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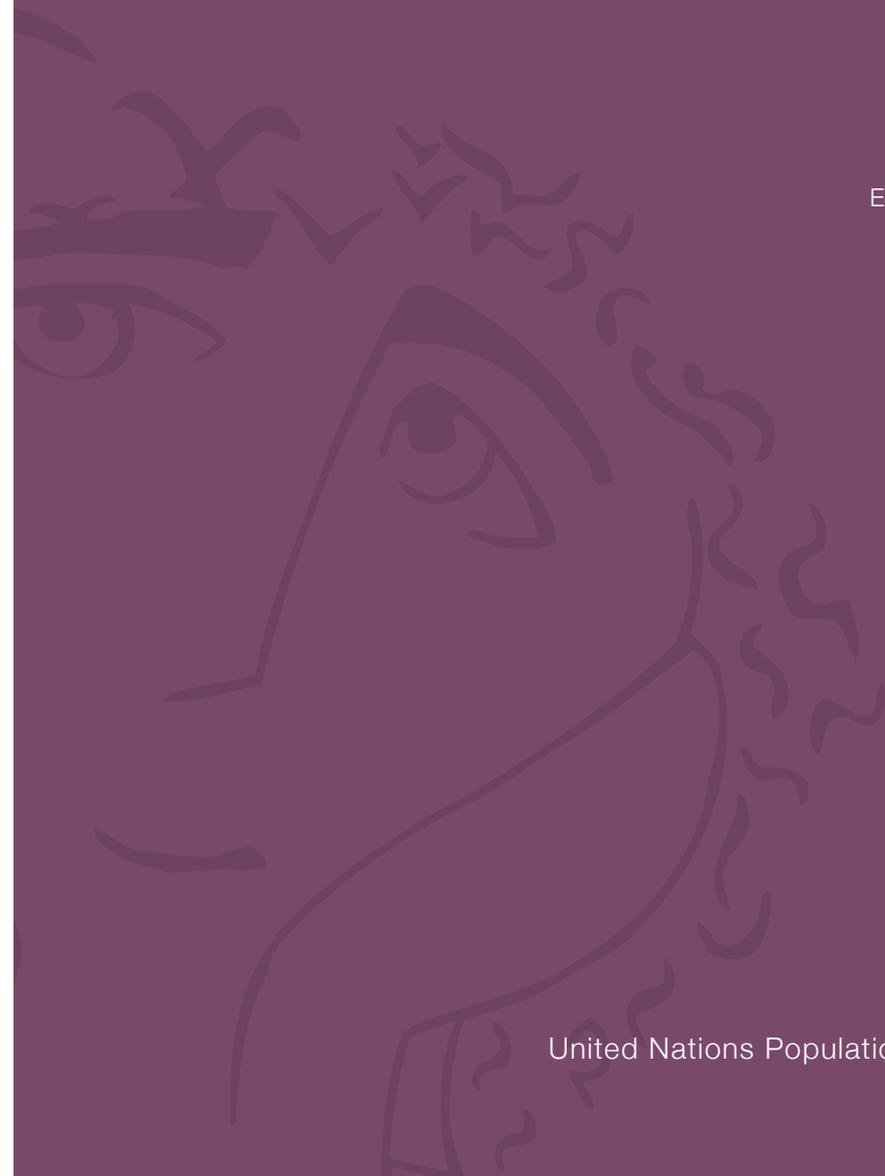
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# REVIEW OF GENDER-BASED VIOLENCE RESEARCH IN LEBANON

Executive Summary

Prepared by  
Education for Change (EfC)

United Nations Population Fund - Lebanon





## RESEARCH CENTER AND TEAM

### Education for Change (EfC)

Education for Change (EfC) is an independent consulting and research company specialising in:

- Education (pre-school onwards and life-long learning),
- Development (partnerships, aid-effectiveness and governance),
- Information and information systems,
- Human rights, gender equality and inclusion.

EfC undertakes:

- Strategy and policy analysis,
- Evaluation and performance management,
- Capacity and institution building, and
- Research studies.

EfC's mission is to support affirmative educational and social change. EfC works to inform and help people and organisations empower themselves, providing clients with professional consulting services, robust research and effective project management.

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### Research Team

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# BACKGROUND

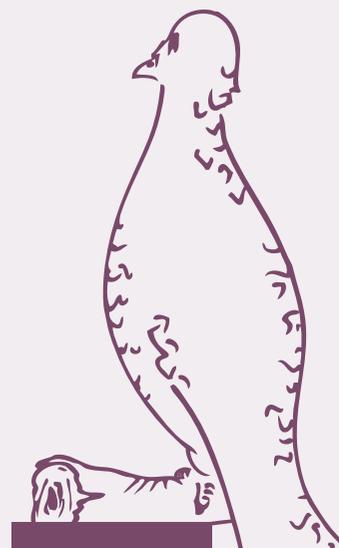
Around the world, gender-based violence (GBV) reflects and reinforces inequalities between men and women. This review of GBV research in Lebanon aligns with international agreements including, but not limited to:

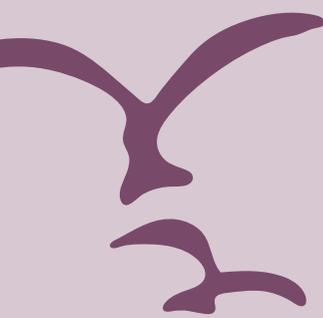
- Convention on the Elimination of All forms of Discrimination against Women (CEDAW, 1979)
- Declaration on the Elimination of Violence against Women (DEVAW, 1993)
- International Conference on Population and Development agreements (ICPD, 1994)

In the Middle East and North Africa (MENA) region GBV is increasingly being recognised as a significant phenomenon, “deeply rooted in existing power relationships, sexuality, self-identity and the structure of social institutions”.<sup>1</sup> Knowledge and understanding of the many facets of the problem in MENA communities is gaining ground, as revealed by the increasing number of research studies conducted on the subject in the past few years. A few countries (including Jordan, Egypt, Palestine, and Turkey) have undertaken large scale, population-based surveys on the magnitude of and attitudes towards GBV;<sup>2</sup> others including Lebanon and Syria have done prevalence studies within selected groups of women.<sup>3</sup> Studies from Egypt, Palestine, Lebanon and Saudi Arabia have highlighted the complications associated with abuse and its detrimental effect on the psychological, reproductive and physical health of women.<sup>4</sup>

With the limited data available regionally, it is notable that:

- (a) GBV is widespread (in different forms);
- (b) Reported prevalence falls within the range of GBV reported worldwide;
- (c) Acceptance of violence, particularly spousal violence, is high;



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- (d) Most victims do not seek assistance, especially not formal help, and significant barriers exist to seeking help including a scarcity of safe, accessible and effective places of protection and intervention.

Despite these characteristics GBV is not recognised a major problem in all MENA countries. Only 17 out of the 22 Arab states have ratified CEDAW and even among ratifying states efforts employed to combat GBV are arguably quite limited. The newly established Arab States Regional Office (ASRO) of UNFPA recently conducted a mapping of activities on gender equality and women's empowerment in the region. It found that forms and focus of GBV differ from country to country and include physical abuse and violence, sexual harassment, verbal abuse, child and early marriage and Female Genital Mutilation.

Lebanon ratified the CEDAW in 1996. The Lebanese Constitution states that all men and women are equal before the law to enjoy civil and political rights equally and be equally bound by public obligations and duties without any distinction (Article 7). There is no national law for the minimum age of marriage or for the age of consent. Religious, not civil, courts govern personal status matters including marriage, divorce and inheritance.

GBV is prevalent in Lebanon in different forms, including domestic/ marital physical, sexual and psychological violence. It is estimated by NGOs working with abused women in Lebanon that almost 80 percent of female victims of domestic violence are also victims of spousal rape.<sup>5</sup>

In 2008, the UNFPA Lebanon launched a 2-year project which aims to look at mainstreaming and institutionalising GBV in national planning and development, supported by the contribution of the Government of Italy. This assignment is one of several activities implemented under a consolidated 2-year GBV action plan with prioritisation for 2009-2011 and managed by UNFPA and its partners.

UNFPA has a global mandate to promote the rights of every man, woman and child to enjoy a life of health and equal opportunity, including ensuring that every girl and woman is treated with dignity and respect. Its programmes are cross-sectoral, covering reproductive health, maternal health, education and HIV/AIDS for example.

Several features characterise the national context in relation to GBV:

- (a) The five-year UN Development Assistance Framework 2010-2014 highlights GBV as one of two priority areas within the Gender goal for the UN in Lebanon;
- (b) The Ministry of Public Health (MOPH) and Ministry of Social Affairs (MOSA) are both concerned with issues of GBV; the Ministry of Education and Higher Education (MOEHE) is concerned with eliminating gender discrimination in textbooks and formal education materials;

- (c) Lebanon has acceded to and taken action on its international agreements including the CEDAW;
- (d) In 1996, a national women's strategy was developed which identifies "Women under Occupation" as one of its nine priority areas of work;
- (e) The National Commission for Lebanese Women (NCLW) is entrusted with providing overall advice and advocacy on women empowerment and gender mainstreaming. NCLW is currently revising the women's strategy (above) to incorporate GBV;
- (f) Many NGOs exist that are involved with national and local programming against GBV;
- (g) There is currently no national plan of action for GBV in Lebanon that comes from Government and an overall lack of long-term coordination planning and action.

Despite the absence of a national plan of action on GBV, the ministerial declaration of the current cabinet stipulates the need to address GBV within the context of empowering women.<sup>6</sup> The draft law on the protection of women from domestic violence, approved by the Council of Ministers in April 2010 and currently referred to the House of Representatives for endorsement, also represents progress. The draft bill "includes any act of violence against women occurring in the family because they are women committed by a family member and which may result in harm or suffering for the female, physical, psychological, sexual or economic, including threats of such acts or deprivation of liberty, whether occurring within or outside the family home (Article 2, paragraph 2). The Government is committed to adopting a plan of action to finalise the discussion of the bill, and develop policies to combat trafficking in women and children for sexual exploitation and forced labour.

Civil society is very active in Lebanon. Several studies have been conducted by social researchers on the profile of survivors of violence and the impact that violence has on the health and psychology of the victim. Most of these were conducted by women's organisations that used the findings to advocate for social and legislative reforms. The Government emphasises on the role of the NCLW and the necessity of the expansion of its powers and role in contributing to proposals for national policies to eliminate discrimination against women and their implementation.

GBV prevalence studies started in more recent years with research conducted since the year 2000 revealing, for example, that 35% of women presenting to primary health care facilities report being subject to domestic violence;<sup>7</sup> and that 16% of children report being exposed to one act of sexual abuse once in their lifetime.<sup>8</sup> However, these are not generally considered to adequately represent the scale of the reality and a national population-based prevalence survey does not exist for Lebanon.



## OBJECTIVES

The aim of this assignment was:  
“to identify, compile and review all existing studies and research – qualitative and quantitative – conducted in Lebanon in the past 15 years relevant to gender-based violence (GBV) prevention and protection. (UNFPA, Terms of Reference).

The intention is to achieve a comprehensive impression of GBV research in Lebanon. To reach this aim, the assignment objectives were to:

- (a) Develop an inventory of the existing research work relevant to GBV in Lebanon;
- (b) Develop a brief abstracts index of the GBV-related research based on a set of agreed criteria;
- (c) Identify research gaps and propose a research priorities agenda in GBV at the national and sub-national level.

The deliverables are a comprehensive report and catalogue of GBV research studies in Lebanon, in English and Arabic.

## METHODOLOGY AND PROCESS OF WORK

The agreed methodology packaged the work into three distinct elements: desk review and analysis of documentation; stakeholder consultations; instruments development.

### Desk review and analysis of documentation

The approach recognised the need to understand, through existing research studies and participatory stakeholder consultations, the types, objectives, methodologies, agendas, application and findings of GBV research in Lebanon. Researchers on GBV face many methodological, ethical and data sensitivity challenges, which we appreciate may affect research itself and this collection and review of documentation. Much research in Lebanon is unpublished and/or highly sensitive.

This study understands “research” to mean any published or unpublished documentation including review study, article, paper or book, by an academic, NGO, government organisation such as a ministerial department, UN agency or research institution.

Through wide national and international research including stakeholder consultations and following up references and bibliographies in gathered documentation, over 150 documents were collected and analysed. It was not the mandate of EfC to assess or evaluate the quality of the collected research, beyond the fact that they are relevant and accessible to this review.

A total of 105 studies are included in the Catalogue. They are all written after 1995. We gathered more documentation than is contained in the

Catalogue because not all documents provided sufficient information to complete at least half of the required bibliographic details and some did not take a gender approach to the analysis of their findings.

Documents were first reviewed in the original language (Arabic, English or French), discussed in English, and abstracts produced in Arabic and English. Where possible, the authors were invited to produce their own bibliographic entry in the Catalogue and write their own abstract (if not already available). The Catalogue states when the abstract is the author's own.

### Stakeholder consultations



As a result of a rapid early literature review, key stakeholders in Lebanon were identified for consultation and further enquiry. In conjunction with the ongoing, incremental review of research, face-to-face, telephone and email correspondence were held with key stakeholders. They were asked their opinion about issues including: the volume, common thematic areas and methodologies of GBV research in Lebanon; the constraints and opportunities for doing GBV research in Lebanon; the findings and effects of the research.

During March – May 2010, a list was consolidated of 80 contributors/interested parties to research on GBV in Lebanon including Lebanese NGOs, international NGOs, UN agencies, ministries and individuals. These stakeholders provided, or lead the reviewers to, the majority of the documentation included in the Catalogue.

Reflecting the participatory and collaborative approach to the review, the consultants conducted, as an additional activity to the TOR, one focus group with identified persons to enhance our understanding of the status, challenges, gaps, needs and recommendations from researchers, relevant organisations and individuals on GBV research in Lebanon. This focus group provided insights into the need for some of the recommendations outlined later in this report.

### Instruments development



Documentation from the desk review was gathered into electronic and paper folder archives and logged systematically into a database that contained basic bibliographic information (title, author, date of publication, partners, aims and objectives, research population, languages and any web URLs).

Having gathered the documents and in consultation with UNFPA we added detail to the bibliographic information in order to consistently

cross-check and compare research studies. These analytical facets included: type of GBV; age of research population; other research population characteristics and research methodology.

Short abstracts accompany each document. These abstracts are intended to highlight the objectives and key findings of the research with particular reference to GBV in Lebanon. It is indicated in the Catalogue whether the abstract was written by the author or by the research consultants. The review team takes full responsibility for the abstracts given in Arabic and English.

Each document is coded for quick reference. The documents are ordered in the same way in the report and the Catalogue. Based on the review, Catalogue and abstracts, the consultants present this report.



# Limitations and Facilitating Factors

The section below presents the limitations and facilitating factors experienced by the review team.

## Limitations

- (a) It took considerable time to gather documents stakeholders can be slow to respond; the document gathering and progressive analysis was more time-consuming than anticipated.
- (b) Few research studies produced in Lebanon are available electronically or on the internet somewhat restricting sharing and easy access/reference.
- (c) Much research is unpublished or out of print (not available in libraries) and therefore difficult to access.
- (d) Few research studies are available in English or French; most are written only in Arabic.
- (e) Sharing learning and data between project partners was slightly constrained by the fact that the Situational Analysis assignment could not inform this assignment as it had not been completed.
- (f) The increasing diversity of methods used to compile the research not only literature review but also interviews, focus groups and a questionnaire expanded the core focus of analysis.

## Facilitating factors

- (a) The consultants used existing networks, contacts and personal knowledge to facilitate the process of document gathering and built in flexibility to the timetable.
- (b) The consultants sourced documents electronically wherever possible, used scanning facilities and otherwise worked with paper copies.
- (c) Since most research is recent, it was possible to contact the author in many, though not all, cases and get hold of the report.
- (d) The consultants worked in three languages and divided the work according to language capabilities.
- (e) UNFPA facilitated a partners meeting for the three implementing companies in Beirut. This meeting encouraged partners and other stakeholders to share data and contacts lists and to provide suggestions and input to each others assignments.
- (f) The analysis section focuses on the documentary analysis, supplemented to its benefit by other qualitative data (author or organisation comments for example).



## MAIN FINDINGS AND RESULTS

A general evolution of research seems apparent from a start with highlighting the problem (more than ten years ago and at present) to considering what could be done to tackle GBV; to reflecting on what has been done and attempting to highlight best practices, gaps and emerging needs.

The most common contexts for GBV research are its legal or social milieu. Most recently there is evidence of researchers addressing the wide-ranging and long term impact of GBV beyond the explicit signs of abuse to the longer term implicit effects of psychological, economic and legal abuses that have a lasting legacy.

Most research has taken known abused women, who have already self-reported to NGOs and women's organisations, as the study sample and subjects of the research. This is a selective population that importantly focuses on women. However, there remain very few studies concerned with male perpetrators of abuse themselves or men's experiences and overall community perceptions of violence. Increasingly recent research is drawing on the general population of women as the survey sample, potentially benefiting the types and volume of findings and results generated in future.

This draws in the summary finding that many researchers have not looked at the core aspect of GBV: the dynamics between men and women, in particular between husbands and wives. Arguably, researchers are working GBV through a primary concern with the victim/survivor at the same time sidelining the fact that the implicit issue is gender, which involves both men and women. There is a lack of detailed research on how traditional gender roles in Lebanon play out in terms of current manifestations of GBV.

Legislative research studies, of which there are also several, addressed GBV in Lebanon from the human rights perspective, and later included the psychosocial dimensions, looking at risk factors, causes of aggression, and causes of responses.

There appears to be significant repetition and duplication among research purposes, coverage and findings – on the one hand this usefully creates a strong body of evidence for lobbying and advocacy purposes and strengthens the veracity of individual study findings; on the other hand such repetition may channel funding into doing the same research over and over again, rather than looking into new and diverse issues and pressing needs and gaps, and instead of building on what has already been done. From the process of compiling this Review of Research it seems that some of the duplication may be due to poor availability of research studies (especially unpublished), absence of a clearinghouse on GBV, and absence of adequate referencing and bibliographies in GBV studies in general.

As funding is a major problem for researchers and organisations wanting to do research, better cooperation and collaboration between researchers could enhance funding opportunities and efficiencies, creating more and better opportunities to meet the needs of study populations and sectors.

Recommendations of research tend to be quite vague – they demand more and better awareness raising on GBV within a human rights context, legislative reform that upholds gender equality, or improvement of services. Many do not develop practical details into how the recommendations might be met, and by whom.



# Recommendations for Research Approaches and Policy Linkages

## Create common ground

This review shows that there is a need to build on existing expertise, awareness, knowledge and experiences on GBV in Lebanon to develop a commonly agreed, understood and used vocabulary and definitions of GBV concepts. It is widely known that this is a difficult process. Many stakeholders would need to be involved in this process, including government, UN agency, NGOs, academia and research institutions, through collaborative and participatory experiences such as focus groups or mapping sessions. A common vocabulary, while sensitive to cultural difference in Lebanon, would also facilitate the identification of knowledge gaps and areas of need for further research on GBV. The development of common ground should also be encouraged at regional level through sharing lessons learned and knowledge generated from research and related activities.

## Improve inter-researcher collaboration

Researchers working more and better together would help to avoid duplication of research, minimise repetition, and make cost savings and donor funding efficiencies. Joint research projects between two or more researchers would be an effective way of undertaking cross-disciplinary studies on GBV, for example across health and social care, or education and culture, which is both realistic because GBV affects all these areas simultaneously, and effective for advocacy and research funding proposals. Inter-researcher collaboration could also be facilitated by training workshops on good practice in GBV research, included perhaps in appropriate university postgraduate curricula.

## Translate research into policy

There is a need to “translate”, or transfer, research findings into concrete policy dialogue and actions i.e. legislative reform and service interventions. This is about creating evidence-based policy. This could be initiated by promoting and conducting more primary GBV research in the academic sector. Multi-disciplinary research, in particular, would help to bring in different policy audiences from health, education, social and cultural economic sections.

## Conduct regular national population-based surveys

These surveys could be based on, or developed into, household questionnaires and conducted periodically (every five years). The aim of the survey would be to monitor GBV prevalence and determinants and assess the outcomes and impact of GBV interventions. The survey could be included in the five years National Statistical Master Plan (currently under discussion) either as a stand-alone survey or integrated within large scale population/demographic surveys. For an effective survey, GBV vocabulary needs to be well agreed.

## Monitor and evaluate GBV and GBV interventions

A national monitoring system needs to be put in place to ensure adequate, reliable and systematic collection of GBV data by various stakeholders and entities, including new data collected through research. It would also include data from police and judiciary services, religious and community leaders who are largely absent from research to date. This data collection system would need to be compatible with other health, social and demographic systems otherwise GBV will remain hidden, underreported and without an accurate understanding of the problem. An effective system would further support evidence-based policy making.

There is a strong requirement for more evaluations of GBV research and interventions made as a result of research to understand how effective, efficient, sustainable and relevant they are in responding to GBV. Is the research of a sufficient quality to compel corresponding action? In addition, there is a need to be more critical of which research-based interventions to import from other MENA countries. For example, women's shelters: are they useful and accepted in Lebanese culture? How can we assess their impact on women in Lebanon?

## Create and coordinate an entity (committee or centre) for GBV

This entity would be a space (physical or virtual) where GBV stakeholders and experienced or interested parties can share knowledge, practices, needs, and ideas for new GBV action including research as a core component but also including advocacy, media studies, policy making etc. This focal point could be entrusted with the development and maintenance of a web-based clearinghouse for GBV research and facilitate communication between research producers and research users. This entity could be expanded to holding GBV data, coordinating funding, allocating resources, monitoring research, undertaking independent evaluations, and holding debates about GBV issues.

## Topics for Further Research

The review has shown that there is a demand among stakeholders for shared and agreed priority GBV research areas. For this reason, the following research ideas, developed from the needs and gaps shown in this review of research, are shown below. They are divided into Thematic Areas, GBV Areas and Study Populations. These are shown because they are currently under-researched and critical areas to develop new knowledge, increase understanding and improve practice to eliminate GBV in Lebanon.

### Thematic areas for further research

#### 1. Socio-cultural determinants of GBV

Socio-cultural variables that affect GBV trends over time, including:

- The media (national/international television, radio, internet and portrayal of gender, effects on GBV etc);
- Migration (effects of returning Lebanese on gender roles and expectations and GBV; effects of immigration of MENA and other populations on GBV);
- Globalisation (including the internet).

#### 2. Costing and economic impact of GBV

What does GBV in Lebanon cost to the national bill for the provision of services across all sectors, campaigns and information provision etc?

#### 3. Intervention assessment studies

For example:

- Which interventions to tackle GBV work and which do not work? An assessment to review the comparative effectiveness, efficiency, sustainability and relevance of different types of intervention (by different community groups).

- An assessment of screening tools used.
- How long does it take and how much does it cost to an individual to take a GBV case through the courts of law?

#### 4. NGOs and GBV

What are the knowledge, attitudes and practices on GBV among permanent and temporary staff at NGOs that are involved with GBV work (including women's organisations, organisations working with refugees, migrants and any national group dealing with GBV in Lebanon)?

#### 5. Education systems and GBV

- Are schools free from violence in Lebanon? What types of violence are prevalent, affecting which children?
- What are teachers' and school staff knowledge, attitudes and practices on GBV in schools?
- How do textbooks and other school materials portray boys and girls' roles and relationships? How do they portray GBV?

### Forms of GBV for further research

- GBV at work/in the workplace;
- Sexual violence and rape;
- Marital rape;
- Economic violence (deprivation of personal income, household income etc.);
- Early marriage (forced marriage of girls under 18 years).

### Study populations for further research

- Adult men (as abusers, as victims of violence, and as engaged in the fight against GBV);
- Youth (especially older adolescents between 15–19 years);
- Refugees (Palestinian, Iraqi, Sudanese and all refugee communities in Lebanon) and marginalised or at-risk groups (sex workers, domestic workers);
- Religious leaders, community leaders and educators (major figures in communities including Sheiks, priests, teachers and others);
- Legislators and policy makers.

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