



GENDER ALERT ON COVID-19 LEBANON

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IN FOCUS: **GENDERED IMPLICATIONS OF THE 2021 NATIONWIDE TOTAL LOCKDOWN**

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The National Commission for Lebanese Women (NCLW), the United Nations Entity for Gender Equality and Women's Empowerment (UN Women), the United Nations Population Fund (UNFPA), the World Health Organization (WHO), and the Lebanon Crisis Response Plan (LCRP) Inter-Agency and Protection Working Group and SGBV Task Force have partnered to provide periodic Lebanon specific gender and COVID-19 alerts throughout the public health crisis, and its ensuing economic crisis.¹ These updates aim to a) provide observations from frontline responders on issues of gender equality², b) compile available secondary data on these issues into one reference point, c) consolidate guidance and programmatic tools related to gender issues and d) offer recommendations to support a more gender equitable response. This Gender Alert on COVID-19 is the fifth in the series³ and focuses on the gendered impact of the 2021 nationwide lockdown in Lebanon, capturing issues and data between January 7 and February 3, 2021.

CONTEXT:

At the onset of the new year, Lebanon found its national health care system on the brink of collapse, with an average of 5,000 COVID-19 cases per day. In response, the Government of Lebanon ordered the country's first nationwide total lockdown in 2021, between the period of January 7 and January 25, later extended to February 21. Movement is only permissible for essential workers, and those accessing healthcare related services; all movement must be approved by the Ministry of Interior via a mobile application.⁴ As of February 3, the national positivity rate remains 20%, which is four times the WHO threshold for what is considered "too high."⁵ While national lockdowns can curb mortality from the virus and save healthcare systems, they also exacerbate gender inequalities: women's unpaid or low paid care work often becomes round the clock, risks for domestic violence sore, and those most marginalized are hit hard by near economic shut downs. During the last week of January, protests defying the lockdown measures were ignited in Tripoli, and swept across the country's poorest areas in Akkar, Saida and Beirut.

¹ This issue of the Gender Alert series aggregates trends from multiple sources (government and humanitarian partners) in effort to provide a snapshot of the gendered impact of COVID-19. All humanitarian partners, health service providers, and other entities are encouraged to feed into trends and analyses for the COVID-19 Gender Alert series. FMI, please contact: Claire.wilson@unwomen.org or Elasmarf@who.int.

² 14 interviews were conducted with Key Informants from actors across the humanitarian and healthcare nexus including from, the Order of Nurses, Hospitals in Beirut and Becharé, IOM, UNHCR, WFP, CARE International, Abnaa Saida, Helem, Action Against Hunger, Anti-Racism Movement, and others. Over 60 news articles in local and national media during the lockdown period were reviewed.

³ COVID-19 Gender Alert Series, Lebanon: <https://arabstates.unwomen.org/en/digital-library/publications/2020/04/gender-alert-on-covid-19-lebanon>.

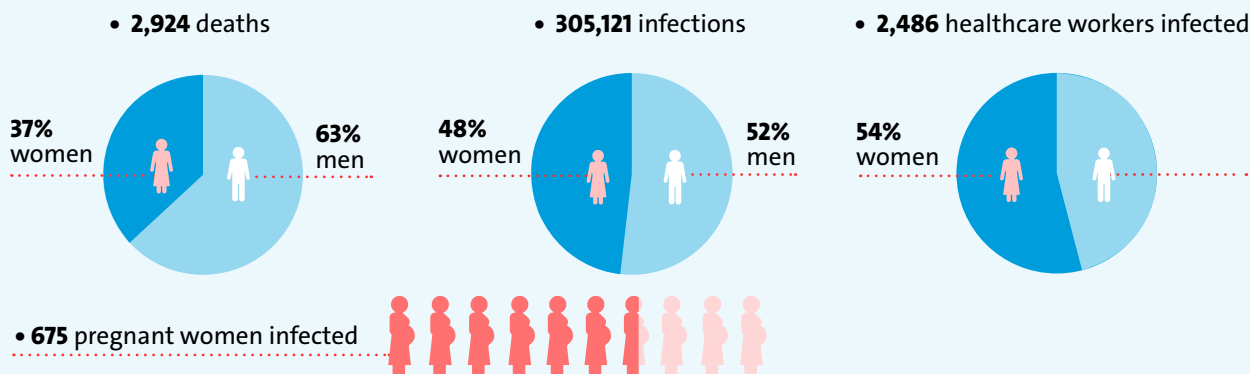
⁴ Mol lockdown registration platform, <https://covid.pcm.gov.lb/impactmobile/curfew>.

⁵ WHO recommends governments to maintain a positivity rate below 5% for a minimum of two weeks before considering reopening or loosening lockdown measures.

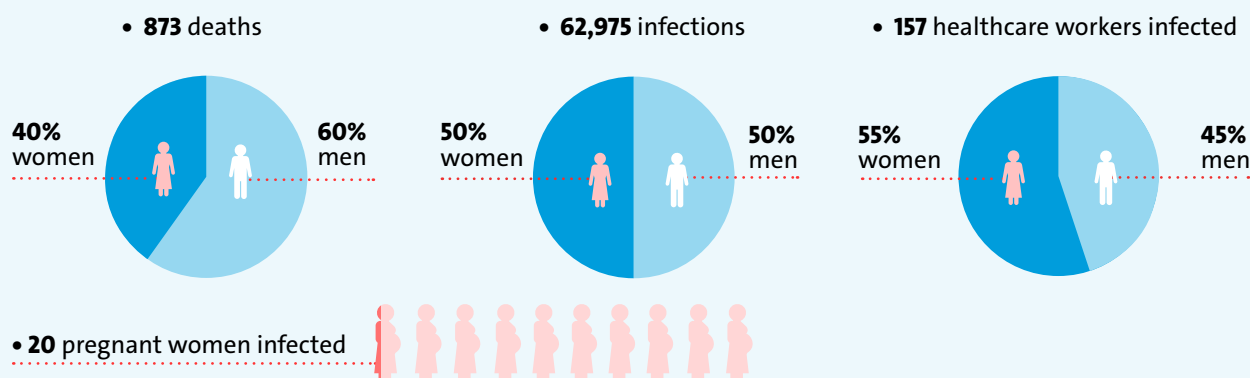
Women and men of all ages, with a strong presence of youth, demonstrated against the continuously deteriorating living conditions exacerbated by the 24-hour curfew, which cut off the daily livelihoods of many urban and rural poor. On January 27, the government of Lebanon announced the national COVID-19 vaccination plan stating that the vaccine will be provided free of charge by the Lebanese MoPH, and all individuals residing in Lebanon (regardless of nationality) will be included in the vaccination campaign.

The lockdown (thus far)⁶ has had no impact on gender differences⁷ of COVID-19 infection and death rates: death rates continues to remain be higher amongst males, while infection rates of healthcare workers continue to be higher amongst females

GENDER DATA | February 2020 to January 31, 2021



GENDER DATA | January 14-31st, 2021 (LOCKDOWN)



ISSUES FOR ATTENTION:

1. Women and marginalized groups struggle to access food and safe water

- Global evidence shows that women and girls experience higher rates of food insecurity due to the socioeconomic impact of COVID-19⁸ and similar findings resonate across Lebanon. At the start of the pandemic, findings from a survey conducted by CARE found that 85% of surveyed women were eating smaller portions, compared to only 57% of men.⁹ This can have devastating consequences for girls' development as well as for pregnant and lactating women. According to the VASYR 2020, Syrian refugee female-headed households had poorer consumption scores and were more likely to be food insecure; 7% of all households reported restricting the food consumption of female members of the households specifically.¹⁰ Women have reported the coping mechanism of putting children to sleep early in order to skip meals.¹¹

6 The time period for gender analysis of the lockdown is calculated between January 14 (7 days after the first day of lockdown period to consider the COVID-19 average incubation period) and January 31.

7 FMI on sex and gender difference in COVID-19: <https://www2.unwomen.org/-/media/field%20office%20arab%20states/attachments/publications/2020/07/ga%20lebanon%20no4/gender%20alert%20on%20covidlebanon%20issue%204.pdf?la=en&vs=4317>

8 CARE, Left Out and Left Behind, August 2020, <https://www.care-international.org/files/files/LeftOutandLeftBehind.pdf>.

9 CARE, Rapid Gender Analysis: Lebanon, May 2020, <https://www.careevaluations.org/evaluation/care-rapid-gender-analysis-lebanon-may-2020/>.

10 UNICEF, UNHCR, WFP, VASYR 2020, Gender Analysis Conducted by UN Women.

11 UN Women Gender Resilience Index Assessment, preliminary findings from December 2020 data collection.

- During the lockdown, elderly women have been observed to reduce how much they eat in order to increase children in the households' access to food.¹² In Tripoli, a man reportedly gave his daughter to army personnel because he could not afford to feed her anymore.¹³
- Several community-based organizations working for the rights of marginalized groups (migrants and LGBTIQ+ persons) have been unable to respond to the rising food insecurity needs amongst these communities, as the organizations have struggled to get necessary permits for distributions. These same organizations usually fill the gap of humanitarian assistance for marginalized groups, who are not under the criteria for larger scale food assistance.
- Inability to access food has contributed to what have been referred to as anti-lockdown protests; much like previous nationwide protests,¹⁴ women have been prominent actors in the demonstrations, staffing road blocks, organizing and actively participating in demonstrations.¹⁵

2. Reports of sexual and gender-based violence continue unabated, and survivors rely on GBV hotlines to request for urgent financial assistance

- 53% of surveyed SGBV service providers in Lebanon estimated that the number of callers on their hotlines were higher or significantly higher during the lockdown period, when compared to the number of calls from the last quarter of 2020;¹⁶ The perception of SGBV practitioners was that this was largely underpinned by protracted household confinement and the deteriorating economic conditions aggravating the stressors of abusers (often male household members).
- During the first 3-weeks of the lockdown, the majority of SGBV service providers (53%) reported that the primary requests from callers (vastly female) on their hotlines were requests for cash assistance and basic needs; one-third of SGBV service providers (29%) stated that psychosocial support and counseling was most reported, and less (11%) reported that top requests were for access to safety options, including shelters.
- The ISF has reported “a clear and significant increase of domestic violence incidents” during the lockdown¹⁷; however the average number of callers per month to the Domestic Violence hotline 1745 in January (116 calls) has remained similar to the past quarter of 2020 (109 calls); less than the average number of calls compared to the second and third quarters of 2020 (141 and 155 calls respectively).¹⁸ Reduced call volumes to the domestic violence hotline may also be due to increased difficulty accessing phone credit due to affordability and mobility to shops.
- Women and girl survivors report having difficulty expressing their needs or receiving remote psychological support because the mobile phones they are using are often not their own, or they cannot find the privacy, space, and time inside a shared household.¹⁹
- Domestic violence during the lockdown means that household members are more likely to be witnessing violence, creating higher rates of secondary trauma.²⁰ Those witnessing violence are more likely to experience anxiety, depression, post-traumatic stress disorder (PTSD), and more likely to become victims of abuse or even perpetrators.
- Daily reporting of SGBV cases in Lebanese media continued during the lockdown period, relating to cyber abuse and extortion²¹, deadly domestic violence²², rape²³, and intimate partner violence. In a recent fatal case, the victim had already filed a domestic violence lawsuit with the relevant authorities.²⁴ She was killed by strangulation in what some are calling a premeditated crime.²⁵

12 Key Informant Interview, INGO in Lebanon, Jan 29, 2021.

13 Beirut.com, “Tripoli Man hands over daughter to Army because he can't feed her,” Jan 27, 2021, <https://www.beirut.com/l/61401>.

14 UN Women, Gendering Lebanon's 2019 Protest, December 2019, https://www.un.org.lb/library/assets/UN%20Women_Lebanon%27s%202019%20Protests-042358.pdf.

15 Annahar, “Women cross the Minya highway to protest the deteriorating living conditions,” Jan 30, 2021, <http://nna-leb.gov.lb/ar/show-news/527125/>.

16 The SGBV TF conducted a rapid survey to service providers in order to understand the impact of the lockdown on SGBV, including domestic violence; 38 SGBV service providers respondent based on data and trends between from January 7 to January 25.

17 https://www.theg61.com/domestic-violence-abuse-soars-lebanon/?fbclid=IwAR1LWO7FXcdD_HQoKRguFksJJlE5MUxRgEDJ3ofudt6rCfV7VpCnXlXlIb4, February 3, 2021. Note: number of incidents is different than the number of callers.

18 ISF Data 2021.

19 The SGBV TF rapid survey during the lockdown.

20 UN Women and UNFPA, Violence Against Women in the time of COVID-19, 2020.

21 <https://www.yasour.org/2018/ar/news/details/news-62535>, January 9, 2021.

22 <https://www.sharikawalaken.media/2021/01/30/%d8%b2%d9%8a%d9%86%d8%ac%d9%88-%d8%b6%d8%ad%d9%8a%d8%a9-%d9%82%d8%aa%d9%84-%d8%ac%d8%af%d9%8a%d8%af%d8%a9-%d9%81%d9%8a-%d9%84%d8%a8%d9%86%d8%a7%d9%86/?fbclid=IwAR2akc5eGgVVPjT25CDZ3nyzkY7DR2lIQJD8lCbOfLozxfjmMQc5ww618>, Jan 30, 2021.

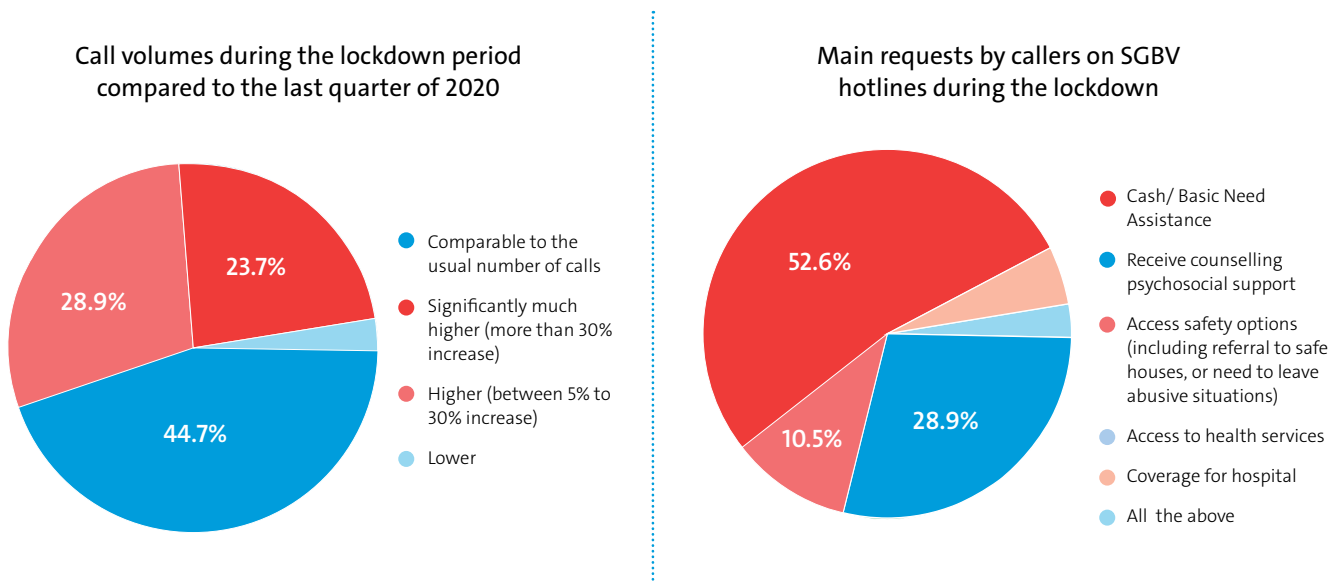
23 <https://www.sharikawalaken.media/2021/01/14/%d9%81%d9%8a-%d8%a8%d8%aa%d8%ba%d8%b1%d9%8a%d9%86-%d9%81%d8%aa%d8%a7%d8%a9-%d8%b3%d9%88%d8%b1%d9%8a%d8%a9-%d8%aa%d8%aa%d8%b9%d8%b1%d8%b6-%d9%84%d9%84%d8%a7%d8%ba%d8%aa%d8%b5%d8%a7%d8%a8/>, January 14, 2021.

24 <https://www.sharikawalaken.media/2021/01/30/%d8%b2%d9%8a%d9%86%d8%ac%d9%88-%d8%b6%d8%ad%d9%8a%d8%a9-%d9%82%d8%aa%d9%84-%d8%ac%d8%af%d9%8a%d8%af%d8%a9-%d9%81%d9%8a-%d9%84%d8%a8%d9%86%d8%a7%d9%86/?fbclid=IwAR2akc5eGgVVPjT25CDZ3nyzkY7DR2lIQJD8lCbOfLozxfjmMQc5ww618>, Jan 30, 2021.

25 <https://www.lorientlejour.com/article/1250381/zeina-kanjo-nouvelle-victime-de-la-violence-conjugale.html>, Feb 2, 2021

- Gender non-conforming individuals, including trans women and trans men, reported concerns and fears of harassment and violence from increased security patrols and check points enforcing the lockdown. Due to deteriorating economic conditions, LGBTIQ+ individuals have reported moving back in with abusive and homophobic or transphobic family members or partners, increasing their exposure to violence.²⁶

Findings from Rapid Survey of SGBV Service Providers During the Lockdown (between Jan 7 and 25, 2021)



3. Digital gender gaps have likely limited marginalized women and girls access to information and critical services and limited their mobility

- Women and girls, especially migrant, refugee and older women, are likely to have less access to personal mobile phones, and to be able to buy phone credit and internet. To register for an official pass to leave the house during the lockdown, call hotlines or enroll for vaccines, one needs to have access to a personal mobile phone and be digitally literate.²⁷
- Abusive sponsors within the Kafala system often prevent migrant domestic workers from using phones (do not allow it, take possession of it, or disable internet access), isolating them from any contact outside of the domestic sphere.²⁸ In a recent IOM assessment, only 42% of female migrants surveyed (from a sample of 297 migrants) reported having information about services available to them.²⁹

4. Economic vulnerability, unpaid care and domestic work skyrockets for women, and gender responsive social assistance is yet to be seen

- In a survey conducted by CARE International during the January 2021 lockdown period, an estimated 80% of surveyed women (from a sample of 189) assessed that their family lost all sources of income.³⁰
- The 24-hour lockdown period has exacerbated the compounded care burden of women: homeschooling, round the clock household chores, teleworking, and caring for family members with COVID-19 at home; this period has been especially hard for single mothers across Lebanon.³¹
- National closures of nurseries and childcare facilities have meant that essential workers in the COVID-19 response, particularly women in the healthcare sector do not have childcare options and must rely on relatives or community networks.

²⁶ Key informant interviews with Helem, Jan 20, 2020 and Marsa, Jan 21, 2021.

²⁷ Mol lockdown registration platform, <https://covid.pcm.gov.lb/impactmobile/curfew>.

²⁸ Key Informant Interview with ARM, January 28, 2021.

²⁹ IOM Vulnerability Assessment, May to July 2020, <https://dtm.iom.int/reports/lebanon%E2%80%94migrant-worker-vulnerability-baseline-assessment-report-may-july-2020>.

³⁰ CARE International, January 2021, Assessment forthcoming.

³¹ <https://khateera.com/article/g8-%D8%A3%D9%85%D9%87%D8%A7%D8%AA-%D8%B9%D8%A7%D8%B2%D8%A8%D8%A7%D8%AA-%D9%81%D9%8A-%D9%85%D9%88%D8%A7%D8%AC%D9%87%D8%A9-%D8%A3%D8%B2%D9%85%D8%A7%D8%AA-2020-%D9%86%D8%AD%D8%A7%D8%B1%D8%A8-%D9%88%D8%AD%D8%AF%D9%86%D8%A7>, January 26.

- During the lockdown, protection sector partners in the field have reported increased risks of exploitation linked to due families' inability to repay debt, as well as increased requests from families for diapers, infant formula or milk and menstrual hygiene products, items often deprioritized by male heads of households in a context of extremely scarce household income.
- Eligible Lebanese female citizens married to non-Lebanese persons have been omitted from government led social assistance due to the country's nationality laws, which do not grant women full citizenship rights. In April 2020, the NCLW liaised with the Prime Minister's Office to advocate for the rights of all Lebanese women married to foreigners from any nationality to access governmental assistance.
- Some humanitarian service providers not using e-cards (electronic modality for assistance) have been unable to provide protection cash to survivors, particularly to recipients who prefer to receive their assistance outside of the home due to protection concerns.

WOMEN'S REPRESENTATION ON THE NATIONAL COVID-19 VACCINATION COMMITTEE³²:



5. Evolving gender equality issues in the health sector

- In light of the increasingly overwhelmed healthcare system, women from marginalized communities (migrant, refugees, LBQT women), have reported increased feelings of insecurity with regards to access to healthcare - whether for COVID-19-related or other, due to previous experiences discrimination or stigma, lack of documents, harassment, and other concerns about being denied or deprioritized. According primary and secondary sources surveyed at the time of this writing, there were no identified reports of explicit gender-based or nationality-based discrimination for COVID-19 patients accessing a very limited number of beds at hospitals.
- Nurses (80% of whom are women in Lebanon) continue to report being incredibly overwhelmed, with hospitals at or near capacity. Nurses are working increasingly longer hours, often for days at a time, with lower wages and higher risks of exposure and infections to COVID-19.³³
- Pregnant women delivering during the pandemic are being sent to COVID-19 wards in specific hospitals (as opposed to planned physicians) as a measure to reduce transmission of the virus.³⁴ During the lockdown, a woman died of COVID-19 whilst giving birth.³⁵
- Teachers (a predominantly female labor force³⁶) have been designated to be vaccinated in phase 3 (out of 4 phases), after a the category of "individuals essential for preserving the essential functioning of the society." Delays in vaccinating educational professionals will disproportionately affect women and children, who bear the brunt of school closures.
- In January 2021, protection partners reported an alarming deterioration in mental health status among refugees, especially among women and other marginalized groups, linked with increased emotional exhaustion, anxiety and depression aggravated by the lockdown.

³² Gender Analysis of: MoPH National COVID-19 Vaccination Plan.

³³ Key informant interviews with two nurses Jan 29 and Feb 1, 2021.

³⁴ Key informant interview with a nurse, Jan 29, 2021.

³⁵ <https://www.sharikawalaken.media/2021/02/02/%d8%a7%d9%84%d8%b4%d8%a7%d8%a8%d8%a9-%d9%86%d8%af%d9%89-%d8%ad%d9%85%d8%af%d8%a7%d9%86-%d9%88%d8%b6%d8%b9%d8%aa-%d9%85%d9%88%d9%84%d9%88%d8%af%d8%aa%d9%87%d8%a7-%d9%88%d9%81%d8%a7%d8%b1%d9%82%d8%aa/>, February 2, 2021.

³⁶ In 2019, an estimated 89% of primary education teachers were women, <https://data.worldbank.org/indicator/SE.PR.M.TCHR.FE.ZS>; in 2016, an estimated 68% of secondary education teachers were women, <https://data.worldbank.org/indicator/SE.SEC.TCHR.FE.ZS?end=2019&start=1970>.

RECOMMENDATIONS:

Government of Lebanon

Social Assistance

- Scale-up social assistance to the most vulnerable impacted by the lockdown, immediately. Continue to enable eligible households of Lebanese women married to foreigners to be considered for financial assistance as per the request of the National Commission for Lebanese Women.

Protection

- Enable the ISF domestic violence hotline – 1745 – to be free of charge for all callers as per the request of NCLW.
- Strengthen the capacity of government entities' to be able to prosecute perpetrators and uphold the dignity and rights of survivors.

Childcare

- Allow childcare services to be open and accessible for essential workers with no other care options, specifically for healthcare professionals in the COVID-19 response.

Vaccinations

- Ensure proper support and/or alternatives for vaccine registration are provided to individuals who may not be digitally literate, may not have access to digital technologies or are unable to access the registration platform for other reasons.
- Take active measures to ensure the fair and equitable distribution of vaccines to all, including vulnerable communities, recognizing that the adverse effects the pandemic has had on gender equality will only be exacerbated if equitable distribution of vaccines is not guaranteed.
- Designate teachers as essential workers and prioritize their access to the vaccine.

Humanitarian Actors: Service Providers and Donors

Protection

- Respond to the escalating levels of violence by immediately scaling up intervention for GBV and MHPSS services, and urgently expand shelter capacity (with a focus on LGBTIQ+ inclusion).
- Continue to collect and analyze gender, age, and disability disaggregated data to understand the diverse impact of the lockdown on marginalized groups.
- Increase resources and funding to support migrants' health, shelter, and basic needs. Provide funding to evacuate or repatriate migrant women and men leaving in destitute conditions and who want to return home.

Access

- Mainstream the provision of internet and phone credit to beneficiaries into humanitarian assistance to enable remote service access, especially women and girls.
- Expand programming on digital literacy and skills in the education and livelihood sector, with a focus on women and girls to prevent and reduce the digital gender gaps during and following the pandemic.
- Ensure the availability of in-person support and services to urgent and high-risk GBV cases even during lockdowns.
- Monitor and mitigate the risk of gender and racial discrimination in hospitals as they are reaching capacity and becoming increasingly overburdened.