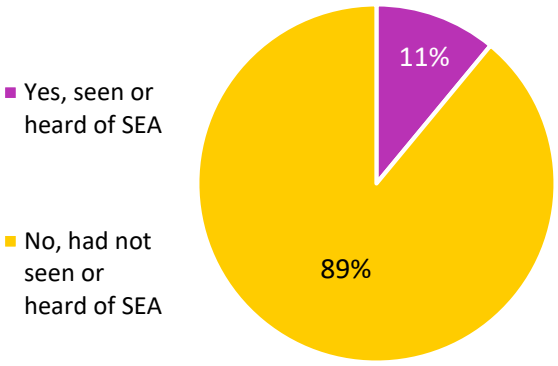
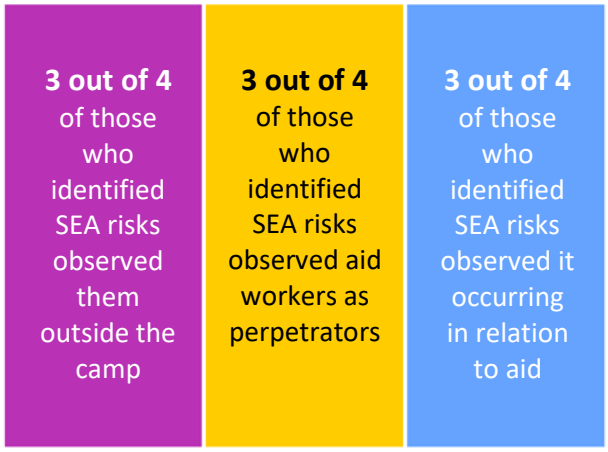


Figure 6: Characteristics of SEA Risk during aid distribution (n=4)



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

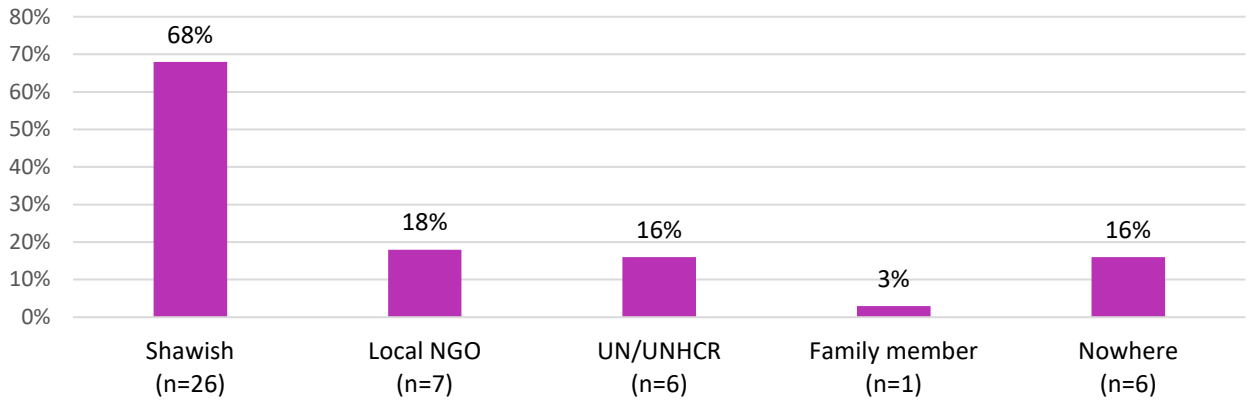
Many respondents who said that they would not report to anyone also cited God as their only source of support.

> *"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.

Figure 7: Where women could report a complaint, give feedback, or obtain support (n=38)



Multiple responses possible from same respondent

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.

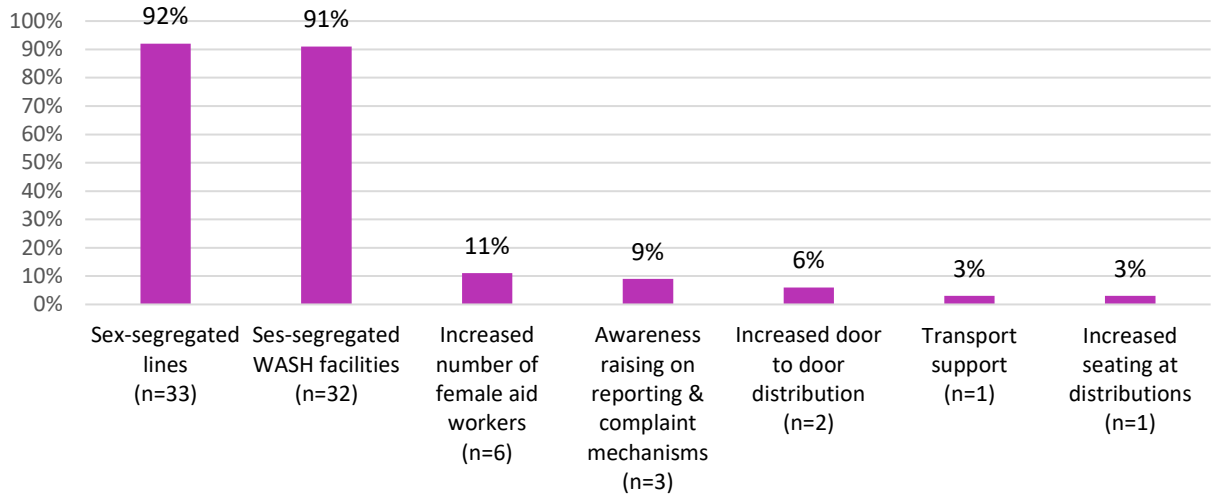
Most respondents from the unmanaged ITS said that they would report to URDA staff (local NGO).

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.

Figure 8: Observed safety measures implemented at distributions as observed by women respondents (n=38)



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Recommendations

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