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Whole of Syria
Gender-Based Violence
Area of Responsibility

VOICES

from Syria 2021

*Assessment Findings of the
Humanitarian Needs Overview*

DRAFT



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Foreword

As the Syria crisis marks its 10th year in 2021, the international community is witnessing yet another serious milestone within one of the most protracted humanitarian crises globally. A decade later, the situation in Syria remains critical as the country continues to endure the cumulative effects of years of instability, now further exacerbated by the burgeoning impacts of the COVID-19 pandemic. The combination of years of geopolitical unrest, severe economic collapse, and the disintegration of social and protection networks underscores that conventional, short-term responses are no longer effective. Voices from Syria provides an in-depth look into the inner lives of women and girls in Syria, who continue to demonstrate unfathomable resilience in the face of conflict. This report aims to serve as a unique resource for specialised gender-based violence organizations and the overall humanitarian response in Syria with the information required to ensure a comprehensive, effective and safe response is delivered in one of the most complex and far-reaching humanitarian crises of our times.

As noted in previous years, women and girls continue to shoulder the worst impacts of the crisis. Data from the field continues to show that gender-based violence in its various forms remains a daily fixture in the lives of Syrian women and girls throughout the nation. This includes restriction of movement, forced and early marriage, and family and domestic violence, which continue to be among the most common violations observed. Since the onset of the COVID-19 pandemic, these challenges have only worsened, placing the health, lives and dignity of women and girls at further risk. Meanwhile, new and alarming trends observed in recent years, such as forced puberty and increases in sexual exploitation, continue to emerge, further demonstrating the extent to which the crisis has reshaped the social dynamics of countless Syrian communities.

As the world continues to battle recurrent waves of COVID-19, the data obtained in Syria in 2020 further demonstrates the significant threat the pandemic poses in terms of further aggravating the challenges facing women and girls and the progress that has been made after a decade of collaboration.

This report also sheds light on the many positive developments that have also transpired over the past decade of the response. Women and girls' safe spaces continue to offer a unique haven for people in need in numerous communities, delivering much needed support, awareness, and engagement that makes an enormous difference in the lives of those accessing them. Young people continue to become more involved in response and awareness raising, while GBV actors continue to deliver innovative and impactful programmes that directly tackle the challenges on the ground. This serves to show that the response is indeed on the right track, however much more needs to be done to offset the cumulative aftermath of years of instability.

Our sincere gratitude goes to all those who have contributed to this publication, particularly to the inspiring women and girls, boys and men who have generously shared their testimonies and insights. We are also grateful to all donors whose support has enabled the delivery of a wide range of programmes targeting Syrian women and girls, which has helped provide the platforms and support they need to share their voices with the world.

Sincerely,



Luay Shabaneh

UNFPA Regional Director, Arab States

Intended Use of Report

The primary aim of Voices from Syria is to support the development and implementation of humanitarian programmes to prevent and respond to gender-based violence (GBV) across the Whole of Syria (WoS) response¹. The publication is also intended to be a resource for humanitarian workers' programming within other sectors/clusters - Camp Coordination and Camp Management, Early Recovery and Livelihoods, Education, Food Security, Health, Nutrition, Protection, Child Protection, Mine Action, Shelter and Non-Food Items, Agriculture and Food Security, and Water, Sanitation and Hygiene (WASH) - to better understand the risks of GBV that need to be mitigated throughout their response.

Voices from Syria does not represent prevalence data on GBV. This report should be read with an understanding of the complexities of the context of Syria. It is important to note that this publication is not intended to present a picture of Syria to the media or provide journalists with information on GBV. Voices from Syria is not to be quoted by – or to – colleagues working in the media. If any journalist is interested in further information on GBV in Syria, they should contact GBV coordinators at WoS level or in the hubs as listed under humanitarianresponse.org

¹ The WoS coordination approach was established in 2015 to bring humanitarian actors working in Syria and in neighbouring countries (cross-border operations) together to harmonise (and improve effectiveness) of the response. It is comprised of one comprehensive framework, a common response plan and a supporting coordination structure.

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1 Introduction and background

Ten years of conflict in Syria

"For violence in general, we are a city that has risen from rubble. We built life from death. We insist on life even without adequate health or education. Even without the most basic ingredients for life. We live in rented houses and under the greed of landlords[...]. All of this puts psychological pressure on the head of the family, who finds in violence a way to get rid of the psychological stress. Whenever the father gets nervous, everyone in the house becomes nervous and confused and this violence is then carried out on his wife. The husband cannot meet the needs of his family and cannot buy medicine for his son, and here he pours his anger onto his wife, who finds herself forced to endure harm simply because he has psychological stress. This kind of violence exists in homes, let alone a destroyed city. If we are talking about all kinds of solutions, the city needs health services, education, employment opportunities, security and laws that protect women and children. Laws that protect the environment in which we live" (Adult woman, Ar-Raqqa sub-district, Ar-Raqqa).

2020 marks the tenth year of the crisis in Syria. Since 2011, over 5.6 million people have sought safety outside of the country, while more than 6.6 million people have become internally displaced². Unfortunately, the year 2020 witnessed a further deterioration of security, mass displacement, and economic challenges, all in addition to the onset of the COVID-19 pandemic.

Armed unrest continued in northwest Syria in 2020, as well as repeated airstrikes in Idlib that caused further destruction of homes and infrastructure. Thousands of people were displaced from Aleppo and Idlib into various other areas within the two governorates, or into IDP camps. By the end of January 2020, the number of displaced persons in northwest Syria had reached 390,000³, nearly doubling in February, and then skyrocketing into a staggering 960,000 displaced persons in early March.⁴ Over 80% of those displaced are women and children⁵.

At the same time, the trend of economic deterioration in Syria continued over the course of 2020, exacerbated further by the US Government's Caesar Act, instituting new sanctions which have had adverse effects⁶. The devaluation of the Syrian Pound caused food

prices to increase by an estimated 236% from the previous year⁷. Food shortages and specifically bread shortages were reported, including in Raqqa where people queued for hours and sometimes entire days. Water cuts and shortages also persisted throughout 2020 in some areas of northwest and northeast Syria. Over 185,000 people in Aleppo in particular have experienced water cuts since the shutting down of a major pump station in 2017, with Al-Bab sub-district also reporting water-borne diseases that exacerbated the population's concerns about their inability to cope with the spread of COVID-19⁸. The 460,000 residents of Al-Hasakeh governorate also suffered from repeated and unpredictable water cuts throughout the year, forcing a reliance on water trucking⁹. Finally, border closures and the scaling down of border crossing points for aid delivery by the UN Security Council¹⁰ from four to one caused a substantial bottleneck affecting the provision of medical and humanitarian aid and crossline assistance¹¹.

Both the long-term conditions of conflict as well as new developments in 2020 are having and will continue to have a clear and lasting impact on a generation of Syrian girls, women, boys, and men. The following section focuses on the humanitarian situation in Syria during 2020, with specific attention paid to the needs of girls and women. What emerges is a clearly disproportionate impact of the conflict and its associated conditions on women and girls; including through the perpetual manifestation of GBV against them.

Humanitarian Overview in 2020

The conflict and its consequences have triggered what is considered one of the worst humanitarian crises in the world. In 2020, an estimated 11.7 million people were in need of humanitarian assistance within Syria¹². The protracted nature of the conflict and its devastating impact on economic activity, social services and the safety of Syrian citizens have resulted in high levels of dependence on humanitarian assistance. In turn, access of humanitarian actors to affected populations remains impeded by the conflict, limitations of access and gaps

2 UNHCR (2020). Syria Emergency. Available at: <https://www.unhcr.org/syria-emergency.html>

3 OCHA (2020). Syrian Arab Republic: Recent Developments in Northwestern Syria Situation. No. 7. January 29, 2020. Available at: <https://reliefweb.int/report/syrian-arab-republic/syrian-arab-republic-recent-developments-northwestern-syria-situation-13>

4 OCHA (2020). Syrian Arab Republic: Recent Developments in Northwestern Syria Situation. No. 10. March 12, 2020. Available at: https://reliefweb.int/sites/reliefweb.int/files/resources/20200312_nws_sitrep_10_002.pdf

5 OCHA (2020). Syria: UN continues to seek improved access to people in need as displacement rise. 26 February 2020. Available at: <https://www.unocha.org/story/syria-un-continues-look-improved-access-people-need-displacements-rise>

6 For more information on the Caesar Act and its implications, refer to: <https://www.brookings.edu/blog/order-from-chaos/2020/06/19/the-caesar-act-and-a-pathway-out-of-conflict-in-syria/>

7 Lowcock, Martin. (2020). Briefing to the Security Council on the Humanitarian Situation in Syria. October 27, 2020. Available at: <https://reliefweb.int/report/syrian-arab-republic/under-secretary-general-humanitarian-affairs-and-emergency-relief-109>.

8 Lowcock, Martin. (2020). Briefing to the Security Council on the Humanitarian Situation in Syria. October 27, 2020. Available at: <https://reliefweb.int/report/syrian-arab-republic/under-secretary-general-humanitarian-affairs-and-emergency-relief-109>.

9 OCHA (2020). Syria Situation Report: Alouk Water Station. No. 1. August 25, 2020. Available at: <https://reliefweb.int/report/syrian-arab-republic/syria-situation-report-1-alouk-water-station-25-august-2020>

10 UN News (2020). "Security Council beats midnight deadline, renews Syria cross-border aid in contentious vote" January 10, 2020. Available at: <https://news.un.org/en/story/2020/01/1055181>

11 Lowcock, Martin. (2020). Briefing to the Security Council on the Humanitarian Situation in Syria. October 27, 2020. Available at: <https://reliefweb.int/report/syrian-arab-republic/under-secretary-general-humanitarian-affairs-and-emergency-relief-109>.

12 UNFPA (2020). Regional Situation Report for The Syria Crisis. Issue No. 96. August 1-31, 2020. Available at: https://arabstates.unfpa.org/sites/default/files/pub-pdf/unfoa_regional_situation_report_for_the_syria_crisis_-_august_2020_-_fa_0.pdf

in infrastructure¹³. Armed conflict continued to threaten the lives and the search for stability of Syrian women, girls, men and boys¹⁴.

The impact of the COVID-19 pandemic was severely felt by the Syrian population during 2020. Following the confirmation of first laboratory case of COVID-19 in Syria on March 22nd 2020¹⁵, the Government of Syria, other local authorities and humanitarian actors all imposed infection prevention measures to minimise the spread of the disease, including lockdowns, curfews, interruption of all economic and humanitarian activities deemed non-essential and school closures. Borders with neighbouring countries were also affected and movements outside of Syria became increasingly difficult. While the extent of restrictions varied substantially across different regions in Syria, protection data from the 2020 Multi-Sectoral Needs Assessment (MSNA) showed that approximately 25% of communities across the whole of Syria saw their movements limited due to COVID-19 measures. Living conditions for internally-displaced Syrians residing in camps were particularly affected by restrictions of movements and requirements to social distance, which were harder to implement in overcrowded spaces and thus had a more direct impact on everyday experiences. These restrictions were progressively lifted starting in May 2020 to alleviate their social and economic impact, though subsequent localised lockdowns and other restrictions were implemented in the presence of specific outbreaks and spikes in cases.

The already fragile conditions of the Syria healthcare system were severely tested by the outbreak, with limited capacity to conduct testing and contact tracing contributing to community transmission. The lack of personal protective equipment (PPE) and the global competition for such items affected healthcare workers and the general population. A struggling healthcare system has profound implications for the wellbeing of women and girls who are unable to access essential sexual and reproductive health services¹⁶.

The effects of the pandemic were particularly felt on livelihoods, where they combined with other factors negatively affecting the Syrian economy, including the devaluation of the Syrian Pound against the US dollar and the economic crisis in Lebanon. An interagency socio-economic assessment in August 2020 found

evidence of a significant economic downturn, including the estimated permanent loss of 200,000-300,000 jobs, especially within the informal sector and amongst small businesses, and a 50% decline in remittances, an essential source of income for many Syrian households¹⁷. Food insecurity increased during this period as well, due to high levels of unemployment and rising prices of basic commodities¹⁸. **The impact of such dire economic conditions of women and girls cannot be overstated, with clear linkages between the deterioration of livelihoods and incidents of GBV highlighted by women, girls and GBV service providers working in Syria.**

The humanitarian response to the Syria crisis had to quickly adapt to new operating conditions once the COVID-19 pandemic hit the region. Most humanitarian organisations had to scale back or interrupt activities due to lockdown measures and restrictions imposed on movement of their teams and/or their supplies, while seeing an increase in their operating costs due to fluctuations in the exchange rate, fuel shortages and difficulties in transferring funds.¹⁹ As an example, in April 2020, UNFPA in Syria reported their partners had to interrupt the activities of 19 out of 48 women and girls safe spaces (WGSS) and 90 out of 196 mobile teams providing both GBV and Sexual and Reproductive Health (SRH) services and awareness sessions²⁰. Regardless, humanitarian actors worked hard to ensure a minimum level of continuity in humanitarian assistance by adapting services for remote delivery through telephone, social media or other online platforms. Door-to-door delivery also became an alternative modality of assistance, especially for food and non-food items (NFI) distributions, to avoid gathering and crowds and thus minimise the risk of infection²¹. By September 2020, UNFPA Syria's partners reported that 120 GBV mobile teams and 47 out of 48 WGSS had resumed operations²².

13 OCHA, WHO (2020). SYRIAN ARAB REPUBLIC: COVID-19. Humanitarian Update No. 20 as of 29 October 2020. Available at: https://reliefweb.int/sites/reliefweb.int/files/resources/Syria_COVID-19_Humanitarian%20Update_No%202020_29Oct2020_FINAL.pdf

14 UNFPA (2020). Regional Situation Report for The Syria Crisis. Issue No. 96. August 1-31, 2020. Available at: https://arabstates.unfpa.org/sites/default/files/pub-pdf/unfoa_regional_situation_report_for_the_syria_crisis_-_august_2020_-_fa_0.pdf

15 OCHA (2020). Humanitarian Update Syrian Arab Republic. No. 10. April 16, 2020. Available at: <https://reliefweb.int/report/syrian-arab-republic/humanitarian-update-syrian-arab-republic-issue-10-16-april-2020-enar>

16 UNFPA (2020). Regional Situation Report for The Syria Crisis. Issue No. 96. August 1-31, 2020. Available at: https://arabstates.unfpa.org/sites/default/files/pub-pdf/unfoa_regional_situation_report_for_the_syria_crisis_-_august_2020_-_fa_0.pdf

17 UNFPA Syria Country Office (2020). COVID-19 Humanitarian Response Flash Update No. 8. 1-30 September 2020. Available at: <https://reliefweb.int/sites/reliefweb.int/files/resources/UNFPA%20COVID-19%20Humanitarian%20Response%20flash%20update%20%238.pdf>

18 OCHA, WHO (2020). SYRIAN ARAB REPUBLIC: COVID-19. Humanitarian Update No. 20 as of 29 October 2020. Available at: https://reliefweb.int/sites/reliefweb.int/files/resources/Syria_COVID-19_Humanitarian%20Update_No%202020_29Oct2020_FINAL.pdf

19 Ibidem

20 UNFPA Syria Country Office (2020). COVID-19 Humanitarian Response Flash Update No. 2. 9th - 22nd April 2020. Available at: <https://syria.unfpa.org/sites/default/files/pub-pdf/UNFPA%20COVID-19%20Humanitarian%20Response%20flash%20update%20%232.pdf>

21 OCHA, WHO (2020). SYRIAN ARAB REPUBLIC: COVID-19. Humanitarian Update No. 20 as of 29 October 2020. Available at: https://reliefweb.int/sites/reliefweb.int/files/resources/Syria_COVID-19_Humanitarian%20Update_No%202020_29Oct2020_FINAL.pdf

22 UNFPA Syria Country Office (2020). COVID-19 Humanitarian Response Flash Update No. 8. 1-30 September 2020. Available at: <https://reliefweb.int/sites/reliefweb.int/files/resources/UNFPA%20COVID-19%20Humanitarian%20Response%20flash%20update%20%238.pdf>

The disproportionate impact of the Syrian conflict on girls and women continues

The persistence of armed conflict, economic deterioration, displacement, shortages of food, limited access to healthcare, and the COVID-19 crisis all have a gendered and disproportionate impact on girls and women in Syria today. As all previous Voices from Syria reports stressed, this impact is manifested primarily through the GBV that girls and women are subjected to, but also, in their unequal and more precarious experiences of these strenuous conditions. The following example of an adult woman describing the impact of armed conflict on her life, demonstrates that her fears are not only of the armed conflict itself, but what it might mean for her access to humanitarian aid or services as the primary care-taker of her disabled child, while at the same time fearing intimate partner violence (IPV) from her husband: *"In general, the security situation is frightening, especially the air strikes, which make it difficult to reach the centres. My son needs someone who carries him because he cannot walk, and I fear my husband"* (Adult woman, Idleb sub-district, Idleb). Her experience of insecurity and fear of GBV is not unique. As this report demonstrates, girls and women reported an increase in IPV and other forms of GBV throughout the 10 years of conflict and in 2020 as well, demonstrating direct links between war, displacement, economic instability, and GBV.

Past *Voices from Syria* reports have also alerted to the prevalence of early marriage in connection with economic insecurity, and findings from 2020 highlight the continuation of this practice at even younger ages. Today, a 12-year-old girl in Syria has not only witnessed a decade of conflict but may have also been displaced and seen her education denied or disrupted. Increasingly, she can expect to be forced to marry at an earlier age, especially if she has been displaced and her family has been pushed into economic insecurity and poverty. She is also likely to have already faced, or will soon experience, sexual harassment as well as psychological, emotional, and social violence both within her family and in her community at large.

Beyond GBV, girls' and women's health has been significantly impacted throughout the conflict, including their access to much needed SRH services, and medical care for chronic illnesses or to manage a disability. A GBV expert confirmed that "access to medical services is becoming more dangerous" (GBV expert, Turkey Cross Border) in 2020, compounded by the COVID-19 pandemic²³, but also by girls' and women's inability to afford healthcare: *"Adult woman 1 agreed [with a previous comment], saying that she needs a hospital for women, being pregnant herself, and the only available hospital is*

private and she doesn't have enough money, and then she started crying and we tried to comfort her" (Facilitator of adult women FGD, Harim sub-district, Idleb). Pregnant girls and women frequently worry about their ability to deliver safely if there are no hospitals nearby or if they are at risk of displacement, which can lead to unsafe procedures and/or more complications in their health, as a GBV expert noted: *"I want to highlight the lack of medicines in hospitals (especially maternal hospitals) and people lack the capacity and money to purchase them on their own. I know a case of a woman who had to ask her children to beat her on her back, and carry heavy loads of wood, in order to force an abortion because the medical facility wasn't able to provide the needed medication"* (GBV expert, Turkey Cross Border).

Girls' and women's livelihoods are also fragile, with many unexpectedly becoming heads of households due to divorce or the death of their husbands, in a context where they were already disadvantaged in the employment market and facing an economic crisis that makes "vital goods such as food unaffordable for many"²⁴. An estimated 11% of households in Syria are currently headed by a woman²⁵. In many cases, the consequences of systemic discrimination against divorced and widowed girls and women, wherein families force them to give up their rightful inheritance or deprive them of ownership, have long-term consequences on girls' and women's risk of homelessness, especially in a context of conflict where adequate shelter is scarce or unaffordable.

In face of this multi-layered reality of violence, discrimination and inequality, girls and women remain resilient. Girls and women continue to advocate and work for the reduction of violence in their communities and to develop new coping mechanisms and paths of personal and economic empowerment. As a group of GBV experts from the WoS response agreed, even after a decade of war, girls and women remain steadfast in their demands for a better life and future: *"Despite the lengthy crisis, women and girls continue to be resilient and in fact demonstrate increased skills and empowerment to deal with the crisis"* (GBV expert, WoS).

23 UNFPA (2020). Overview of Funding Needs UNFPA Regional Syria Crisis Response. No. 21. November 19, 2020. Available at: <https://syria.unfpa.org/en/publications/overview-funding-needs-unfpa-regional-syria-crisis-response-21-0>

24 WoS Food Security Sector. (2020). Situation Report: First Quarter. Available at: https://fscluster.org/sites/default/files/documents/fss_whole_of_syria_situation_report_-_q1_2020.pdf

25 Humanitarian Needs Assessment Programme (HNAP) (2020), Summer 2020 Report Series, Demographic Overview.



2 Summary of Key Findings

Normalisation of GBV against women and girls continues

Women and girls living inside Syria continued to face discrimination and exclusion, economic deterioration, high levels of insecurity and GBV in almost all walks of life in 2020: *"Violence has spread everywhere, at work, in the market, and public transportation. And this year I have been hearing about more violence incidents probably due to the financial situation and COVID-19 and people are not working anymore. I feel that it has increased"* (Young woman, Lattakia sub-district, Lattakia). Economic deprivation, combined with the psychosocial impact of living with conflict for 10 years, have led to not just an increase in violence against women and girls, but also the continued normalisation of violence across society: *"The participants agreed that men and boys are less vulnerable to violence than women and girls. Women and girls are exposed to violence at a greater rate due to the ignorance of some women and girls of their rights, and they are exposed to violence without knowing that what is happening is not normal"* (Facilitator of adult women FGD, Kisreh sub-district, Deir-ez-Zor). Women and girls continue to bear the brunt of violence within and outside their homes: *"Women and girls endure violence more than anyone else because they cannot defend themselves. And the spread of poverty and war and displacement have made things much worse, and they became more subjected to violence by the husband or the father"* (Adult woman, Qourqeena sub-district, Idleb).

Increasing levels of poverty and mounting difficulties in finding employment sufficient to sustain a family's needs, directly impact women and girls' wellbeing, their opportunities and, tragically, their safety in multiple and compounding ways: *"Women in general, those who work to provide for their families in addition to widows and divorced women, suffer a lot because of the chaos and instability we are living in. They are carrying heavier burdens and this threatens further exploitation, because of a lack of resources and income, as they live in camps or in some cases, they are becoming homeless due to the patriarchal culture that controls our society"* (Adult woman, Idleb sub-district, Idleb).

In addition to IPV and family violence against girls, especially by their brothers and fathers, forms of GBV that continue to affect the daily lives of women and girls in Syria in 2020 included sexual harassment and sexual violence, including in places of detention and within the context of kidnapping: *"Women have always been unlucky, and if [she was] in prison she will be subjected to all kinds of violence and might get raped"* (Adult woman, Azaz sub-district, Aleppo). Sexual exploitation and abuse by humanitarian workers, local authorities and other actors involved in the distribution of humanitarian assistance also remains a reality for many women and girls and, in particular, female-headed households: *"Yes, there are free services, and there are those who offer these services for them in return for taking half of the basket or payments in exchange for it, and also for sexual favours"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

The negative impact of patriarchal social norms on women's and girls' lives persists

Women and girls who face compounded forms of discrimination, such as those living with a disability, or widows and divorced girls and women stigmatised by their own families and societies, are exposed to even harsher and more frequent forms of GBV: *"Widows and divorcees that live alone are exposed to violence and sadly they cannot do anything about it for the fear over their reputation and the scandal; because society is merciless"* (Young woman, Lattakia sub-district, Lattakia).

Access to education has become increasingly difficult for adolescent girls, specifically: *"I'd like to carry on my studies, but everything is against this – my family, the war, where I live"* (Adolescent girl, Al-Bab sub-district, Aleppo). Girls are instead being forced to work to provide for their families: *"If we want to learn, our people would starve, so we go to work to continue living"* (Adolescent girl, Idleb sub-district, Idleb), or, more commonly, to get married: *"Early marriage has increased more this year. [...] We have become used to it, forced and coerced"* (Adult woman, Basira sub-district, Deir-ez-Zor). Adolescent girls also continue to be subjected to severe restrictions of movements due to their age and gender: *"As for us girls, due to customs, and scandal, it is forbidden for us to go out alone"* (Adolescent girl, Al-Bab sub-district, Aleppo). Widows and divorced women also see their movements severely restricted: *"Divorced women are not allowed to go out without the company of their father or brother. Widows, if they have children, can go out with their older sons wherever they want to go, otherwise they do not go out"* (Adolescent girl, Basira sub-district, Deir-ez-Zor).

Highly restrictive and unequal gender norms persist in Syria. Even though women and girls are now more likely to work outside the home, IPV and other forms of GBV are routinely used to reinforce norms of dominant masculinity: *"Men now stay at home while women go out for work and carry out the responsibilities of their families, and this causes men to practice more violence because they are deprived of work opportunities [...] Men with an inferiority complex let out their anger on their women"* (Adult woman, Azaz sub-district, Aleppo). Women and girls are prevented from making choices about their education, their partners, their movements or their dress code: *"The girl does not have freedom, so she is exposed to harm and difficulties. She has no authority over anything. She is subject to the opinion of the parents, and the girl has no freedom at all. If she wants to get married or choose her life partner, her family refuses her choice and marries her to someone they select for her"* (Adolescent boy, Idleb sub-district, Idleb). When attempting to obtain their rights, for example to their inheritance or to their children's custody: *"The girl in our society is not permitted to claim her right and if she claims it, she would have committed a major crime. How can you take the land from your brother? Customs and traditions have made claiming our rights a source of great shame and sin"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Consequences of GBV and coping strategies

The normalisation of GBV in the lives of Syrian women and girls is often accompanied by a sense of powerlessness in the face of unequal gender norms and the threat of further violence. As such, staying silent about experiences of violence remains the most common coping mechanism among survivors of GBV: *"When women are subjected to beatings, harassment or rape, they do not defend themselves and they do not have the power to confront, as they do not know what their rights are and remain silent because they see themselves unable to do anything as society sees them"* (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh). Non-disclosure also leads to feelings of isolation, shame, and psychological distress: *"There are girls who are always exposed to violence and don't say anything because they are ashamed and hate anyone to pity them"* (Adolescent girl, Afrin sub-district, Aleppo). Disclosure can also expose girls and women to further violence including family violence, threats of divorce, and social stigma, among others: *"Women are often beaten and verbally abused by men and remain silent and are unable to do anything. If you go and complain, this will make matters worse, as the man divorces the woman, so most women are silent in order not to lose their children"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh). Therefore, girls and women choose non-disclosure in order to minimise the possibility of experiencing other forms of GBV. However, they are also cognisant of its impact on their personal wellbeing: *"We should not remain silent. I have to defend myself so that I do not have psychological issues"* (Adolescent participant, Jaramana sub-district, Rural Damascus).

Further, experiencing GBV also leads many girls and women to find multiple ways to cope with violence, including changing their behaviour, such as the way they dress and when they go out, often isolating or limiting their own movements: *"Violence can be reduced by minimising contact and distancing ourselves from those we know may expose us to violence"* (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh). Girls and women also carefully choose when and how to express disagreement or grievances in order to minimise the risk of further GBV: *"A woman should not respond to her husband until he calms down and then she would talk to him. This decreases physical violence. I use this approach and it is working for me"* (Young woman with disability, Damascus sub-district, Damascus). Further consequences of violence include suffering from health problems, social isolation, and long-term psychological distress: *"Deprivation of education, healthcare, and planning for the future: most of it is against girls and women. Girls are forbidden to leave the house. It causes us psychological pressure and stress; the violence is everywhere"* (Adolescent girl, Al-Bab sub-district, Aleppo).

At the same time, however, the expanded and sustained presence of GBV service providers is increasingly visible, as is their impact on women's and girls' coping

strategies when they do fear GBV: *"The existence of humanitarian organisations, and their focus on the role of women, the recognition of their rights, and the provision of awareness sessions, so women began to speak out, defending themselves and their rights and their presence in society: they are half of society not a minority. This encouraged her to turn to legal authorities in society to claim her rights and also seek out humanitarian organisations in order to receive psychological support service so that she becomes stronger and more confident"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh). In addition, girls and women continue to demonstrate unparalleled resilience in coping with GBV: *"Despite the length of the crisis we can see the women are quite resilient"* (GBV experts FGD, WoS).

COVID-19: a new risk factor for GBV

It is against this already difficult picture for women and girls in Syria that the impact of the COVID-19 pandemic needs to be examined. Restrictions put in place to limit the spread of the disease severely affected employment and income, education, availability of services and freedom of movement in the context of the economic crisis. Worsening conditions across all of these areas, in turn, were linked to an increase in violence within the home, including IPV against women and violence against children: *"And the COVID-19 pandemic has increased the rate of violence, especially domestic violence, due to home quarantine and poor financial returns for families that depend on daily income"* (Adult woman, Kisreh sub-district, Deir-ez-Zor). GBV experts working in the humanitarian response confirmed the increase in reports of IPV to GBV-specialised services during 2020 and also highlighted growing trends in relation to early marriage and sexual violence: *"During the COVID period – early marriage and domestic violence were increasingly reported to us. Forced marriage/early marriage results from economic constraints due to COVID. IPV comes from women being locked up with the perpetrators during the COVID curfew"* (GBV expert, WoS).

On the other hand, the impact of COVID-19 restrictions on GBV outside the home was less clear and might be more directly related to contextual specificities. While some respondents believed that *"during the ban period, due to the commitment to distancing, as well as the suspension of travel and foreign visits, [the] violence here decreased,"* (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh), other respondents thought that the *"COVID-19 period increased [violence] because people stayed at home because of the ban, streets were empty and kidnapping and harassment cases increased"*. (Adult woman, Atareb sub-district, Aleppo).



3 Feminist Perspective and Methodology

In line with global trends, girls and women continue to be disproportionately affected by GBV in Syria. In adopting a qualitative approach to data gathering and analysis, Voices from Syria 2021 brings girls' and women's voices to the forefront and prioritises their views and experiences of GBV. Moreover, in order to offer a rich, detailed, and nuanced representation of women's and girls' humanitarian needs, this report gives prominence to direct quotes from women and girls throughout all of its sections. The use of qualitative research methods to specifically investigate experiences of GBV is recommended given the complex cycles and multiple forms of violence that characterise the experiences of survivors²⁶. Qualitative, open-ended questions allow women and girls to describe GBV and its impact on their lives in their own terms, without having to utilise externally determined language and definitions of violence. They also permit women and girls to autonomously manage the risks of sharing direct and personal experiences of GBV, for example by referring to hypothetical or 'hearsay' stories.

The quotes were collected through Focus Group Discussions (FGDs) in northeast and northwest Syria and were conducted using a tested qualitative tool with several probing questions, encouraging girls and women to discuss experiences, feelings, and views that cannot normally be captured through a quantitative approach (see Annex 1 for a detailed description of the tool and methodology). Quotes from women and girls were also gathered from partner programme data in all other areas of Syria.

In using the quotes to drive the subsequent analysis, this report hence adopts a feminist approach to present various overlapping forms of discrimination that girls and women face today in Syria in depth. The feminist approach adopted here is in line with a feminist perspective that understands GBV as the emanation of an unequal gendered hierarchy, enforced through systemic violence, in order to continue privileging men and masculinity over women and anyone perceived as feminine.

Feminist approach: an analytical approach that foregrounds women's and girls' experiences in order to demonstrate systemic discrimination against them and advance their struggles for equality.

The report's feminist approach also necessitates using an intersectional lens in order to accurately relay the complex interactions between various systems of violence and oppression that girls and women experience in Syria, and which render them vulnerable

in multiple ways. Crucially, an intersectional feminist approach alerts us to consider how other forms of inequality and oppression – such as discrimination based on age, marital or displacement status or having a disability – affect diverse women and girls living in Syria today. For example, the following quote reveals that becoming a widow increases women's exposure to GBV in the form of family violence, rendering her living situation even more precarious: *"I can't make a decision on my own because my husband died and the whole family interfere in my decisions whether it is personal or not, they even control my movements out of the house and my clothes"* (Adult woman, Harim sub-district, Idlib).

Intersectionality: a tool used to demonstrate overlapping systems of oppression and their interaction, such as connections between discrimination and violence based on gender, race, class, sexuality, religion and disability.

Recognising the disproportionate impact of violence, and GBV in particular, on women and girls, does not imply ignorance of the significant ways in which Syrian men and boys are exposed to conflict-related violence, sexual violence, and other forms of violence such as severe violations of human rights (these are however outside the scope of the Voices from Syria report). Several of these experiences of violence were highlighted during the discussions including child labour, forced recruitment by armed groups, and sexual violence and torture in the context of detention.

However, the intersectional feminist approach to analysis adopted in this report requires understanding how context-specific systems of gender inequality, which predated but have also been permanently transformed by the conflict, place women and girls at an increased risk of violence and dramatically limit their access to resources and opportunities to keep themselves and their children safe.

As one of the participants from Homs explained: *"Our society exposes women to violence, but not men. [...] Our society is patriarchal; it always stands behind the man. If a man wants to get divorced, society would back him up, but if a woman wants the same, society stands against her and she has to be compliant because that is her fate"* (Adult woman, Homs sub-district, Homs).

26 Westmarland, N., & Bows, H. (2018). Researching gender, violence and abuse: Theory, methods, action (1st.). Routledge. See also T. Skinner, M. Hester, & E. Malos, (2005) Researching Gender Violence: Feminist methodology in action. Willan Publishing.

Data Sources, Collection, and Analysis

This report is based on 80 FGDs conducted in several governorates in northeast and northwest Syria with girls, women, boys, and men generally divided in the following age groups: 12-14, 15-17, and 18+. Programme monitoring data from UNFPA in government-controlled areas of Syria also complemented data collected in other areas. A total of 520 participants contributed their voices. Each quote used in this report is followed by a reference that mentions the gender and age group of FGD participants or, in the case of government-controlled areas, who the quote was attributed to during programme monitoring activities. The reference also mentions whether the quote is provided by a person with a disability, or is from a mixed-gender FGD in cases where it was impossible to determine whether the participant speaking was a man or a woman. In some cases, quotes from facilitators of FGDs are also used, for example when they provide a pointed summary of the discussion that took place.

The FGDs were conducted by trained GBV and/or protection facilitators who ensured that discussions could be held safely and responsibly. The facilitators were trained to use a qualitative questionnaire developed by GBV coordinators in partnership with the Protection Cluster coordinators (general protection, child protection and mine action) to guide the discussion and gather qualitative data. For example, participants were asked about their understanding of violence against girls and women, including their perceptions of its spread in their community, then probed further to discuss who is most at risk of exposure to the types of GBV they themselves identified, under which conditions and with what impact. Using a qualitative approach not only opens space for the participants to discuss GBV in depth as a multi-faceted phenomenon, but it is also critical for identifying new forms of GBV, new clusters of people at risk, and various protection needs and services in a specific community. The qualitative tool, coupled with the subsequent feminist intersectional approach to analysis, allow for capturing critical information on humanitarian needs, responses, and the impact of GBV and protection services, which can then be used to inform various actors on how to respond to GBV, and further develop the Syria Humanitarian Response Plan.

The collected data in this report is also supported by two FGDs conducted with GBV experts²⁷ working on the Syria humanitarian response who offered a holistic perspective on the status of GBV and GBV protection interventions in Syria in 2020. Data from MSNA conducted during 2020 through key informant interviews with adult respondents in all governorates

of Syria was also integrated in the analysis. Finally, for contextual accuracy, the report uses a review of secondary data (Found in Annex 3: References List) as well as various feedback from FGD facilitators and GBV experts working in Syria. All FGDs and secondary sources were coded and analysed in order to accurately trace and present the main issues affecting girls and women in 2020.

Gender/Age	No. of FGDs	No. of participants
Women	26	155
Girls	26	162
Men	14	106
Boys	14	97
Total	80	520

Limitations and data collection challenges

The COVID-19 crisis and ensuing lockdowns affected access to participants to varied degrees. For example, some participants in the camps in Al-Hasakeh could not be reached in person and instead joined the discussion through online applications such as WhatsApp or Zoom. However, both facilitators and participants faced challenges in accessing a stable internet connection and ensuring privacy. Some FGD facilitators reported needing to provide additional reassurance to women and girls that the information shared over the phone would be treated confidentially, and ultimately noting that participants were less likely to express themselves freely during a telephone call compared to traditional face-to-face FGDs. Telephone and online FGDs made it harder to read the participants' facial and bodily reactions which are important communication cues that facilitators rely on to ensure they are providing a safe and comfortable setting. Due to social distancing measures, in-person FGDs were limited to smaller groups of 1-4 participants where necessary. In some cases, data collection was postponed until after the lifting of COVID-19 lockdowns to enable face-to-face meetings and discussions. While this strategy enabled more in-depth conversations and direct contact with participants, it meant that data collection was delayed, and an overall smaller number of people could be involved compared to previous years.

²⁷ GBV experts are technical supervisors and/or programme managers that have extensive experience working on GBV issues in the context of Syria.

There were also context-specific limitations to data collection in some areas. For example, facilitators faced challenges in securing permission for adolescent girls' participation from parents in several settings: *"There are girls who want to participate in such activities, but their families prevent them"* (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa). The use of telephones for data collection also meant that some FGD facilitators needed to obtain permission from a male member of the household before contacting adult women, due to strict gender norms and gendered patterns of telephone ownership, which raises questions about the confidentiality of the conversations. Therefore, the necessarily incomplete nature of qualitative data in 2020 calls for a careful interpretation of the data presented in this report.

Concerns surrounding the sensitivity of information and the potential repercussions of sharing experiences or opinions about GBV in front of other women and girls from the community were also flagged as an obstacle to data collection by some FGD facilitators. These concerns appeared to be particularly relevant for women and girls living in camps for displaced Syrians. This challenge in data collection has been echoed by other researchers working in the same context, who reported that women feared that sharing their views in the presence of other women whom they did not know or trust could lead to accusations of shameful behaviour²⁸. Whenever requested by women and girls, additional measures to ensure anonymity and safety were put in place when conducting the FGDs.

Despite the challenges outlined above, women and girls participated actively in the group discussions, both in person and online. Many girls and women used the space created by the FGDs to disclose their frustrations with humanitarian assistance, their experiences of violence, to seek support from each other as well as from the facilitators and to voice their most immediate needs. Women and girls who took part in the discussions felt listened to and cared for, according to FGD facilitators. As a participant shared: *"Safe spaces are only given by organisations, and they give us space for self-expression"* (Adult woman, Ar-Raqqa sub-district, Ar-Raqqa). As such, FGDs offered opportunities for understanding the communities' needs and tracking any new challenges and issues that they faced beyond GBV.

28 Vera Mironova. Life Inside Syria's al-Hol Camp. Middle East Institute. July 2020. Available at <https://www.mei.edu/publications/life-inside-syrias-al-hol-camp>



4 **Analysis of findings**

"Yes, there is violence. Women are exposed to violence, including the denial of expression and decision-making rights, deprivation of work and education, of going out into social spaces and of raising their children at home. They are also subjected to harassment and rape during the war, as well as being beaten and kidnapped, distorted, emotionally abused, neglected and discriminated against. Where they are told that you are a woman, you cannot be allowed to be free because you will inflict shame on us, and this applies to girls as well, where women and girls are subjected to pressure and suppression" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Violence is a constant feature of the lives of women and girls in Syria today. In this report, we use GBV as an umbrella term to refer to violence that is directed against women and girls with the intention and/or effect of reaffirming and maintaining their subordinate position in a gendered hierarchical system²⁹. Women, girls, boys and men provided multiple examples of physical, emotional, economic and sexual violence being used to reinforce men's dominant position, especially in a context where their traditional status markers are eroded by conflict and displacement. *"As for men and boys, they always give excuses that women do not deserve respect and should not be spoiled so that we do not become strong in front of them" (Adult woman, Basira sub-district, Deir-ez-Zor).* Women and girls confirmed that *"Women and girls are exposed to violence at a greater rate" (Adult woman, Kisreh sub-district, Deir-ez-Zor)* due to gendered social norms and structures: *"A man would shout at a woman, but she cannot do the same. Women are more exposed to violence" (Adolescent girl, Hama sub-district, Hama).*

As explored in the methodology section, the analytical approach in this report employs an intersectional feminist lens to examine not only how girls and women are affected by gender discrimination, but also how other forms of inequality contribute to their systemic oppression. Therefore, the in-depth analysis of GBV that follows highlights how women and girls who live at the intersection of multiple forms of inequality are differently affected by GBV and, importantly, how the compounded discrimination they face might limit the coping strategies available to them and compromise their access to lifesaving services and support.

Figure 1 - GBV Trend analysis



²⁹ This definition is in line with the UN Declaration on the Elimination of Violence Against Women when it states that GBV is a "a manifestation of historically unequal power relations between men and women, which have led to the domination over and discrimination against women by men and to the prevention of the full advancement of women" (DEVAW 1993).

Types of Gender-based Violence

Women and girls who took part in the community focus groups in 2020 mentioned a range of different forms of violence that affect them similarly to previous years. Sexual, emotional, psychological and physical violence were all mentioned as commonly occurring within the community, as well as early marriage, economic violence and denial of opportunity and resources: *"The husband doesn't let his wife work or even leave the house. Harming, beating or burning, physical violence, psychological violence (bullying) and harsh words. Sexual violence (harassment and rape) [...] It's a high percentage" (Adult women, Hama sub-district, Hama).*

Compared to 2019, online sexual harassment and other forms of digital violence were less prominent in discussions with women and girls, though not completely absent: *"Some children are victims of exploitation by men towards girls and women, using photos and videos in return for sexual favours" (Adult woman, Deir-ez-Zor sub-district, Deir-ez-Zor).* This lack of emphasis on digitally mediated violence, however, might be more the result of a focus on the impact of COVID-19 on IPV and other forms of violence in the home during the discussions, than of an actual change in forms of violence experienced by women and girls. GBV experts confirmed that girls and women use online interaction as a coping mechanism, and that *"it can have risks of cyber harassment or IPV"*. (GBV experts FGD, WoS).

On the other hand, sexual exploitation and abuse in the context of humanitarian distributions appears to remain a concern, especially women who are subject to different forms of discrimination, such as widows or adolescent girls: *"Things may happen at the time of distribution. The girl is not like the young man and cannot compete and enter between men and young people to take her package and she may be sexually exploited by one of the distributors in order to give her the material she needs" (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa).*

Risk factors

When discussing factors that increase the risk of GBV for all women and girls, **poverty and economic deterioration**, prevailing gender norms and the lockdown conditions caused by the pandemic were the most common responses, though these factors also appeared to be strongly correlated: *"Customs and traditions and gender-based discrimination and the bad economic situation force parents to marry girls at an early age" (Adolescent girl, Basira sub-district, Deir-ez-Zor).* As highlighted above, the **confinement** at home due to COVID-19 preventive measures was directly linked to an increase in violence at home: *"The rate of violence has increased in light of the spread of the COVID-19 pandemic, due to the constant tension, fear, anxiety, and especially home quarantine, which has significantly increased domestic violence" (Adult woman, Kisreh sub-district, Deir-ez-Zor).*

The **conflict, displacement** and the harsh living conditions in camps and informal settlements were also often mentioned, especially amongst IDP respondents, as contributing to GBV: *"There has always been violence but after the displacement, it increased a lot. We started to see, live and hear new things, they started to give their daughters for marriage at the age of 12, no education, divorce became so common without a reason, neglect at home and the man doesn't allow the woman any rights, and threatens her to get remarried if her cooking is not good. The brother hitting his sister is justified by the fact that he has the right to educate her. In short, I mean that women and girls are more exposed to violence and the woman lives a constant nightmare of fear" (Adult woman, Al-Bab sub-district, Aleppo).*

Overcrowding and lack of privacy, in particular, were considered conducive to sexual harassment and rape: *"We also noted sexual abuse cases against women and girls due to overcrowding and proximity of tents which is exposing especially girls to risk of sexual violence. IDPs come from different areas and women and girls don't have the community support they used to have and are living in a completely new area. They are exposed to sexual harassment and violence which is forcing girls to completely avoid leaving their room so that they don't get exposed to any form of sexual harassment by the community" (GBV expert, Turkey Cross Border).*

A number of respondents highlighted **harmful gender norms** and high levels of **inequality** within their society as a root cause of violence against women and girls: *"Meanwhile, our society is under the control of customs and traditions, as in some regions violence is a normal thing, and they provide prior justifications to practice it. For example, if a man beats his wife or sister people say: 'It is normal. So what? It is his right'" (Adult woman, Idleb sub-district, Idleb).*

Sexual violence

Figure 2 - Types of Sexual violence



Various forms of sexual violence were mentioned as commonly affecting women, girls, boys and, in some specific cases, men. However, some reticence in admitting that women and girls are subjected to sexual violence was also identified: “[She replied that] no cases of sexual abuse exist in the area and that she has never heard of it and all other participants agreed with her” (Facilitator of adult women FGD, Harim sub-district, Idlib). Nonetheless, women and girls appeared to be increasingly open to discussing at least some forms of sexualised violence: “And there is a constant increase in sexual violence, such as harassment and assault in the neighbouring tents” (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Sexual harassment and assault were primarily linked to situations leading to overcrowding, such as distributions and using public transport: “a guy once grabbed my chest and I was really scared and after it I kept my distance from people and on the bus one guy got too close to me, and I fainted because I was so scared” (Adolescent girl, Damascus sub-district, Damascus).

Exploitation by employers was also common: “Our neighbours’ daughter works to help her family, to provide for her brothers, she was exposed to sexual abuse by her employer. She has siblings with disabilities, she doesn’t receive all her salary, she only gets 1000 SP/ per day, though she is persisting in order to help her family” (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa). Women and girls are also exposed to exploitation for the purposes of sex work: “There are women in displacement, a widow with children who wants to work, and another party comes and takes advantage of her and takes her in a certain direction, do you know what I mean?” (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa); and “Some girls are employed for sexual purposes” (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh). **Sexual violence** by armed actors

and authorities was also discussed in the context of detention or at checkpoints: “When [women] cross checkpoints, in particular, they are asked for an amount of money or sex” (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh). Additionally, the participation of men and boys in hostilities can have a gendered impact on girls and women who are related to them, such as exposing them to sexual violence: “Yes, it is a big problem because the person who participates in the hostilities, his family is exposed to danger and surveillance, and if someone wants to take revenge on him, he may kidnap one of his sisters and sexually abuse her” (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Sexual harassment in public spaces remains a widespread concern affecting all women and girls, driving them to modify their behaviour, including by restricting their movements and adopting specific dress codes: “Boys harassing girls in streets. I never go out of the house alone, because of harassment, I even started wearing a Burqa to avoid that and my mother wears it too for the same purpose” (Adolescent girl, Azaz sub-district, Aleppo). In a number of cases, fear of being kidnapped and sexually abused by strangers continues to affect women and girls and tragically impact their freedom of movement: “Girl 1: The parents are afraid to let the girl go out alone. Girl 2: Verbal harassment by young men, so she will not be allowed to go out alone. Girl 3: We might be exposed to kidnapping because it is not safe on the road” (Adolescent girls FGD, Idlib sub-district, Idlib). This fear was exacerbated, for some, during the pandemic: “We became scared to walk in the street during the quarantine because we’re afraid we might be harassed, kidnapped, robbed, especially in small and empty streets” (Adult woman, Homs sub-district, Homs).

Both GBV experts and some respondents confirmed that sexual violence, including rape and sexual harassment, increased since the beginning of the year: “I am definitely seeing more cases of rape and unwanted pregnancies this year” (GBV expert, Turkey Cross Border). These trends were connected to COVID-19 restrictions in some circumstances, but also with large displacement movements in northwest Syria. An increasing concern which emerged from the FGDs, often in relation with COVID-19, was sexual violence against children outside and inside the home: “Children being raped. That has also increased during COVID-19” (Adult woman, Homs sub-district, Homs). Somewhat unsurprisingly, marital rape was not discussed, though GBV experts were adamant that this form of sexual violence is present in the affected Syrian communities: “Also rape by an intimate partner, we are seeing a lot more cases this year especially since March 2020” (GBV expert, Turkey Cross Border), as is also confirmed by other reports using similar qualitative methods: “Married women were also subject to domestic violence and marital rape”³⁰.

“Widows faced a lot of violence during the crisis because they consider them easy to get so they exploit them in return for food or other services. They could be exploited

30 ABAAD, Norwegian Church Aid 2019. Gender-Based Violence in Syria. Rapid Needs Assessment. December 2019. Available at <https://www.abaadmena.org/documents/ebook.1579886028.pdf>

by the landlord, or their family to force her to get married, or her employer" (Mixed gender group, Damascus sub-district, Damascus). Widows and divorced women were broadly considered to be particularly exposed to sexual violence as they are perceived to be sexually "available" due to lacking the protection of a husband or a male relative: "When they know I am a widow they quickly assume that I am easy to get and they would ask for my phone number and say that they would be there for me if I ever needed anything" (Adult woman, Damascus sub-district, Damascus).

Rape and other forms of sexual violence against men, boys and women in detention centres were also mentioned: "It is also possible for the armed authorities to practice violence because they have detainees and they are subjected to beatings, humiliation and exploitation in order to demand money from their parents. And if the detainees were women or boys, it is possible to exploit them sexually" (Adult men FGD). These reports are confirmed by recent publications which demonstrate how "sexual and GBV including rape or its threat, sexual harassment, electrical shocks to the genitals, as well as forced nudity and forced abortion [...] in Syrian detention facilities were and continue to be part of a widespread and systematic attack against the civilian population"³¹.

Interestingly, multiple respondents spoke of the differential impact of these kinds of violence between men and women once they are released and reintegrated within their communities: "For sure everyone will empathise with [a former male detainee] and offer him help but for women and girls, after being detained they would be subjected to violence and to be outcast by their family and society because they all would not believe that these women or girls were not raped. They will be followed by shame everywhere they go and they might even be murdered by the brother or father under the pretext of crimes of honour. Sadly, women and girls have no rights in this society" (Adult woman, Qourqeena sub-district, Idlib). While both men and women are subject to extreme violence within the context of detention and are likely to live with its long-term impact on their physical and mental health, discriminatory social norms against women and girls risk dramatically adding to the trauma and threatening her life once she is released: "Some families kill the girl as they fear the shame and scandal she might cause" (Adult woman, Kisreh sub-district, Deir-ez-Zor).

Sexual exploitation and abuse

"Let's also not forget the exploitation that takes place at the distribution centres, which leads to violence. I heard a story about a divorced woman who was called upon to collect a relief package from the distribution centre but they asked her to pay for the package by doing unethical things and

she refused" (Adolescent girl, Afrin sub-district, Aleppo).

Women, girls, boys and men confirmed previous years' reports of sexual exploitation and abuse (SEA) of women and girls within the context of humanitarian distributions or other forms of assistance: "Yes, there is free aid from humanitarian organisations, but in small amounts, and we do not get it because we have heard that [men in positions of authority] and those in charge of distribution are exploiting people. For example, they say we will give you this on condition that you give us half of what is in the box, or I want something from you in exchange for giving you an extra carton, like a romantic relationship. And during the distributions we are always afraid of exposure to unwanted physical touch (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh). Distributions and aid were often discussed during focus groups and perceived as unfair, influenced by favouritism and personal relationships, or as a site of financial and sexual exploitation: "Yes there are many humanitarian aid services, but there are some obstacles in reaching some of this aid due to favouritism and discrimination that is practiced by some people. Widowed women, divorced, and women in general may be exposed to exploitation in order for them to receive humanitarian aid" (Adult man, Qourqeena sub-district, Idlib). MSNA data revealed significant geographical variations in how humanitarian aid was perceived, and specifically in how common demands for money in exchange for aid or physical, verbal and sexual harassment during distributions were perceived to be (see the Governorate Analysis section for more details). GBV service providers also varied in their assessment of current trends related to SEA, with some noting an increase in the phenomenon since last year: "We are seeing more cases of SEA by humanitarian actors including those in senior positions inside Syria and also between colleagues (incidents of sexual harassment and exploitation)" (GBV expert, Turkey Cross Border).

Such geographical variations also applied to questions regarding the request of favours, including sexual favours, in exchange for humanitarian assistance - a commonly used euphemism for SEA. Change the sentence to: Across Syria, out of the communities that identified concerns about humanitarian assistance in the last three months, 16% reported being asked for favours as an issue, and 15% indicated the same for women and 11% for adolescent girls. A June 2020 study by the WoS Inter-Agency PSEA Network and the Humanitarian Needs Assessment Programme (HNAP) estimated that an average of 3% of Syrian households who received humanitarian assistance were asked for favours, including sexual favours, in exchange for aid, though rates varied from less than 1% in northwest Syria to 8% in northeast Syria. These rates should nonetheless be considered an underestimation of the problem, as significant barriers to safely reporting of SEA and other forms of exploitation remain in place³². Women and girls, and in particular widows, divorced

31 European Centre for Constitutional and Human Rights (2020). Germany Must Investigate Sexual and Gender-Based Violence In Syria For What It Is: A Crime Against Humanity (Press Release). 18 June 2020. Available at: <https://www.ecchr.eu/en/press-release/germany-must-investigate-sexual-and-gender-based-violence-in-syria-for-what-it-is-a-crime-against-humanity/>

32 Humanitarian Needs Assessment Programme (HNAP) and Whole of Syria Inter-agency PSEA Network (2020). SEA & Humanitarian Assistance. Household Perceptions of Favours in Exchange for Aid. HNAP Household Survey (June 2020)

women and adolescent girls, bear the brunt of exploitation by humanitarian workers, local authorities and other actors involved in aid distributions: *"It is more difficult if girls, widows, or divorced women go to obtain this aid, as sometimes a sexual exchange is offered for the aid"* (Adult woman, Kisreh sub-district, Deir-ez-Zor). The PSEA Network and H NAP study confirmed that "female-headed households were almost five times more likely to be asked for physical or emotional relationships in exchange for assistance compared to male-headed households. Specifically, 38 percent of female-headed households reported requests for physical or emotional relationships compared to 8 percent of male-headed households"³³. GBV service providers also highlighted that: *"Widows or women heading households are facing more challenges accessing other humanitarian services due to fear of being exploited in exchange of assistance"* (GBV expert, Turkey Cross Border). Sadly, some of the responses to the question "Is humanitarian assistance provided for free?" showed that the levels of exploitation of women and girls in the context of receiving aid have been normalised within Syria *"It was kind of free, only fees of transportation, and in some cases sexual abuse by workers of the distributions"* (Adult woman, Basira sub-district, Deir-ez-Zor).

GBV experts consistently highlighted the increased efforts amongst humanitarian actors to instil a culture of 'zero tolerance' towards SEA within their teams and their partners across the Syria Response, focusing in particular on staff trainings, increased awareness, GBV risk mitigation initiatives in critical sectors, and the strengthening of reporting mechanisms: *"There is a lot more focus on reporting procedures, PSEA and there is more commitment at the level of humanitarian workers which has led to less exploitation during distributions of material assistance"* (GBV expert, Turkey Cross Border). The H NAP report also highlighted PSEA Network activities which had a perceived positive impact on rates of SEA reporting: *"the incorporation of PSEA awareness raising into protection sessions for women and girls in camps [has] been pivotal [and] directly resulted in several new reports of SEA incidents"*³⁴. Some GBV service providers indicated an increase in reports of SEA during 2020, a trend which could signal improved access to reporting mechanisms and GBV services: *"We have received a number of SEA cases this year involving humanitarian workers which is something we didn't have last year. This is particularly relevant to distributions of material assistance"* (GBV expert, Turkey Cross Border). While requests for various kinds of favours varied across regions, the H NAP report mentions that at the national level, requests for physical or emotional relationships and favours were most frequently made by local authorities (59%), private vendors (38%), community leaders (25%), and members of UN agencies and international NGOs (13%)³⁵. Women, girls, boys and men in community focus groups used a variety of terms when referring to perpetrators of SEA, including: *"workers of the distribution", "local councils", "camp administration", "those who assist with distribution*

but are not members of the organisation", "aid provider", "service provider", "associations", while GBV experts also referred to "camp managers", "humanitarian workers" and "humanitarian actors".

Intimate partner violence

"As for detention, the participants presented another different picture of it, such as some women who are kept in the house by their husbands and prevented from engaging in any outside activity that turns that house into a prison, and vivid and realistic examples of that have been cited" (Facilitator of adult women FGD, Al-Hasakeh sub-district, Al-Hasakeh)

Violence by an intimate partner, commonly the husband, was consistently reported as one of the most widespread forms of violence experienced by adult women and adolescent girls. When asked about the places where violence takes place, "home" was the second most cited location (following schools) by all participants: *"The place where violence mostly takes place is at home"* (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa). Physical, psychological and economic violence by intimate partners were widely referred to, often at the same time, effectively portraying the use of multiple forms of violence within an overarching pattern of domestic abuse: *"My husband doesn't allow me to go out or use a mobile although he is a schoolteacher. Because of many stories he hears outside, he controls me and my daughter and beats us in addition to deprivation of our rights. My husband wants to take my share of inheritance"* (Adult woman, Azaz sub-district, Aleppo). A clear linkage between violence against women and violence against children in the same household also emerges, with a situation where a husband mistreats his children as a form of violence against their mother: *"The husband uses the kids as a way to scare and pressure the wife, and that is a type of violence. The husband deprives the woman of an allowance, and deprives the children of their education"* (Adult woman, Homs sub-district, Homs).

Adolescent girls who are married were highlighted as a group at high risk of experiencing violence within their marriage: *"Early marriage leads to beatings and divorce, and if the man comes from work and the woman does not bring him food, or takes care of the children, he divorces her"* (Adolescent boy, Idleb sub-district, Idleb). Furthermore, polygamous marriages were indicated as presenting an increased risk of violence: *"polygamy, and this violence is specific to women, where men get married a second or third time, knowing that living conditions are very difficult. So, the man leaves the first wife to depend on farming and rearing animals to meet the needs of her children. Polygamy is often accompanied with physical violence, abuse, and emotional and psychological abuse"* (Adult woman, Kisreh sub-district, Deir-ez-Zor).

Women who are widowed or divorced face extreme challenges if they wish to get married again, which prevents them from regaining the social standing associated with being a married woman and locks them into a situation of intersecting marginalisation and social exclusion: *"If a divorced woman wants to get married again, she will only marry an old man"* (Adolescent girl, Azaz sub-district, Aleppo).

33 Idem, p. 9

34 Idem, p. 11

35 Idem, p.10

Women and girls associated IPV primarily with patriarchal gender norms: *"They still think that it is normal that Pharaoh (the man) can use his hand to hit and mistreat anyone in the house, whether it was his sister or wife or his daughter. Violence against women and girls is common"* (Adolescent girl, Al-Bab sub-district, Aleppo). Although some adolescent girls were hopeful that new generations would challenge the acceptance of this kind of violence: *"Some segments of society find that violence is a normal matter, especially the previous generation in dealing with domestic violence and violence by the husband, but this generation has become more aware and has an enlightened view of violence"* (Adolescent girl, Kisreh sub-district, Deir-ez-Zor). Men and boys, however, voiced a range of persisting social norms that condoned, or even supported, the use of violence against women within the home: *"The man is at his work and when he comes and finds that his wife did not make him food because she is still with her neighbour, it makes the man beat his wife"* (Adolescent boy, Idleb sub-district, Idleb).

Respondents also highlighted a number of contributing factors that, in their experience, have exacerbated IPV, especially as they compound each other 10 years into the war. Displacement, severe economic deterioration and the ongoing conflict were all linked to increased levels of violence within the home: *"The spread of poverty and war and displacement have made things much worse, and they became more subjected to violence by the husband or the father"* (Adult woman, Qourqeena sub-district, Idleb). Critically, as already highlighted, the impact of COVID-19 restrictions on women and girls was primarily linked to an increase in IPV by women, girls, men, boys and GBV experts alike: *"In COVID, we have seen more cases of IPV. Our female staff have been exposed to such abuses as they were forced to work from home. The abuse started with emotional abuse and mounted into physical violence and marital rape"* (GBV expert, Turkey Cross Border).

Confinement of men within their homes was cited by many as the main trigger for this worrying trend: *"Violence has increased during COVID-19, because the husband is staying home and he would take out his boredom or frustration on the wife and kids"* (Young woman, Hama sub-district, Hama). This perspective was shared by men themselves: *"Men used to go out and work, all day long, there was no violence, they only returned home at bedtime. Now, they are staying at home all day long, their whole life routine has changed, and this is why violence occurs"* (Adult men FGD, Ar-Raqqa sub-district, Ar-Raqqa).

The impact of lockdowns on availability of work and, consequently, on family's income was also closely associated by several respondents with increased tensions within the home: *"In general, yes, I noticed an increase in violence during quarantine. Even in my house due to the economic situation and the difficulty of making money and the lack of work. That period had a very bad effect on us"* (Young woman, Lattakia, Lattakia).

Early marriage

"Childhood dies in the eyes of our daughters, we make them grow up directly, marry them, and make them carry burdens much heavier than they're able" (Adult woman,

Basira sub-district, Deir-ez-Zor).

Early marriage was widely discussed by the participants, and especially girls, as a prevalent form of violence against young and adolescent girls in their communities: *"Early marriage which became very common, young men get married at a very young age, and girls get married at the age of 12"* (Adolescent girl, Azaz sub-district, Aleppo). Respondents mostly seemed to condemn, rather than justify, this practice and primarily blamed parents, and fathers in particular, for forcing adolescent girls to get married: *"It is the parents' fault because they let their daughters get married at a young age...Oh, how can a child have her own house and start a family!"* (Adolescent girl, Afrin sub-district, Aleppo).

In contrast with other analyses of early marriage in the region³⁶, the agency of adolescent girls in deciding to get married, for example to relieve pressure on their family of origin, was almost completely absent from this analysis. When women and girls spoke of adolescent girls "wanting" to get married, they effectively pointed to marriage as a coping strategy to escape violence from their parents or siblings at home: *"Some girls got married at an early age just to run away from the house they are living in with their parents"* (Adolescent girl, Homs sub-district, Homs).

Adolescent girls were repeatedly described, within the context of discussing early marriage and its drivers, as a burden: *"Cases of early marriage had increased - a father would force his daughter to get married so that he gets rid of her burden"* (Adult woman, Homs sub-district, Homs). This perceived burden could be interpreted in economic terms: *"In the overcrowded shelters, the rate of interpersonal violence increased, and parents' were motivated to marry girls in order to get rid of the expense,"* (Adolescent girl, Kisreh sub-district, Deir-ez-Zor), or as the potential risk of family dishonour: *"They prevent her from completing school and forced her to get married because of the war and they do not trust her"* (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa).

Many respondents drew a direct connection between the lack of educational opportunities, early marriage and the active denial of education for girls (see section below on Denial of Education). Within the context of prolonged school closures due to COVID-19, the risk of early marriage has therefore increased: *"As for women and girls in time of COVID and the economic deterioration, more girls have become deprived of educational opportunities, which is leading to early marriage"* (GBV expert, Turkey Cross Border).

Overall, group discussions suggested a good level of exposure to awareness activities and targeted messages disseminated through humanitarian actors with the intent to prevent early marriage and encourage education of adolescent girls. Adolescent girls, in particular, appeared to have internalised some common key messages around the consequences of early marriage: *"A girl's body under 18 is weak and is not capable*

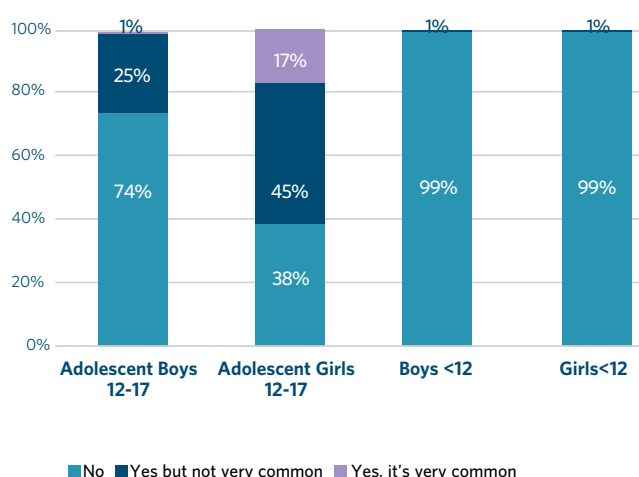
36 For example, World Vision 2020. Stolen Future: War and Child Marriage in Northwest Syria. Available at: <https://www.wvi.org/publications/report/syria-crisis-response/stolen-future-war-and-child-marriage-northwest-syria>

of pregnancy and childbirth and if she bled while giving birth she might die or the baby might die" (Adolescent girl, As-Sweida sub-district, As-Sweida). Many spoke directly of their involvement in early marriage prevention and awareness raising activities, as well as their perceived impact: "The participation of some girls in psychological support activities and similar activities and attending awareness raising sessions made the girls aware of their rights, especially early marriage initiatives, and made them aware of its dangers and psychological and physical effects" (Adolescent girl, Kisreh sub-district, Deir-ez-Zor). The perception of adolescent girls regarding early marriage prevention efforts was broadly positive: "There is a slight positive change in terms of school drop-out and early marriage for boys and girls, as school drop-outs have become less prevalent because of the existence of support for schools from organisations before the COVID-19 pandemic and early marriage rates have decreased due to community awareness sessions" (Adolescent girl, Harim sub-district, Idlib). However, both respondents and GBV experts expressed concern that early marriage trends do not appear to be reversing: "Early marriage as well, which had increased during COVID-19" (Adolescent girl, Homs, Homs). 62% of communities who participated in the 2020 MSNA exercise confirmed that cases of early marriage affected adolescent girls between the ages of 12 and 17, with 17% of communities indicating this phenomenon is very common. By contrast, early marriage was considered to commonly affect boys in the same age group by only 2% of communities who took part in the MSNA.

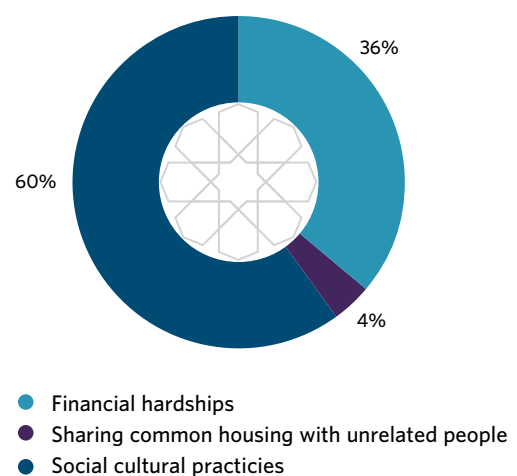
Very concerning reports have been shared by GBV service providers in northwest Syria of parents forcing pre-pubescent girls to take hormones to induce puberty and thus anticipate their marriage: "The emergency in northwest Syria has resulted in new types of GBV such as forcing girls to take hormones to speed up puberty. This is especially present in camps. I have personally dealt with many of these cases" (GBV expert, Turkey Cross Border). Midwives and other health service providers are being approached by mothers of young adolescents in health facilities, as reported by a gynaecologist interviewed by the Turkey Cross Border GBV Sub-Cluster: "I worked with three cases of mothers that are frequenting the health facility to ask for medications that would speed up puberty of their 12-year-old daughters."³⁷ While World Vision found that, amongst adult women and men, it is increasingly common to believe that puberty is the appropriate age for marriage, respondents cited cases of girls as young as 10 years old being forced to marry, signalling a substantial shift in social norms surrounding early marriage during the conflict.³⁸

Adolescent girls are also at risk of being exploited by their caregivers to engage in a series of temporary marriages in order for her family to gather income from their multiple dowries. This practice points to the close implication of household-level economic drivers in the justification of early marriage, which might partially explain why this form of GBV continues regardless of widespread awareness about its damaging consequences on the lives of girls and young women.

Graph 1 - Early Marriage by Community



Graph 2 - Reasons for adolescent girls (12-17 years) to be married early



37 UNFPA and SRH 2020. Note about the consequences of the misuse of hormonal medication among little girls without direct medical supervision.

38 World Vision 2020. Stolen Future: War and Child Marriage in Northwest Syria. Available at: <https://www.wvi.org/publications/report/syria-crisis-response/stolen-future-war-and-child-marriage-northwest-syria>

Figure 3 - Early Marriage



Denial of education

Adolescent girls were especially likely to highlight denial of education as a widespread form of GBV affecting them: *"All girls are deprived of their right to an education" (Adolescent girl, Damascus sub-district, Damascus).* GBV experts also confirmed that deprivation of education is one of the primary reasons for adolescent girls to seek the support of specialised services: *"The majority of cases we are recording are about the denial of resources and restriction of education [...] for adolescent girls, emotional abuse, domestic violence and early marriage" (GBV expert, WoS).*

As already mentioned above, the denial of education was closely linked with early marriage by a number of respondents: *"They also have the habit of forcing early marriage. If a girl reaches the age of 14 or 15, they tell her that she has become a young woman, and so she is not allowed to study or to mix with society. They may get beaten by a short-tempered father or brother if they want to go out or see their friends" (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa).* Other factors contributing to adolescent girls being taken out of school included child labour, displacement and parents' fears of sexual harassment in or on the way to school: *"The parents deprived the girl of an education before displacement to make them work in agriculture and household work, and then after displacement for fear of harassment, and this has a bad psychological impact, especially in the period of adolescence. And if the girl objected, she would be beaten by the father or the brother, since there is no equality, or they marry her by force" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).*

Children with disabilities were also considered at higher risk of being denied education and other life opportunities: *"People with disabilities do not receive their full rights and this is a type of violence too. They are more likely to be exposed to violence, deprivation of education and exploitation" (Adult woman, Idleb sub-district, Idleb).*

Psychological and emotional violence

"Psychological violence is bullying and it is the worst kind of violence, but no one talks about it." (Adult woman, Ar-Raqqa sub-district, Ar-Raqqa)

Emotional and psychological violence was repeatedly mentioned in discussions with women, girls, boys and men, demonstrating the widespread nature of this form of GBV and its significant and durable impact: *"Girls are exposed to verbal, psychological and physical violence, and they feel less safe than previous years, and this includes girls, women, and people with disabilities, who are exposed to verbal and psychological violence that causes them to be isolated" (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh).*

Verbal, emotional and physical violence can take place in almost every setting that women and girls encounter in their daily life, from home: *"At home, my father commits psychological violence against us," (Adolescent girl, Damascus sub-district, Damascus);* to school: *"We*

have verbal violence at home and school by the teacher, and it has an effect on students as they lose their confidence in themselves, and we don't know where to go and there is no authority to turn to," (Adolescent boy, Ar-Raqqa sub-district, Ar-Raqqa); to workplaces: *"In addition to marginalisation of women in society due to the inferiority complex of men... when I was working in the organisation, men tried to break me and marginalise me" (Adult woman, Azaz sub-district, Aleppo).*

Verbal harassment and abuse were also commonly mentioned as happening in public places: *"Verbal violence, insults and curses, and sadly there are many people (girls and women) who are subjected to this kind of violence and sometimes in the street," (Young woman, Lattakia sub-district, Lattakia),* as well as within the context of detention: *"Beating, abuse and physical and psychological violence and insults and verbal abuse" (Adult woman, Basira sub-district, Deir-ez-Zor).* Verbal abuse is also sometimes used as a strategy to entrench gender norms and punish women who do not conform to them: *"[I experienced] harassments because I wasn't wearing a Burqa (Niqab)" (Adult woman, Azaz sub-district, Aleppo).*

Women and girls facing multiple forms of discrimination in Syrian society were particularly likely to describe experiencing this form of GBV on a regular basis. Women and girls who are displaced, for example, face abuse due to their 'outsider' status in the community where they are currently living: *"Being displaced, we face verbal abuse by the residents. They say that we are the reason behind the price rises and that we're taking work opportunities from them" (Adult woman, Harim sub-district, Idleb).* Women living in displaced camps also complained of *"continuous psychological abuse by men against women" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).*

Single women, widows and divorced women and girls were particularly likely to be singled out for emotional abuse both within their family and in the broader community: *"Verbal violence because I am a woman and on my own. The society does not show me mercy" (Adult woman, Babella sub-district, Rural Damascus).* As with other forms of GBV, verbal and emotional abuse are often part of a broader pattern of violence: *"Our neighbours complain a lot about their lives, about receiving verbal abuse [because of] being widows, and they didn't allow anyone to underestimate them, so people started to put pressure on them and deprived them of food aid" (Adult woman, Al-Bab sub-district, Aleppo).* The impact of verbal and emotional abuse on women and girls' lives can be substantial: *"Widows and divorced women are the most exposed to verbal and physical violence, in addition to the scorn of society towards them, and being divorced herself she faces all types of abuse" (Facilitator of adult women FGD, Harim sub-district, Aleppo).*

Women and girls with a disability were especially likely to be targets of verbal violence in the streets, schools and, in some cases, at home: *"There are many kinds of violence, but I am subjected to psychological violence, mockery, bullying and insults. And the way people look at us in the street is very ugly" (Young woman with a*

disability, Damascus sub-district, Damascus). Widespread discrimination against people with disability is exemplified in this quote: *"There are still families that feel that the disabled child is a disgrace and they do not even register him/her in the family book"* (Adult woman, Afrin sub-district, Aleppo). This combines with gender inequality to enable and justify ongoing GBV against women and girls with a disability: *"I swear that [women and girls with a disability] are the most vulnerable group subjected to violence, they are neglected and exploited and attacked"* (Adult woman, Afrin sub-district, Aleppo). Similarly, older women are often the subject of verbal abuse which remarks on their lack of productive (or reproductive) contribution to the household: *"Of course the people with a disability and the elderly are greatly exposed to violence, because society is always looking at them with inferiority. [They say:] 'You cannot benefit us, and you are a burden on us'. In many homes, older people always hear 'if you die you will make our life easier'"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Interestingly, it was only during discussions of various forms of emotional and psychological abuse that other forms of discrimination emerged which affect women and girls in Syria and justify abuse against them. For example, body-shaming comments were mentioned as a form of verbal abuse by a participant: *"My friends keep bullying me because I am overweight and they call me 'chubby'. [It is] verbal violence. Sometimes I start crying when they say nasty things to me"* (Young woman, Damascus sub-district, Damascus). Discrimination towards women and girls with a darker skin colour was also revealed: *"People with black skin sometimes are exposed to violence, for example: 'You are black, who will marry you? White skin girls are more beautiful'"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh), and *"Violence is there for all groups. We have a lot of discrimination based on skin colour. A girl with lighter skin is considered more beautiful than a girl with darker skin, and they are very harsh with their words"* (Adolescent girl, Babella sub-district, Rural Damascus). In camps that host displaced populations of different nationalities, racism was called out as a contributing factor to violence: *"The risks of violence have increased compared to last year, and the violence is due to the lack of awareness, the increase in numbers, and the difference in race"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

As with almost all other forms of GBV, the impact of COVID-19 on psychological and emotional violence seemed negative, especially for abuse by intimate partners and caregivers: *"Psychological violence had increased during COVID-19 because people were staying at home"* (Adolescent girl, Homs sub-district, Homs). Reports to GBV service providers confirmed this trend: *"Increase yes, due to pandemic, especially in psychosocial abuse from March onwards"* (GBV expert, WoS).

Restrictions of movement and freedom

Patriarchal norms in Syria continue to dramatically affect the rights of women and girls and limit their freedoms, appearing sometimes to have been exacerbated by the last ten years of conflict: *"Depriving*

a woman from expressing her opinion, depriving her of her rights, and not allowing her to go outside the house alone if she even wants to go to the market or to a medical centre that is forbidden on her own, because of a lack of awareness and ignorance" (Adult woman, Al-Bab sub-district, Aleppo). Women, adolescent girls and boys easily identified these restrictions as forms of GBV when asked about the kinds of violence faced by women and girls: *"Psychological violence and social pressure from adults when they impose their opinions on the children: 'You should cover your head'"* (Adolescent girl, Afrin sub-district, Aleppo); and *"some women face beating, insults and all types of verbal abuse, and in some cases, she is forbidden from visiting family and relatives"* (Adolescent boy, Maaret Tamsrin sub-district, Idleb).

The most common restrictions imposed on women and girls appeared to be closely controlling, or outright denying, all movements outside the home: *"Women must stay at home all day long, to please her family"* (Adult woman, Al-Bab sub-district, Aleppo). These restrictions have a clear impact on women's right to work and access education, both in rural and urban areas: *"There are a lot of restrictions even when it comes to education, work and going out of the house"* (Adolescent girl, Damascus sub-district, Damascus). Adolescent girls were particularly vocal about the limitations imposed by their caregivers on their movements, and their impact on their wellbeing: *"They don't let her go out and suffocate her spirit"* (Adolescent girl, Idleb sub-district, Idleb). This form of GBV was clearly identified as stemming from gender discrimination: *"If a girl wants to do something, they tell her that she is not a boy and that she should stay home"* (Adult woman, Babella sub-district, Rural Damascus). Some adolescent girls highlighted that a supportive family could mitigate some of the more damaging consequences of confinement at home, for instance by enabling education to take place within the home, but this support was still understood to be articulated within restrictive gender norms: *"My aunt was a high school student, her husband died and she had to stay at home to accomplish her religious mourning period, but with help of her family she got a teacher at home and she continued studying and fulfilled her dream"* (Adolescent girl, Azaz sub-district, Aleppo).

Importantly, while caregivers often used the excuse of protecting adolescent girls from sexual violence and kidnapping as a justification for restricting their movements, adolescent girls were able to point to their homes as the location where they were most likely to face GBV: *"For girls they can't reduce violence because their parents don't let them get out of the house and the parents are the source of violence"* (Adolescent girl, Afrin sub-district, Aleppo). On the contrary, physical violence is likely to be used against adolescent girls to enforce limitations of movement: *"The girls that are most subjected to violence in our society are girls between the ages of 12 and 18, especially in some families. When the family notices that the girls are going out, the parents beat them to stop them from going out"* (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa). World Vision, in their gender analysis of northwest Syria, also found that "both male and female groups of all ages say they are

afraid of kidnapping and abductions – however, it was highlighted that this fear is used as a primary reason given by men to restrict the movement of women and girls. While that may be part of the reason, it seems the primary driver is rooted in controlling women's and girls' movement, rather than safety".³⁹

MSNA protection data confirmed that restrictions of movement by family members, spouses or the community were more likely to impact adolescent girls (49% of communities) compared to adult women (28%), who in turn are much more likely to see their movement controlled compared to boys (24%) and adult men (6%). Movement restrictions are however not only imposed by male relatives or intimate partners. Communities, service providers and local authorities can also enforce gender norms and prevent women and girls from freely accessing services and moving without a male guardian: *"All women are also requested to have male companions at checkpoints and cannot move around easily; this is especially difficult for female staff who have to travel around"* (GBV expert, Turkey Cross Border).

Particularly severe patriarchal norms are imposed on women and girls who are widowed or divorced: *"A widow is forbidden to go outside the house or to visit people. This is a shame. This is our education. It is forbidden for a woman to go out to work"* (Adult woman, Al-Bab sub-district, Aleppo). These restrictions not only deny them freedom to socialise, access services or access education, but also prevent them from engaging in paid work and thus independently supporting themselves and their children: *"Even if the opportunity [to work] was provided, they are not able to live separately from their families, this is not acceptable in our village nor in our tribe"* (Adult woman, Basira sub-district, Deir-ez-Zor).

In addition to restrictions of movement, denial of access to education and work, women and girls in Syria are often forced to adhere to strict dress codes by their male relatives: *"People here prevent [girls] from wearing revealing clothes and oblige them to dress in a specific manner, and they consider girls' education a shame for girls, or they fear sexual abuse or other problems"* (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh). Again, the fear of sexual abuse was referenced as a justification for the imposition of these requirements. Adolescent girls were, once again, more likely to complain about the imposition of specific dress codes as denial of their rights and freedom, which could potentially signal a shift in social norms amongst the younger generation: *"Parents force their daughters to change their clothes"* (girl, Ar-Raqqa, Ar-Raqqa).

Women and girls living in areas controlled by Islamist groups are subject to additional limitations of their rights and face more severe restrictions in terms of dress code, education and work: *"In the province of Idlib [...], women are living a life of restrictions that extend to the minutest details of their daily lives, including choice of*

clothes and work opportunities, traveling and studying, which are all added to preventing men and women from getting together."⁴⁰

Figure 4 - Movement Restrictions



Family violence against women and girls

Adolescent girls sadly stood out, once again, as the target of emotional, physical and economic violence by both their parents and their brothers: *"Yes it has increased [during COVID-19] through violent practices by fathers and brothers"* (Adolescent girl, Basira sub-district, Deir-ez-Zor). Physical violence by brothers, linked to violent understandings of masculinity and the desire to assert control over female relatives, was particularly common across regions: *"Most girls are exposed to violence by the brother, because of ignorance and immaturity, as he considers it a sign of manhood and strong character"* (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh).

Within the context of divorce or widowhood, adolescent girls are seen as an added burden in a new marriage and are frequently subjected to discrimination from the stepmother or stepfather: *"The father leaves the mother or divorces her and marries a second wife and deprives the children and makes them work beyond their capacity and the daughters suffer a lot, the stepmother considers them her servants"* (Adolescent girl, Idlib sub-district, Idlib).

Girls affected by discrimination based on their gender, age and disability were equally, if not more, likely to be subjected to family violence: *"People with disabilities are subjected to violence by parents as they discriminate between them and their siblings and feel ashamed of them. We have a girl with a disability in the family who can't defend herself when beaten by her brother"* (Adolescent girl, Azaz sub-district, Aleppo).

³⁹ World Vision 2020. Northwest Syria Gender Analysis. A Comprehensive Gender and Age Analysis for the Northwest Syria Humanitarian Response. Available at: https://reliefweb.int/sites/reliefweb.int/files/resources/book%20world%20vision%20%20logo%20print_compressed.pdf

⁴⁰ Syrians for Truth and Justice 2020. HTS Did Not Spare Women Detention or Physical Abuse. Available at: <https://stj-sy.org/en/hts-did-not-spare-women-detention-or-physical-abuse/>

Violence and neglect against older women by younger members of their family, and in particular their sons, was also reported as a general concern: *“For older persons: neglect and inability to access resources”* (Adolescent boy, Harim sub-district, Idleb), sometimes with dramatic consequences: *“I heard a story about someone who was always shouting at his mother who was of old age, and they were always loud. In the end, the only solution he could come up with was to kick her out of the house and so she ended up sleeping in the street, with no one to shelter her”* (Adolescent girl, Afrin sub-district, Aleppo).

Violence against widows and divorced women by family members was also discussed widely, with several participants sharing their personal experience of emotional abuse and denial of their rights: *“My husband died [...]. My husband’s family deprived me of my house and took it from me and threatened to take my daughter from me. This is excessive violence on me and on my daughter. In addition to beatings and insults from my daughter’s uncle. I also used to work in the fields. They did not give me any compensation. I took the role of father and mother to my daughter and raised her. As I said, violence is everywhere and it has increased in the last years under the pretext that they do not have money or that the brother doesn’t want me to live with him, so they forced me to find a job. Currently COVID-19 has affected our children a lot. My daughter doesn’t go to school any longer”* (Adult woman, Al-Bab sub-district, Aleppo).

Widows are commonly denied their right of inheritance and divorced women and girls are often rejected from their family of origin, struggling to find adequate shelter for themselves and their children: *“It is very difficult for widows and divorced women to find shelter for them, especially because of their difficult life circumstances, as one of the participants was a widow with children, but she was deprived of her children’s right to inherit the house”* (Adult women FGD, Kisreh sub-district, Deir-ez-Zor). The specific stigma associated with divorce leads to the exclusion of divorced women and girls from both family and society and exposes them to continuous emotional abuse: *“My husband divorced me and deprived me of my children. After tolerating beatings, insults and divorce I faced the scorn of my community and verbal abuse from my family. One of my family members says ‘I wish you had died rather than return to us divorced’”* (Adult woman, Al-Bab sub-district, Aleppo).

Widows’ and divorcees’ loss of inheritance, shelter, and family support has been a common phenomenon that resulted in the establishment of so-called “widows camps” in some areas, effectively segregating divorced and widowed girls and women and pushing them into further vulnerability: *“The majority of widows have a special camp [...] and these residences deprive them of the right to integrate into society because they are kept inside with a tight curfew. Many mothers are denied access to their children over the age of 15, which affects the psychological state of widows and divorced women”* (Adolescent boy, Harim sub-district, Idleb)⁴¹.

Other forms of violence affecting women and girls

To complete the picture of violence affecting women and girls in Syria in 2020, it is worth mentioning other forms of violence which emerged from conversations with women, girls, boys and men, while not appearing as common or as openly discussed.

As previously mentioned, fear of **kidnapping** remained high, especially in certain locations (see *Governorate Analysis below for more details*). MSNA protection data showed that kidnappings and abductions are perceived to affect adult men more than other demographic groups. During focus groups, the kidnapping of both adolescent girls and children more broadly was however discussed often and associated with sexual violence: *“There was a girl who went down from her house to turn on the electricity switch in the daytime and a car passed by and kidnapped her. She disappeared for two days, and when she came back, she was raped”* (Adolescent girl, Afrin sub-district, Aleppo). **Trafficking and organ trading** were also mentioned a few times: *“It wasn’t so long ago when they published a photo of a kid with stitches on his body because they had taken his organs”* (Adolescent boy, Afrin sub-district, Aleppo).

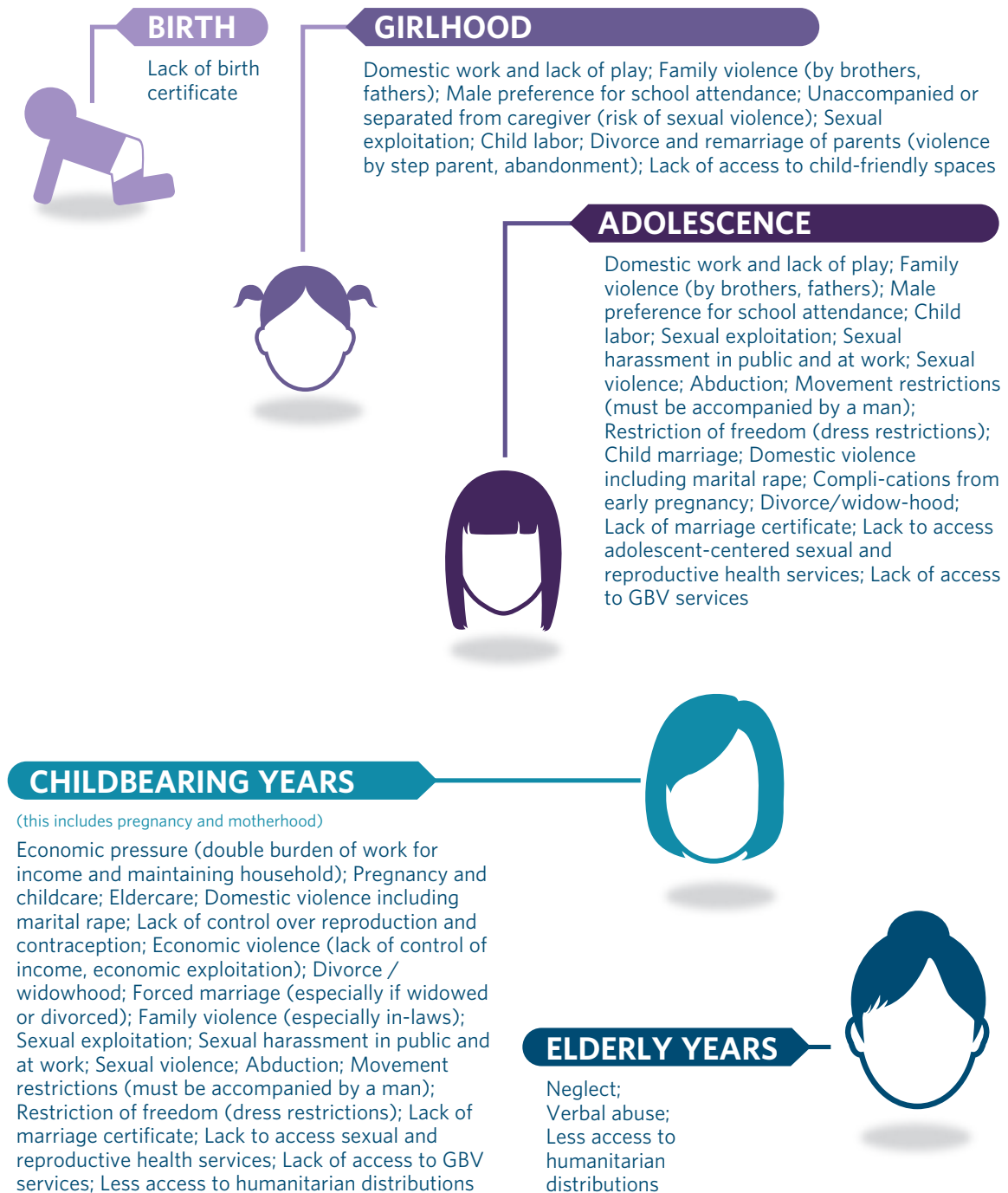
Violence against women and girls in detention, including physical and emotional abuse, rape and torture, was considered as common as violence against men by most respondents: *“All walks of life are subjected to abduction, physical, verbal and sexual violence, murder and torture even after they have been released from places of forced detention showing poor psychological and physical effects. For example, anxiety, fear, obsessive-compulsive disorder, physical pain and some chronic diseases”* (Adolescent girl, Harim sub-district, Idleb). Recent reports confirm the use of torture against women in detention facilities: *“[She] was subjected to various forms of torture, which did not really differ from the torture that is often practiced against detained men. She was dangled by her hands from the ceiling for two hours and blindfolded and handcuffed for continuous days, during which she refused to eat, causing her health to deteriorate”*⁴² It is worth noting that some respondents declined to discuss violence within the context of detention and appeared very uncomfortable when asked directly about the subject.

41 OCHA (2019). Guidance Note: Mitigating Protection Risks in IDP Sites Exclusive to Widowed and Divorced Women and Girls. February 28th,

2019. Available at: <https://reliefweb.int/report/syrian-arab-republic/guidance-note-mitigating-protection-risks-idp-sites-exclusive-widowed>

42 Syrians for Truth and Justice 2020. HTS Did Not Spare Women Detention or Physical Abuse. Available at: <https://stj-sy.org/en/hts-did-not-spare-women-detention-or-physical-abuse/>

Figure 5 - Life Cycle of Violence for Women and Girls



Locations of violence

"Violence has no specific place, it occurs in all places and times." (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh)

As in previous years, women and girls stressed that violence is pervasive in every space they encounter in their daily life and that there are no locations where they feel safe from violence. There were, however, a number of locations which stood out as presenting specific risks.

Schools were the most commonly cited location where violence might occur, inclusive of violence against adolescent girls and boys, children of all genders and violence happening on the way to school. Physical and emotional violence were the primary forms of violence mentioned in relation to school, with parents complaining about (and sometimes justifying) the widespread use of corporal punishment against their children: *"Oh please don't get me started on violence in schools. They don't know how to treat kids. It's as if we send our kids to school to get beaten up" (Adult woman, Afrin sub-district, Aleppo)*. Sexual harassment and sexual exploitation of students by teachers were also present: *"Violence also happens in school where some teachers deceive girls with love in return for sexual favours" (Adult woman, Deir-ez-Zor sub-district, Deir-ez-Zor)*.

Homes were also universally indicated as a space where abuse by intimate partners and other male relatives is rife, as already indicated previously: *"The home is the most common place for violence to occur and many people are exposed to violence in the home without anyone else knowing about them" (Adult woman, Kisreh sub-district, Deir-ez-Zor)*. Violence within the home appeared highly normalised by all participants, with many linking the almost universal prevalence of violence in homes to the deteriorating conditions caused by the conflict: *"There is no house empty of any type of violence, considering the nature of our society and the current difficult conditions of all life aspects: war, displacement, despair" (Adult woman, Basira sub-district, Deir-ez-Zor)*.

Public spaces, including markets, public transport and roads were widely acknowledged as areas where women and girls, including divorced women, widows and women and girls with a disability, could be exposed to sexual harassment, verbal abuse, kidnapping and rape. Risk of violence was linked both to the presence of crowds, such as in markets and buses, or to isolation: *"An empty location or a small street and guys take advantage of this and also in public parks and public transportation and wherever it is crowded there would be sexual harassment" (Adolescent girl, Damascus sub-district, Damascus)*.

Workplaces were also considered as key locations where violence, and in particular sexual and other forms of exploitation against women and girls, might take place: *"Violence also occurs at work, some girls may be exposed to sexual abuse and exploitation by the head of work because of living conditions" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh)*. Once again, women who were not, or no longer, married were singled out as being particularly at risk of violence within the workplace, as the perpetrator would not fear the reaction of a husband or other male relative: *"Sometimes there is violence and exploitation at work especially if the*

employer is a male. And a woman who works usually does not have a male to protect her" (Adult woman, Jebel Saman sub-district, Aleppo).

Camps and collective shelters for displaced people were linked to all forms of violence against women and girls, including rape, sexual exploitation and abuse, sexual harassment, IPV, forced puberty and early marriage. Various factors contributed to the identification of camps and collective shelters as particularly dangerous places for women and girls, such as overcrowding, lack of privacy and the living and economic conditions of their residents: *"Now, in general, places such as collective shelters, collective accommodation or camps, they are exposed to more violence because of the large numbers and mixing between different groups of society and various cultures. In addition, basic needs that people struggle to have are often in the hands of a certain group which may cause violence and exploitation, also fighting over the needs itself can generate violence, chaos and problems in these places" (Adult woman, Idleb sub-district, Idleb)*.

Within camps, many stressed the risk posed by inappropriate sanitation facilities: *"The camps are more vulnerable to violence and exploitation [...] as there is no electricity, while many tents must share the same bathroom, and due to the absence of doors and locks for these bathrooms, women may be exposed to harassment by men looking at them in bathrooms" (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh)*.

Places of detention were considered as locations where severe forms of abuse would take place: *"Places of detention, they are the worst places where violence occurs to men, women, girls and boys, where they are severely beaten, humiliated and sometimes raped" (Adult woman, Kisreh sub-district, Deir-ez-Zor)*. Sexual violence against adult men was exclusively discussed within the context of detention and has been documented extensively by other actors as well: *"While in detention men and boys reported enduring sexual violence in many forms including rape, gang rape, forced sterilisation, genital mutilation and being forced to witness the rape of others."*⁴³

Distribution and service points were mentioned in relation to sexual exploitation and abuse by service providers: *"It may also increase in the places of distribution as the service providers exploit those who receive the service" (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh)*, but also sexual assault and harassment by men from the community who take advantage of overcrowding and lack of controls: *"In cases of distribution of services: When the location is not designated for women or men [...] the risks increase" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh)*. Emotional and sexual violence was also reported at service points like health centres, orphanages and other centres that children, including children with a disability, might attend unaccompanied: *"Disclosure of sexual violence against males. This year we have seen more disclosure of such cases against adolescent boys and especially in orphanages" (GBV expert, Turkey Cross Border)*.

43 World Vision 2020. Northwest Syria Gender Analysis. A Comprehensive Gender and Age Analysis for the Northwest Syria Humanitarian Response. Available at: https://reliefweb.int/sites/reliefweb.int/files/resources/book%20world%20vision%20%20logo%20print_compressed.pdf

Online violence was not as widely discussed in 2020 as in the previous year, though this might be attributable to a methodological issue. Adolescent girls did indicate mobile phones as a conduit for sexual harassment: *"Harassment of girls never stops, even by phone" (Adolescent girl, Harim sub-district, Idleb)*. Parents and adolescents themselves also shared their concerns about the increased use of mobile phones and their potential links to violence: *"Children are subjected to different types of violence like online violence. We notice that children are being violent towards their peers because of the violent content they are exposed to via video games and movies, but also because of lockdown and remote learning. For example, children take mobile phones from their parents and watch sensitive content that stimulates violence" (Adult man, Idleb sub-district, Idleb)*.

Impact of GBV on Women and Girls

"Verbal violence can break hearts." (Adult woman, Azaz sub-district, Aleppo)

The various types of GBV that women and girls face have a tremendous and often lasting impact on their physical, mental, and social wellbeing. As girls and women discussed the immense psychological distress they deal with on a daily basis, they frequently displayed emotional discomfort when speaking; often showing signs of sadness or crying. Girls and women also placed their **psychological distress** in a wider frame of ongoing war and deteriorating economic conditions, which place further pressure on their wellbeing: *"We've been psychologically and physically devastated. Psychological damage takes a lot longer time to repair than financial deprivation. I lost everything in the war but I don't receive any support" (Adult woman, Ar-Raqqa sub-district, Ar-Raqqa)* and *"COVID-19 and war had increased psychological issues. People need psychological treatment [for] depression" (Adult woman, Homs sub-district, Homs)*.

Women and girls shared that they are concerned about the impact of IPV and family violence on their children: *"[IPV] has affected the psyche of women and children. It affects the entire home" (Young woman, Hama sub-district, Hama)*. Mothers expressed concerns about their inability to prevent the intergenerational transmission of violent practices from fathers to sons: *"Yes, there is a habit of violence. A father can be violent with his son simply because he believes that raising a son is his own responsibility and there is no way to raise him without violence, thereby beating him and imprisoning him, and there are many types of violence that fathers say are in the interest of the child. However, such violence has many negative and psychological effects on the child. The child becomes an aggressive person on the street with his friends and at school with his teachers" (Adult woman, Ar-Raqqa sub-district, Ar-Raqqa)*.

Some mothers also confirmed that the psychological

distress they themselves feel leads them to further practice violence against their children too: *"The psychological pressure I experience sometimes pushes me to beat my children in a way (oh dear God!)" (Adult woman, Ar-Raqqa sub-district, Ar-Raqqa)*. Importantly, women and girls also fear that their children would be taken away from them through divorce if they confront or address the IPV they are exposed to: *"There was one woman who complained about her husband because he was beating her. He divorced her, took the kids from her, and she lost her house and her children... Who dares to go off and complain, and ruin her own life with her own actions?" (Adolescent girl, Afrin sub-district, Aleppo)*.

In some cases, girls and women remarked that the consequence of GBV can lead to **heightened fear, despair, and even to suicide**: *"The fears that are behind the violence are: severe physical harm, such as burns and fractures. [GBV] may also cause severe psychological damage that might lead to suicide, or it might lead adolescents to bad behaviour" (Adult woman, Idleb sub-district, Idleb)*. Alarming, intolerable social pressure and the exposure to cycles of violence is also associated with suicide among adolescent girls specifically: *"Girls are forbidden from going out and have no money, and when they turn 16 their parents marry them. My daughter's friend committed suicide because of the pressure she lived under, another girl from the mosque students committed suicide by swallowing a sanitiser tablet after having a problem with her family because she returned home late" (Adult woman, Azaz sub-district, Aleppo)*.

GBV experts confirmed the alarming trend and its connection to coping with experiences of sexual violence and rape: *"This year we had a quite high number of suicide cases reported in northeast Syria" (GBV expert, WoS)*, and *"Another indicator [of increase in GBV] is the increase in suicidal attempts by adolescent girls particularly, in most instances linked to previous incidents of rape" (GBV expert, Turkey Cross Border)*.

Experiencing feelings of **shame, social stigma, or rejection** from the family are also frequent consequences of violence that girls and women discussed in relation to harmful social norms: *"She is prevented by the customs and traditions, it is shameful to file a complaint against her father or brother or husband, and in case of sexual abuse she can't speak [out for] fear of bringing shame to her family and herself" (Adult woman, Basira sub-district, Deir-ez-Zor)*. Fears of social stigma are acute when exposed to sexual violence in particular, wherein the woman or girl is blamed for surviving an incident and having brought shame to her family: *"One of the things that deprive women who have been exposed to sexual harassment or rape from accessing these services is the fear of gossip or scandal within the family. And here they are victims of another form of violence within the home when they are forced to remain silent and not to speak to avoid shame, which may drive them to commit suicide" (Adult man, Idleb sub-district, Idleb)*. In this sense, disclosure of an experience of GBV is held against girls and women and is used to perpetuate their subjugation. Furthermore, the fear of social rejection and further violence acts as a strong deterrent from seeking support after an incident of GBV or, more broadly, from claiming one's human

and legal rights: *“The woman who demands her rights gets hated and beaten and isolated from all social interaction” (Adult woman, Basira sub-district, Deir-ez-Zor).*

Forced and early marriage has one of the most disproportionate, long-lasting, and multi-layered impacts on adolescent girls in particular. Cases of **harm to girls’ physical health** due to induced puberty continued to emerge: *“Since the beginning [of] 2020 we are getting new types of disclosure, such as anal sex or forced puberty by taking hormones and some are also disclosing older cases from 2019” (GBV expert, WoS).* The consequences of marital rape, early pregnancy, and complications in birth also cause serious and long term damage to adolescent girls’ physical health: *“Even if the girl was already near the puberty time and she ovulates normally, and the pregnancy occurred; they have the highest number of complications, including: miscarriages, foetal abnormalities, preterm labour, anaemia, antepartum and postpartum haemorrhage, obstructed labour which leads to vesico-vaginal or rectal-vaginal fistula if not managed well, and high rate of caesarean sections compared to normal deliveries. [In addition], one of the high-risk factors of cervical cancer is the early intercourse and deliveries.”⁴⁴*

Furthermore, early marriage also leads to **loss of childhood, family violence and psychological distress** for many girls: *“So far we are seeing girls who are treated unfairly by their families and are getting married at an early age. Imagine the little girl becoming part of a new family of 20 people and taking responsibility for them, and on top of that she might get divorced too” (Adult woman, Afrin sub-district, Aleppo).* In a war context, early marriage can also lead an adolescent girl to become a young widow, which significantly increases other forms of GBV against her including forced serial marriage: *“I know a woman who got married at the age of 14 and at the age of 16 she was widowed with a child in her lap and on top of that they made her get married again to another person, but that is in addition to the fact that they do not provide food, drink and shelter for her” (Adult woman, Afrin sub-district, Aleppo).*

Likewise, early divorce also impacts girls and women socially and economically, increasing the risk of them experiencing other forms of GBV. Becoming divorced further subjects girls and women to social violence and stigma, and exposes them to **poverty** if they have children to support: *“A large segment of girls are subjected to forced marriage and are deprived of their right to choose their life partner, especially when they are of a young age and unable to bear responsibility and most girls being married are a second or third wife, so she soon returns to her family divorced and with children” (Adolescent girl, Kisreh sub-district, Deir-ez-Zor).*

Divorced and widowed women and girls were systemically mentioned as categories most impacted

by all forms of GBV. Due to losing a husband as the main provider to them and their children, the inability to find work due to economic deterioration, displacement, or fear of social stigma, and patriarchal norms denying them property inheritance; divorced and widowed women and girls also face a risk of **homelessness**. In some cases, women and girls tolerate violence in order to avoid losing their shelter: *“We are sorry [for them] because some women are alone without parents. She’s going to ignore [GBV] because she doesn’t have any other shelter” (Adult woman, Ar-Raqqa City sub-district, Ar-Raqqa).*

Coping Strategies

“When women are exposed to different types of violence, they try to reduce exposure to this violence and not to face it by finding a way to solve the issue that causes violence itself, in order to avoid it the next time. There are some women who confront this violence by communicating with certain people that help them to get rid of this violence or turning to wise people and taking their opinions. Women may also turn to other women in safe spaces and inform them of what happened, and they in turn shed light on the origin of the problem, or sometimes if the type of violence is very hard, such as severe beating, we can reach some centres that protect the rights of women” (Adult woman, Kisreh sub-district, Deir-ez-Zor).

Silence and shame

Girls and women discussed a plethora of coping mechanisms they practice when subjected to GBV. The most common response however remains non-disclosure of experiences of violence; especially IPV and sexual violence. Girls and women frequently feel pressured to stay silent when exposed to IPV as they fear the social repercussions of speaking about the men who abused them, including victim blaming and shaming: *“Most resort to silence because of the fear of shame or from society’s scorn; especially for women and girls” (Adult woman, Deir-ez-Zor sub-district, Deir-ez-Zor).* Their fear of shame is supported by pre-existing social norms and attitudes that normalise violence against women and punish its disclosure as it challenges women’s subordinate place in society:

“Women and girls who are beaten and abused do not speak and do not defend themselves because ancient customs and traditions say that the wife should not speak even if she died from beating. The woman who spoke and demanded her rights is considered uneducated, so women must remain silent, because it is her job to raise children and cook and take care of the home. Men and young men, on the contrary, can turn to the courts and obtain their right, or gather themselves in a group and take their right by beating and force, and there are those who resort to joining the armed forces to avoid exposure to violence and gain the power to defend themselves” (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh)

Some of the male participants echoed the same

44 UNFPA and SRH 2020. Note about the consequences of the misuse of hormonal medication among little girls without direct medical supervision.

reasoning in order to justify IPV practiced against women, arguing that women are subjected to such violence if they deviate from the gender role they are assigned: *"Men think that women force husbands to practice violence against them. Women fall short in their duties 90% of the time"* (Adult man, Al-Hasakeh sub-district, Al-Hasakeh). Therefore, another aspect of women's strategy of non-disclosure is adhering to gender roles in order to minimise GBV and prevent its escalation. As one male participant described: *"She resorts to patience, endurance and confidentiality"* (Adult man, Al-Bab sub-district, Aleppo). Meanwhile, adolescent girls discussed keeping up with housework as a coping mechanism to either avoid or deal with the GBV they experience within their homes: *"Girls get used to doing home chores, and learn to cook and clean the dishes"* (Adolescent girl, Al-Bab sub-district, Aleppo).

Speaking out about sexual harassment can also have negative consequences for women, so they choose non-disclosure in order to protect themselves from further forms of GBV: *"One more thing to mention about violence against women is the overwhelming fear of talking about this topic, which increases the problem"* (Adult woman, Idleb sub-district, Idleb). When not fearing further violence, women choose to remain silent in order not to worsen their economic situation or risk exposing their family to economic disparity: *"I know a case in which a female employee was harassed but she remained silent to keep her job. She is in charge of her family and can't afford to lose her job"* (Adult woman, Idleb sub-district, Idleb).

The same strategy of silence is practiced by adolescents who are dependent on adults for care and fear that disclosure could lead to more violence: *"We don't ask for help if subjected to violence because we fear more violence will be practiced by our care provider"* (Mixed gender adolescent group, Areesheh sub-district, Al-Hasakeh). While non-disclosure co-relates with increased psychological distress as discussed above, it also serves as a strategy that women and adolescent girls use to control the levels and types of violence they are exposed to and prevent their escalation.

Seeking GBV services

GBV services clearly emerge as a lifeline that girls and women appreciate having access to and seek when coping with GBV. Women and girls reiterated the impact that the presence of safe spaces, women's centres, and other protection services have on girls' and women's lives. Many sought these services in order to obtain psychological support when they could not disclose violence elsewhere or minimise its risk: *"I mostly stay quiet but I would be really annoyed at the same time, and I think that the centre here helps women who are subjected to violence through the sessions and psychological support"* (Young woman, Lattakia sub-district, Lattakia).

GBV experts also reported an increase in disclosure as a coping mechanism. WGSS are frequently the primary locations where women disclose GBV in person: *"Survivors are also becoming very active in developing their*

own safety planning. Disclosure of GBV cases in our spaces are now three-fold compared to previous years. Survivors are more confident in disclosing and attempting to access services" (GBV expert, Turkey Cross Border). Likewise, GBV experts also reported a higher frequency of hotline use during and after the lockdowns: *"Our hotlines and GBV centres were busy. Most of the survivors are female (over 80 percent) and most are above 18 years old"* (GBV expert, WoS).

While services' supportive role is acknowledged, girls and women also pointed to the fact that the source of violence does not subside regardless of what services they seek or the methods they choose to cope: *"They could tell someone at the centre to support them psychologically and make their lives better, but they cannot get rid of violence"* (Adolescent girl, Homs sub-district, Homs). Their words are a sobering reminder to the limits of disclosure as a coping strategy in a context in which violence against girls and women is practiced systemically, and where services which could provide safe and sustainable pathways out of violence, such as safe shelters, transition houses and legal services, are hardly available.

Raising awareness

Girls and women repeatedly mentioned their desire to raise awareness against GBV in order to decrease violence in their communities. Adolescent girls specifically found it empowering to try to raise their parents' awareness of the impact of family violence on them: *"as an adolescent girl I advise people who beat their children to stop doing that and explain effects of beating on their children"* (Adolescent girl, Azaz sub-district, Aleppo). They also imagined playing a supportive role to their peers specifically on issues that touch them the most, providing advice, and even mediating: *"In case of early marriage, I try to talk to the girl and convince her to refuse marriage, and I try to talk to the father"* (Adolescent girl, Azaz sub-district, Aleppo). The sentiment that raising awareness is a functional coping strategy was also shared by some adolescent boys: *"Awareness raising sessions have the biggest role in reducing violence"* (Adolescent boys, Al-Bab sub-district, Aleppo).

At the same time, girls also reflected on the limits of this coping mechanism and their limited abilities to change the reality of violence they are surrounded by: *"I could inform my friends about the risks of early marriage which we learnt here in the centre. But changing their parents' minds is something much bigger than us"* (Adolescent girl, Homs sub-district, Homs). Nevertheless, girls clearly displayed that raising awareness is not only a coping mechanism for the violence they face, but also an empowering tool through which they could actively change their communities: *"For children, we could provide protection and try to educate the parents. I went to Ghouta once and I started teaching them and helping them and I felt that I was delivering an important message"* (Adolescent girl, Damascus sub-district, Damascus).

Seeking legal services

"There are no compensatory legal procedures. Only god compensates us." (Adult woman, Qourqeena sub-district, Idlib)

Girls and women expressed their awareness of the existence of legal avenues to pursue their rights such as local councils, police stations, or religious figures which vary in availability across Syria. However, when and if present, women frequently remarked that resorting to such entities is futile, as they do not have women's best interests in mind and rarely lead to a desired outcome: *"They used to turn to religious men to solve marital problems, but now they do not use the correct religious procedures as that could be harmful instead of beneficial" (Adult woman, Homs sub-district, Homs).*

In addition, choosing to pursue a legal option can expose women to further social violence, shaming, victim blaming, and possibly to more violent backlash: *"Women and girls in our society cannot claim their right and the consequences are that she becomes a tale on every tongue" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).* Moreover, seeking to affirm one's rights becomes a risk for enduring further GBV, possibly ending in death: *"Yes, procedures exist but we can't use it in any case, because our parents will kill us" (Adolescent girl, Basira sub-district, Deir-ez-Zor).*

While adult men were more likely to point to the existence of courts, police stations, and local councils as viable options for seeking justice, adult women mentioned protection centres and support from the family as more productive coping mechanisms. At the same time, some men showed awareness of the challenges women face when seeking justice, divorce, or simple rights: *"The difficulty for females to access these mechanisms is due to fear of society's perception or customs, traditions and possible violence in the event of resorting to these mechanisms, fear of deprivation of resources and children, fear of exclusion or imprisonment, lack of trust in existing security institutions. Many girls do not turn to any party in the event of any kind of harassment due to fear of stigma, lack of confidentiality or protection and loss of confidence in these entities" (Adult man, Harim sub-district, Idlib).*

Although seeking justice was a relatively uncommon coping mechanism, women still asserted that they require more formal state protection: *"We need laws that support us" (Adult woman, Damascus sub-district, Damascus).*

Seeking family and community support

"We say 'the first sixty years are difficult'; we comfort each other" (Adult woman, Al-Bab sub-district, Aleppo).

Adolescent girls seek their mothers' support when disclosing various forms of GBV: *"[as for] verbal violence, I try to ignore people in the street. However, I tell*

my mother because she is very supportive" (Adolescent girl with disability, Damascus sub-district, Damascus). Seeking support from other male members of the family is also another prevalent coping mechanism: *"Sometimes the girl seeks help from the father when subjected to violence by her brother" (Adolescent girl, Al-Hasakeh sub district, Al-Hasakeh).* This strategy does not always guarantee a reduction of GBV or a resolution of conflict. As mentioned earlier, non-disclosure is more common as it reflects girls' and women's perception of the futility of other coping mechanisms.

In places where tribes and elders have influence over social affairs, women mentioned they can turn to these figures, or the elderly in their family who have a respected role in mediation: *"Sometimes they may turn to influential key characters (a mediator) to bring the views between the woman who is subjected to violence and her husband closer together. And then turn to community leaders such as tribal elders" (Adult woman, Ar-Raqqa sub-district, Ar-Raqqa).* In cases of IPV, women also discussed temporarily leaving their husbands and homes and staying with their parents. Families often try to prevent a divorce from taking place and intervene to mediate a conflict. However, when a woman is already divorced or widowed, her options for family or community support significantly decrease: *"Some widows and divorced women only receive support from neighbours while their parents don't provide them anything" (Adolescent girl, Azaz sub-district, Aleppo).*

Notably, girls and women also seek support from their female peers who may lend a friendly ear or offer advice and comfort: *"Women and girls are now able to establish social networks even with women of different backgrounds. They always think of alternatives to fight the tough circumstances" (GBV expert, Turkey Cross Border).* According to GBV experts, accessing this support through protection services and informal networks has been crucial in building up girls' and women's resilience and coping strategies: *"Women and girls have become even more resilient to deal with the pandemic as well as the violence they're experiencing" (GBV expert, Turkey Cross Border).* This has had a positive impact on their help-seeking behaviour: *"Women have more resilience now and are better able to express themselves and request the services they need. They are developing more social networks which is enhancing resilience. Through the case management services, survivors are determining their own resources that can help them cope and enhance their resilience" (GBV experts, Turkey Cross Border) and "women and girls are stronger now and some are in charge of the family, they know about GBV services and can support other women. They have developed community networks and women are leading these" (GBV expert, WoS).*

Seeking employment, education, and finding joy in other ways

"When we work, we face less violence." (Adolescent girl with disability, Damascus sub-district, Damascus)

Adolescent girls and boys, as well as adult women, often saw pursuing education, learning a skill, and economic independence as fruitful coping mechanisms against GBV. Women noted that working both inside and outside the home not only gives them a sense of diversion from a difficult reality, but can also serve as a form of needed empowerment that can provide a path to economic independence: *"Many women are thinking of alternative solutions such as women in their forties now deciding to resume education or learn a vocation"* (GBV expert, Turkey Cross Border). Engaging in communal work like making jams or pickled products, helping each other with cooking, making pastries, picking olives, or hair care not only provide communal support but can also bring much needed income, economic relief, and a sense of empowerment: *"I learned hairdressing, but I wish I could carry on to the second and third level [...] I am doing my best. My neighbours come to my house with their friends, they look for a hairdresser, so I do it for them and this breaks the routine too"* (Adult woman, Al-Bab sub-district, Aleppo).

Seeking employment is also a way for divorced and widowed women to sustain themselves when they are ostracised by their families or denied economic resources: *"The blow that doesn't break the back strengthens it. After I lost my husband, I decided to provide my daughter a better life than mine, so I searched for a job. At least two or three days per week, I used to go and work, and I learnt sewing in the safe space for women and girls in Al-Bab village, then I bought a sewing machine and went to the used clothes market and brought some material and made dresses for my daughter. I am so proud of myself"* (Adult woman, Al-Bab sub-district, Aleppo). However, families can restrict a girl's or a woman's movement, in which case seeking education or employment may not be possible.

Finally, girls and women are creative in finding new ways to cope with the violence they are subjected to. Girls and women highlighted the importance of taking walks in nature to feel better, spending time online and finding entertainment, or playing: *"I took an English course and I started to improve my English. This was very good, and most of the girls have enrolled in similar courses. I also love to plant roses; every now and then I buy roses and plants and take care of them"* (Adolescent girl, Al-Bab sub-district, Aleppo).

Affected Populations

Adolescent girls

Adolescent girls emerge as a critically vulnerable group to GBV. From a young age, girls are brought up to serve a gendered role in the family such as taking care of younger siblings, cooking, and cleaning in the house, while being at risk of physical family violence from the parents and brothers: *"[One respondent mentioned that] there is physical violence exercised by husbands to their wives, as well as violence by brothers to their sisters and also the older to the younger, and a second respondent agreed with her saying that her sister has one boy and seven girls, discrimination in treatment is obvious between the boy and the girls and he also has the power to exercise violence on his sisters"* (Facilitator of adult women FGD, Harim sub-district, Idlib).

Girls also face both physical and sexual violence in schools and are disproportionately affected by sexual harassment in public: *"Girls are beaten by parents, exploited by employers or harassed outside and inside the home"* (Adolescent boys, Afrin sub-district, Aleppo). Girls mentioned that their access to education is frequently denied or limited. While this is sometimes due to poverty that forces some of them into child labour, it is common to deny girls access to education in order to force them into *"Early marriage; where the father forces his 11-year-old daughter to get married"* (Adult woman, Homs sub-district, Homs). As a result, and as this report demonstrates, adolescent girls' vulnerability to issues such as early pregnancy and IPV increases.

Divorced and widowed women and girls

As per last year's findings, divorced and widowed women and girls continue to face various forms of GBV, made more pronounced in the COVID-19 crisis. Not only are they frequently sexually harassed such as when using public transportation, working, or accessing distributions, but they also face systemic discrimination when it comes to obtaining their rights in divorce and inheritance: *"Girls are often deprived of inheritance or the right to own property. It's the same for widows and divorced women"* (Adult woman, Tal Beidar sub-district, Al-Hasakeh).

In addition, divorced and widowed women and girls continue to be exposed to a negative social stigma in their communities that exposes them to much scrutiny, discrimination, and shaming due to the known lack of protection from a male figure: *"Divorced women are the most exposed to violence and all society thinks of them as an easy catch. I am ashamed to say that I am divorced"* (Adult woman, Jaramana sub-district, Rural Damascus) and *"A divorced woman would be the talk of the town"* (Adult woman, Hama sub-district, Hama). The multiple forms of violence they experience have an immense impact on their daily lives and futures, which is why they were frequently and specifically referred to as vulnerable: *"Widows and divorcees are subjected to a lot of pressure because of customs and traditions, their parents lock them at home and prevent them from education too"* (Adolescent girls, Azaz sub-district, Aleppo).

Displaced girls and women

Tensions between displaced and host communities also have an impact on displaced women and girls who noted that *"displaced women are exposed to harassment and abuse"* (Adult woman, Azaz sub-district, Aleppo), which often drives them to live in camp settings: *"Discrimination between displaced and residents and exploitation by raising the cost of rent which forced people to go to camps"* (Adult woman, Azaz sub-district, Aleppo). Conditions in camps including over-crowding, lack of privacy, insufficient water and limited bathroom access, greatly increased girls' and women's risk to various forms of GBV including IPV: *"We are in a small camp. Whenever a woman leaves her tent and stays a bit late, the husband beats her"* (Adolescent boy, Idleb city sub-district, Idleb). Displaced girls and women in camp settings also discussed being vulnerable to sexual harassment, rape, and sexual exploitation and abuse, including during distributions. GBV experts confirm their heightened risk: *"We think those living in camps have greater GBV risks than other people and we are focusing on these groups/those in need in these areas"* (GBV expert, Turkey Cross Border).

Older women

Older men and women were frequently mentioned as vulnerable to physical violence, discrimination, and disrespect: *"Old people suffer because their children insult them"* (Adolescent girls, Azaz sub-district, Aleppo) and *"Older people are mostly subjected to violence and people with disabilities as well"* (Girls and adult women with disabilities, Damascus sub-district, Damascus). While older men sometimes have a voice in their families due to their property or land ownership as well as social standing, older women were continuously mentioned as weak: *"Widows, divorced women and senior citizens are also subjected to violence because they have no one to protect them"* (Adolescent girl, Qourqeena sub-district, Idleb) and *"Adult woman 1: Seniors!! Poor them, they are all over the streets and their families are not willing to take care of them anymore. Adult woman 2: I personally know an elderly lady in our neighbourhood, she sleeps in the street in summer and winter as well"* (Adult women, Afrin sub-district, Aleppo).

Girls and women with disabilities

Persons with disabilities were described by all participants as vulnerable to various forms of physical and social violence: *"My cousin was born with a mental disability, she does not receive attention from either the family or those around her, and she is beaten, humiliated and insulted and when eating, they give her bread and tell her to sit aside. She goes out into the street and gets lost, and when they find her on the street, they beat her"* (Adolescent girl, Idleb sub-district, Idleb). Girls and women with a disability also face a risk of sexual violence: *"Violence is very different when it comes to persons with disabilities because we are a vulnerable and weak group, and we are generally not able to avoid injustice or defend ourselves against a man"* (Adolescent girls with

disabilities, Al-Qusour sub-district, Deir-ez-Zor). Girls and women with disabilities also discussed obstacles in social integration and barriers in accessing services allocated for them: *"Female persons with disabilities are exposed to violence and there are no associations that take care of them"* (Adult woman, Lattakia sub-district, Lattakia). Social violence and lack of integration also led some parents of children with disabilities to keep their children from school: *"I cannot entrust the school with my daughter when there are 1,000 students there. Anywhere they go, they are vulnerable to violence"* (Mixed gender group with a focus on persons with disabilities, Hama sub-district, Hama).

Women, girls, boys and men with diverse sexual orientations, gender identities and expressions, and sex characteristics (SOGIESC)

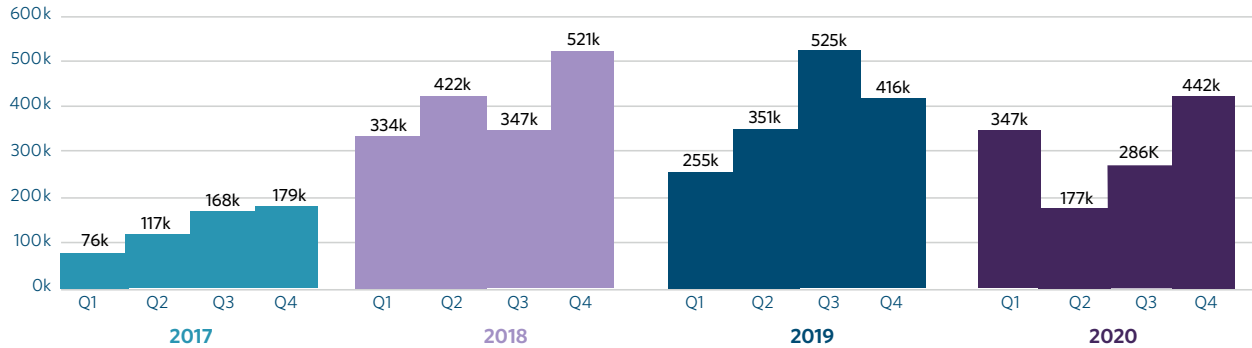
Violence against women, girls, boys and men with diverse SOGIESC was not mentioned during FGDs. Nonetheless, service providers received calls though the GBV hotlines by individuals with diverse SOGIESC who were facing heightened levels of discrimination and abuse during the COVID-19 pandemic: *"The hotline is useful to persons with disabilities and LGBTI [lesbian, gay, bisexual, trans and intersex] population"* (GBV expert, WoS). These reports are in line with cases of widespread discrimination and, above all, sexual violence documented by media, humanitarian organisations and human rights bodies before and during the pandemic.⁴⁵ For example, individuals with diverse SOGIESC who were forced to quarantine with their family of birth were exposed to emotional and physical abuse by their relatives.⁴⁶

45 Human Rights Watch and Helem 2020. "They Treated Us in Monstrous Ways". Sexual Violence Against Men, Boys, and Transgender Women in the Syrian Conflict. Available at: https://www.hrw.org/sites/default/files/media_2020/08/syria0720_web.pdf; ABAAD, Norwegian Church Aid 2019. Gender-Based Violence in Syria. Rapid Needs Assessment. December 2019. Available at <https://www.abaadmena.org/documents/ebook.1579886028.pdf>

46 OHCHR 2020. Topics in focus. COVID-19 and the human rights of LGBTI people. 17 April 2020. Available at: <https://www.ohchr.org/Documents/Issues/LGBT/LGBTIpeople.pdf>; Gregory 2020 (Independent). 'It's not safe for them': Coronavirus lockdowns putting LGBT+ people at risk across Middle East, campaigners warn. Available at: <https://www.independent.co.uk/news/world/middle-east/coronavirus-middle-east-lgbt-lockdown-abuse-gay-rights-a9409611.html>

Services to respond to GBV

Graph 3 -Total Beneficiaries Reached by Year and Quarter



Graph 4 - Communities Reached by Year and Quarter

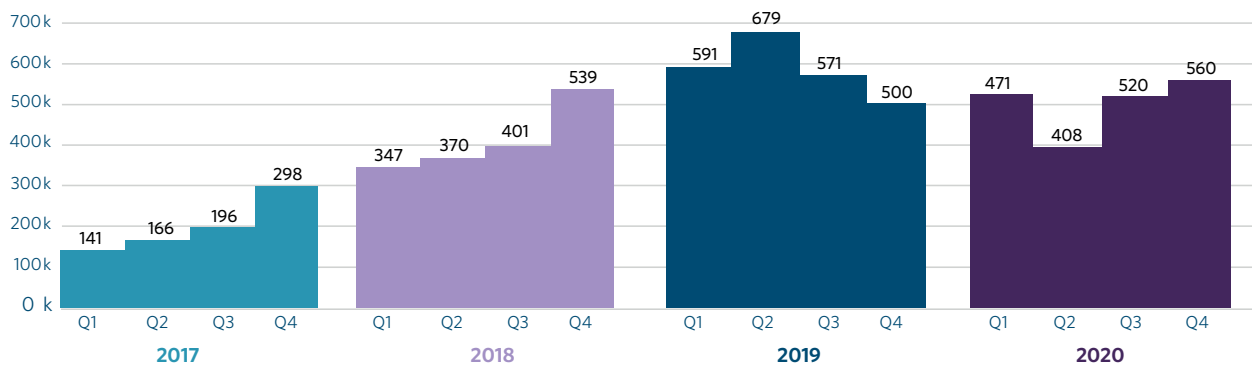
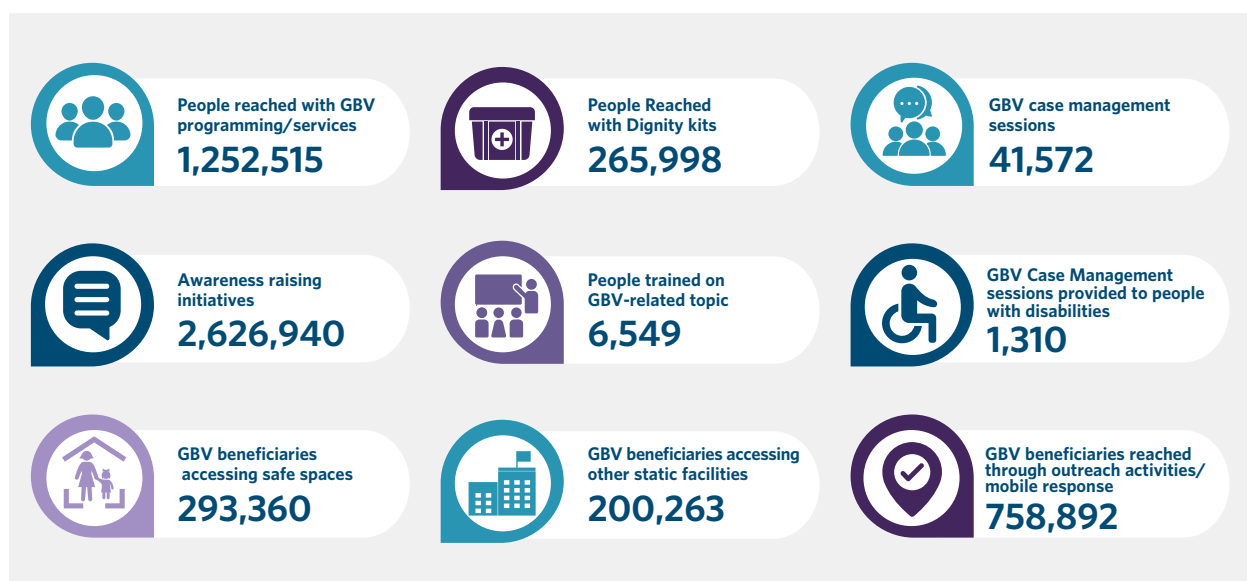


Figure 6 - Overall achievements of the WoS GBV AoR (Jan - Dec 2020)



Reach of GBV Programming in 2020

In 2020, the number of organisations facilitating GBV assistance across the whole of Syria increased to 148, compared to 141 in 2019, though this was driven primarily by a greater number of actors initiating GBV activities in areas served by the Turkey Cross Border Hub compared to other Hubs. Although the number of sub-districts with no GBV services decreased over 2020, GBV actors are only able to reach 8% (589 out of 7592) of communities, while 92% of communities still do not have access to specialised GBV services to support girls and women.

The impact of COVID-19 restrictions on organisations' capacity to provide services and conduct awareness raising and outreach activities was evident in the numbers of people reached, especially in the period between March and May 2020. A sharp decline in the number of beneficiaries reached was observed, from 145,000 people in January to 43,000 people in April 2020 accessing either WGSS, other static facilities or outreach and mobile response activities. This timeline suggests a direct impact of COVID-19 restrictions on the availability and accessibility of services. Encouragingly however, the number of people benefitting from GBV services started increasing again from May 2020, demonstrating that GBV actors were able to effectively adapt service provision models to new restrictions and women and girls were quickly able to once again benefit from specialised assistance: *"At the beginning of the pandemic we initiated the hotline and numbers of cases received between March and June are much higher than those from before"* (GBV expert, WoS).

A total of 1,252,515 women, girls, boys and men accessed GBV services between January and December 2020. Of these, 66% were adult women and 20% were girls under the age of 18. The vast majority of individuals were reached by awareness raising activities, followed by empowerment activities such as vocational trainings, life skills and recreational group sessions. At the same time, over 10,000 women and girls survivors of GBV received specialised GBV case management services in the first nine months of the year. While this number represents a downward trend compared to the same period in 2019, it remains a testament to the ongoing capacity of GBV actors to provide highly specialised services during a time of upheaval, with severe limitations of movement affecting staff as much as the general population.

Availability and Quality of GBV Response Services

The picture painted by the data above in terms of availability and use of GBV services in 2020 was widely confirmed by women and girls who participated in the Voices from Syria 2021 discussions.

Women and Girls Safe Spaces (WGSS)

WGSS were the main form of protection services discussed by women and girls during the FGDs, demonstrating a high level of both awareness and utilisation of these services in most contexts: *"There are many services in the community, such as safe spaces for women and girls, in which appropriate psychological support is provided"* (Adolescent girl, Kisreh sub-district, Deir-ez-Zor). At the same time, however, certain displaced populations lamented the absence of women's safe spaces within a reasonable distance (see below for more details on barriers to access): *"There are no centres to protect or empower women in the camp. Where we live there are some centres that are relatively far away from the camp place and we cannot reach them"* (Adult woman, Al-Dana sub-district, Idlib). Despite the increased presence of GBV actors, experts confirmed that *"in certain informal sites/camps, there are no services whatsoever so there are many incidents of GBV that no one knows about"* (GBV expert, Turkey Cross Border).

Where WGSS are available, they play a fundamental role in providing a space of safety and connection to women and girls exposed to daily violence and conflict: *"We only feel safe when we arrive to the centre"* (Adolescent girl, Damascus sub-district, Damascus). Importantly, adolescent girls were as likely as adult women to speak about WGSS as places where they felt comfortable, welcome and safe, demonstrating the success of tailored efforts by GBV actors in the last few years to adapt service provision to the needs of this particular group: *"We participate in the activities provided by international organisations in the safe space, and what we liked most was the awareness sessions, awareness activities, psychological support and case management, which attracted us to continue visiting the centre. The good treatment, attention, available services and the safe space give us a feeling of comfort"* (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh).

Many women and girls spoke enthusiastically about the impact of frequenting a WGSS regularly and accessing the opportunities it provides: *"Some girls said that the presence of organisations and associations by providing safe spaces for women and girls as well as providing income projects and psychological support helped girls know their rights and that they have begun rejecting forced marriage and determined to complete their education"* (Facilitator of adolescent girl FGD, Kisreh sub-district, Deir-ez-Zor).

While income-generating activities are not among the main objectives of WGSS, activities for empowering women and girls (including opportunities for building new skills) are provided and can have a significant effect on women's lives: *"The most important thing is that the safe space for women is helping us to market our work through the point of sale and especially during quarantine from home. And my friends who had taken courses here, told me that the centre used to buy their products"* (Adult woman, As-Sweida sub-district, As-Sweida). The importance of economic autonomy, vocational and life-skills training for women and girls living at constant risk

of GBV cannot be understated, as amply demonstrated by the following quote:

"Perhaps the violence has decreased after the presence of humanitarian organisations, where the organisations' programmes focus on how to rehabilitate a person to adapt herself and learn to choose what suits herself. There are many protection centres that focus on women and girls in order to increase awareness, knowledge, information and self-confidence and on the other hand, help them to become economically independent by encouraging them to join sewing workshops or work for money, perhaps as a hairdresser. Even if she is not able to work, she learns and improves herself. Therefore, we now feel more secure and that violence has gradually decreased compared to the past year, and on the contrary, I see people have recognised their rights and no longer accept violence [though] total safety is not always possible [and] violence is somehow present all the time" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Therefore, WGSS not only represent an essential entry point to specialised GBV services, but rather provide a range of services and support which is resulting, according to women and girls themselves, in changes in their attitudes, beliefs and behaviours. These changes are increasing women's resilience, enabling them to access support more easily and, in general, impacting their capacity to cope with GBV: *"Women and girls are applying new coping mechanisms. This is supported by the presence of safe spaces that have been there for years now. Women in other locations are demanding such services in their areas of work" (GBV expert, Turkey Cross Border).*

Case Management and Psychosocial Support

Women and girls often referred to individual case management and psychosocial support services when discussing possible coping strategies for survivors of violence: *"We can request help from the protection centres, such as the centre to which we go, the safe space and other organisations that always mention that they are here to provide support and assistance" (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh).* Both adult women and adolescent girls were aware of the availability of individual support, as were some of the girls with disability: *"People usually resort to the safe spaces (vocational centres) and psychological consultation" (Adolescent girl with a disability, Deir-ez-Zor sub-district, Deir-ez-Zor).*

Women highlighted the important role of safe spaces and awareness raising activities as critical entry points to case management and other specialised services for survivors of GBV: *"Here there is a women's support centre that offers awareness sessions about women's rights and this helps them learn about their rights that they don't know about. The psychological support and the case manager help us a lot through the difficult times we go through" (Young woman, Lattakia sub-district, Lattakia).* The role of specialised case management in connecting survivors of GBV with different forms of support was

also highlighted as a strength by some participants: *"Having safe spaces for women and girls and being familiar with case management services helped many girls obtain health and psychological services" (Adolescent girl, Kisreh sub-district, Deir-ez-Zor).*

Even in contexts where they are not available, women and girls seemed aware of the importance of case management and psychosocial support services to address GBV: *"When violence occurs, things are solved between people by reconciliation but no one refers to psychological support centres because this service is not available in the camp [...] There are no safe spaces for girls and women to receive psychological support" (Mixed gender adolescent group, Kisreh sub-district, Deir-ez-Zor).* Some however considered these services too limited to meaningfully address survivors' psychosocial needs: *"The time provided by these organisations to beneficiaries who need psychological support, for example, is too short and not adequate" (Adult woman, Ar-Raqqa sub-district, Ar-Raqqa).*

Restrictions imposed by the COVID-19 pandemic led some GBV service providers to launch hotlines and one-to-one consultations over the phone, with mixed success: *"We do not have remote case management, we tried but it did not work" (GBV expert, WoS).* Some women and girls appeared comfortable with the use of digital channels to access protection services and awareness sessions: *"Yes, remote protection services have been provided via social media" (Adolescent girl, Harim sub-district, Idlib).* Others lamented the reduced psychosocial benefit of attending group activities online: *"We used to attend psychological support sessions, where we gained a beneficial experience but then they stopped those sessions because of COVID-19. Although they continued the sessions remotely online, but it is never the same as attending in person and enjoying it with your friends, spending some time there to lift your spirits" (Adolescent girl, Afrin sub-district, Aleppo).*

Importantly though, the availability of hotlines allowed highly marginalised groups who are normally excluded from, or struggle to reach, WGSS to access GBV service providers: *"Women prefer to have consultations in person, and use the hotline only to book the appointment. They prefer to wait and disclose in direct contact, face to face with a social worker or PSS [Psychosocial Support Assistant], not disclosing through hotline. However, the hotline is useful to persons with disabilities and the LGBTI population" (GBV expert, WoS).*

Health Services

Availability of health services for the general population, and for women and girls in particular, varied depending on location: *"Medical care is available for women, girls and the old people through the presence of medical points belonging to humanitarian organisations" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).* In this case, areas with a high presence of humanitarian organisations fared better than other communities which relied more heavily on private health facilities: *"She needs a hospital*

for women, being pregnant herself, and the only available hospital is private and she doesn't have enough money" (Adult woman, Harim sub-district, Idlib). The quality of health services, however, was often heavily criticised due to lack of both equipment and medicines: "People suffer from lack of water and medical equipment in the medical centre, there [is] no ultrasound device, and people requested the organisation to provide one but they didn't receive anything" (Adult woman, Tal Beidar sub-district, Al-Hasakeh).

Specific health services for survivors of GBV were rarely mentioned during discussions with women, girls, boys and men, possibly pointing to a low level of awareness of the role medical providers can play in mitigating or managing the consequences of violence. When the issue was addressed directly, it was to point to the lack of dedicated health responses: "There is no medical care or legal assistance provided in case women and children are subjected to violence" (Adolescent boy, Kisreh sub-district, Deir-ez-Zor). This limited availability of specialised GBV health services was also corroborated by ABAAD: "There are no medical or specialised services for survivors, and no holistic programmes that offer medical, psychosocial, and empowerment assistance to women. The majority of services provided by organisations are all sporadic efforts that depend on the donor, and whatever they are willing to fund at a given point in time."⁴⁷

Nonetheless, GBV service providers operating across Syria reported referring around 1,800 women, girls, boys and men to medical services, including for clinical management of rape (CMR), between January and September 2020, demonstrating a good level of collaboration between GBV and medical actors. Efforts to reinforce the linkages between the two sectors have been ongoing in the WoS response in the past few years with some promising results, as documented by UNFPA: "In 2018-2019, efforts were undertaken to build the awareness and capacity of health front-liners on basic principles, safe identification and referrals, as well as the clinical management of rape (CMR); to provide relevant commodities, including rape kits; and to ensure increased coordination between health and GBV teams in the field. Specialised service providers started operating directly from healthcare facilities, in collaboration with midwives and gynaecologists. In addition to the awareness and dissemination of information at community level, these measures led to a significant increase of incidents being identified by medical staff and referred to GBV service providers and vice versa"⁴⁸.

Legal and Protection/Security Services

Reporting a case of GBV to the police or other security forces was not seen as a realistic option by women and girls across Syria as the following exchange demonstrates: "Adolescent girl 1: Why didn't she complain to the police so that they give her back her right? Adolescent girl 2: Haha complain!!! What are you talking about? As if you don't know what is happening with the residents here? And put aside the subject of residents and refugees, you believe that the police are capable of doing anything?" (Adolescent girls, Afrin sub-district, Aleppo). Impunity of perpetrators appeared the norm: "Everyone laughs when I inform the police about harassment because they could be bribed with 500 liras, and they would let the perpetrator go" (Mixed gender group, Jaramana sub-district, Rural Damascus), as was also found by ABAAD in 2019: "Not all areas had legislation related to penalising perpetrators of violence, and even when perpetrators were brought forth, there were little to no consequences."⁴⁹

Legal services, including dedicated services for women and girls at risk of GBV, seemed more common: "There are some lawyers that offer legal services for women such as obtaining ID documents, marriage certificates - I hear about them. And here at the centre there is a lawyer that comes once a week that gives awareness sessions" (Young woman, Lattakia sub-district, Lattakia). Multiple participants mentioned the presence of Women's Councils or Women's Houses where women can access legal counselling and gain an awareness of their legal rights: "The existence of the Women's Council also had a role in reducing violence against women and girls, especially divorced women and widows who were introduced to their rights through these spaces and councils, and their strength was supported" (Adult woman, Kisreh sub-district, Deir-ez-Zor).

However, the presence of legal services did not necessarily translate in their accessibility, as the risks and stigma associated with seeking legal help were considered an insurmountable barrier for many women and, especially, girls: "[There is] legal assistance in the Women's House but we can't go there" (Adolescent girl, Basira sub-district, Deir-ez-Zor). Recurring references to legal services seemed to be primarily considered within the context of divorce, either to initiate the proceedings or to seek alimony payments and child custody: "Legal services (in the Women's House) have not been closed, but not all women want to seek refuge in it and obtain its services, unless the woman wants to divorce" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Barriers to Services

Despite widespread awareness of WGSS and other protection services, many women and girls reported facing difficulties accessing these spaces due to

47 ABAAD, Norwegian Church Aid 2019. Gender-Based Violence in Syria. Rapid Needs Assessment. December 2019. Available at <https://www.abaadmena.org/documents/ebook.1579886028.pdf>

48 UNFPA 2020. An Analysis of Evolution of Gender-Based Violence and Sexual and Reproductive Health Services Within the Syria Crisis Response. Available at: https://arabstates.unfpa.org/sites/default/files/pub-pdf/srh-gbv_assessment_-_english_-_121020.pdf

49 ABAAD, Norwegian Church Aid 2019. Gender-Based Violence in Syria. Rapid Needs Assessment. December 2019. Available at <https://www.abaadmena.org/documents/ebook.1579886028.pdf>

their **distance and the lack of safe and affordable transportation**: *"There is difficulty in connecting some of these spaces due to the distance between their places of residence and the places of these spaces, especially for people with disabilities and the old people and the lack of transportation. The high transportation costs also constituted an obstacle in accessing these areas or accessing humanitarian aid"* (Adult woman, Kisreh sub-district, Deir-ez-Zor). While distance and transportation were the most frequently mentioned barrier to access across groups, they were considered to be especially problematic for individuals with mobility issues, including women and girls with a physical disability, older women and widows and divorced women who might be stigmatised for simply leaving their homes: *"Most of the services are available to those that can physically access to centres, as long as they can afford to come there. Those that are living in remote areas and do not have resources to reach the centres will be excluded"* (GBV expert, WoS).

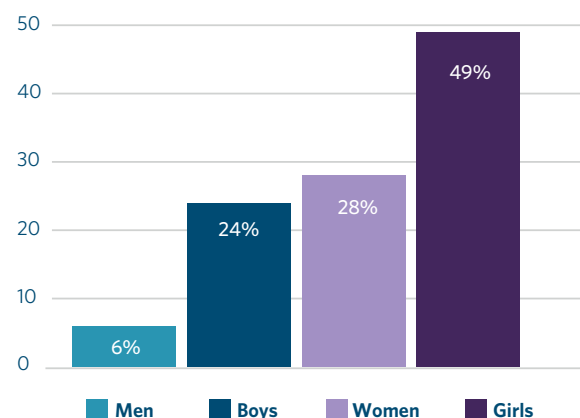
The provision of transportation by GBV service providers was considered essential, especially amongst adolescent girls, to enable them to take part in WGSS activities: *"I went because there is a centre for women and transportation. I would not go if there was no transportation"* (Adolescent girl, Al-Bab sub-district, Aleppo). Free transportation has also enabled more women with a disability to access critical WGSS services and support: *"Since we started operating the hotline, we got more reports of women with disabilities which encouraged us to establish transportation services so that we can allow these women to access services at the centre, otherwise they would not be able to come. We started livelihood activities and many women with disabilities were also interested in participating"* (GBV expert, WoS).

Distance and transportation are also closely linked to **fear of harassment, kidnapping and other security concerns** on the way to WGSS and other service points: *"Yes there are safety concerns, as we can be easily kidnapped while we are on our way to the centres or be subjected to harassment or robbery"* (Adult woman, Qourqeena sub-district, Idlib). Once again, the lack of safe transportation options exposes women and girls to additional risks in the attempt to access essential services: *"When women need to access any service, whether medical or other, there is no public transportation. They need therefore to join strangers, which exposes them to the risk of harassment, especially when it's a little late in the day"* (GBV expert, Turkey Cross Border).

Importantly, COVID-19 seemed to have exacerbated barriers linked to safety and transportation: *"No, challenges did not change because of COVID-19. But transportation became more difficult and it was harder to convince our parents to let us go out"* (Adolescent girl, Jebel Saman sub-district, Aleppo). For adolescent girls, fears of sexual harassment and kidnapping are closely related to **movement restrictions imposed by caregivers**: *"As for people who are far away, there are fears around exposure to harassment, whether verbal or otherwise. One of the girls added that there are some girls who are prevented by parents from visiting these centres out of fear for their*

safety due to the distance. Others, the girl may be exposed to violence from the family if she insists on visiting such centres" (Facilitator of adolescent girls group, Al-Hasakeh sub-district, Al-Hasakeh). This quote exemplifies the combination of genuine fear for a girl's safety and social norms which deem WGSS and GBV activities as problematic and even dangerous, potentially exposing adolescent girls, and adult women in some cases, to further GBV.

Graph 5 - MSNA 2020 Findings on Movement Restrictions: Spousal/Family/Community Restrictions by Population Group



Restrictive gender norms, normally imposed by male family members, were cited often as a critical barrier preventing women and girls from accessing GBV services of all kinds: *"Customs, traditions and norms existing in the society. Example, a man does not allow his wife to visit GBV protection centres"* (Adult man, Idlib sub-district, Idlib). Adolescent girls who need permission from their families were particularly vocal about the impact of gendered restrictions of movement on their capacity to access services: *"Some women and girls find it difficult to reach those services because their parents forbid them from going out without having a male with them or an escort"* (Adolescent girl, Qourqeena sub-district, Idlib).

In some cases, girls were specifically prevented from attending WGSS because their families were concerned about disclosure of GBV incidents: *"Hard mentality, customs and traditions [...] prevent us from going because if we go, our families will imagine that we may talk about violence and we will be exposed to scandal"* (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh). The risk of violence, including that of being killed, was particularly high when trying to access legal services: *"Our village inhabitants are tribal and girls are forbidden to make such choices. They will be killed"* (Adult woman, Basira sub-district, Deir-ez-Zor). However, male family members also constrained women's and girls' access to services in general, regardless of their purpose, a dynamic which concerningly increased during the pandemic: *"We are seeing persistence and even increases in deprivation of assistance by husbands or fathers, not allowing women to*

access WGSS or medical services unless it's very urgent. This has increased because men are staying more at home and practicing more power over female family members" (GBV expert, Turkey Cross Border).

The **lack of women-only spaces** was also considered an important barrier preventing women and girls from accessing health and legal services, as well as other humanitarian assistance: "When services are combined in one place or made public to everyone, there are no separation lines between male and female, which sometimes exposes women to risk of harassment. No specific waiting rooms for example for women versus men in medical facilities or local council management rooms" (GBV expert, Turkey Cross Border). The importance of having spaces dedicated to woman and girls in order to ensure accessibility is a core principle of GBV services and the establishment of WGSS in particular, which was once again reinforced by discussions with women and girls in Syria: "There are activities within the camp, but few of them attend them due to the lack of privacy in the place. They are not allocated for women but they are for everyone, male and female" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh). The importance of having dedicated female staff was also highlighted by participants who were asked about barriers to access to humanitarian services: "Yes, we may be kidnapped. The place may be far away. All employees may be men" (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh).

Lack of awareness about GBV specialised services and, specifically, how GBV case management can support survivors of GBV, remains an issue for some communities: "As for humanitarian aid in the field of protection in particular, there are people who do not know about it [are not aware of the service]. For example, case management in organisations means many people do not know what the purpose of it is and thus not benefit from it" (Adolescent girl, Idleb sub-district, Idleb). Women, girls, boys and men also raised concerns about the **quality of GBV services**, and their confidentiality in particular: "Some women are afraid that their stories might be passed around as they do not trust the service providers and they wouldn't dare to speak to them" (Adolescent girl, Ar-Raqqa, Ar-Raqqa). Respondents in a few locations spoke strongly about the very serious consequences that poor quality GBV services, which do not respect strict rules of confidentiality, might cause for survivors and pointed out that current service providers could not be trusted: "Existing centres don't respect privacy and when the woman refers to them, they reveal her case and expose her to scandal and submit her to even more violence" (Adolescent girl, Azaz sub-district, Aleppo). These concerns were found to be widespread in ABAAD's GBV assessment as well: "The perceived lack of privacy and confidentiality when it comes to receiving services was a concern shared by both women and men alike. This issue can be related to the lack of privacy the service point offers [...] or fears regarding whether what a survivor reports will remain confidential."⁵⁰

Frustration with GBV service providers was also expressed in regard to the perceived unsustainability of GBV prevention activities and vocational training provided in WGSS: "You can't rely on organisations to improve something like [GBV] easily. Because they all close down eventually and they don't operate for a long time. We would barely have started spreading awareness by the time they would close down the organisation" (Adolescent girl, Afrin sub-district, Aleppo). This challenge is primarily related to **short and unpredictable funding cycles** which can force GBV actors to interrupt ongoing activities or limit GBV prevention strategies to one-off or brief awareness raising initiatives, which are less likely to have an impact on entrenched gender norms that sustain GBV. Efforts to ethically handle the impact of GBV service closure on communities that use them continue to be a priority for GBV programmes and actors⁵¹.

Inappropriate and abusive treatment by service providers was also reported by some women and girls: "We are exposed to violence in medical centres, especially verbal violence and mockery, in addition to disrespect and being made to feel inferior to them" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh). This issue seemed to particularly affect health facilities and medical providers who, furthermore, were placed under additional pressure during the COVID-19 pandemic: "Access to medical services is becoming more dangerous. This has increased since COVID due to pressure on medical staff which is leading to them abusing survivors. Some survivors faced violence by medical staff such as emotional abuse (like yelling at them or blaming them for what happened)" (GBV expert, Turkey Cross Border).

The availability of **services for male survivors of sexual violence** was also highlighted as a gap. While GBV experts recognised that improvements have been made in this regard over the last few years, a more holistic and multi-sectoral approach should be adopted: "We however don't have services in place for male survivors of sexual violence. We are receiving disclosures from male survivors sometimes but can't do anything and sometimes they won't accept to be referred to other services" (GBV expert, Turkey Cross Border). While FGDs rarely touched on male survivors and their needs, a generic gap in services for adolescent boys was mentioned several times: "For boys there are no centres where they can ask for help" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

The specific impact of **COVID-19 restrictions** on access to services were discussed at length during FGDs. While the picture varied according to the location and the specific infection prevention measures put in place, services were widely affected. On one end of the spectrum, GBV and other protection services

50 ABAAD, Norwegian Church Aid 2019. Gender-Based Violence in Syria. Rapid Needs Assessment. December 2019. Available at <https://www.abaadmena.org/documents/ebook.1579886028.pdf>

51 GBV Sub-Cluster Whole of Syria (Turkey Hub) and GBV Working Group Whole of Syria (Jordan Hub) (2018). Guidance Note of Ethical Closure of GBV Programmes. Available at: <https://www.humanitarianresponse.info/en/operations/stima/document/guidance-noteethical-closure-gbv-programmenar>

remained available with additional measures in place to mitigate the risk of infection: “[COVID-19] did not affect [protection services] because we always followed our sessions with the village protection team and we were always trying to adhere to the correct rules that we learned to remain comfortable” (Adult woman Basira sub-district, Deir-ez-Zor). At the other end: “Certainly because of COVID-19 there is a change as services are not available, and the protection centres have stopped providing services. This affected us very much” (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh).

Mobile GBV case management services in particular were often interrupted: “We have mobile units but only related to awareness and not case management because of risks of confidentiality and sustainability” (GBV expert, WoS). Concerningly, the **closure of WGSS** and other GBV services appeared to be common in camp settings as well, where rates of GBV and other protection violations were known to be high: “Most of the protection services stopped due to the spread of COVID-19, and this is what I consider wrong, because we were speaking up about our pressure and exposure to violence. There is a minority who continued their work, but the place was not reserved for women, there is mixing in centres between men and women” (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Access to health care was also highlighted as particularly challenging due to the need to obtain an appointment in advance which not everyone was aware of, or able to do: “For example, in hospitals, a lady came after she had walked a long distance and suffered on her journey, and when she arrived, they told her that she should have an appointment over the phone, while these people do not even have a phone” (Adolescent girl, Idleb sub-district, Idleb). Regardless of the availability of services, however, survivors were prevented from leaving their homes and seeking support during the pandemic either due to **lockdown measures**: “During quarantine it was difficult for us to come to the centre or to go anywhere else, even if we were subjected to violence. We couldn’t leave the house” (Young woman, Lattakia sub-district, Lattakia), or due to the **fear of infection**: “People are afraid to go out as they fear being sick and infecting their families” (Adolescent girl, Azaz sub-district, Aleppo).

The use of **digital technology** to replace in-person GBV services was, as already highlighted above, considered critical to maintain a connection to GBV survivors and other women and girls at risk, as well as men with diverse sexual orientations, gender identities and expressions, and sexual characteristics: “As for closed centres, services were provided by phone” (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh). However, online services were widely considered to only be accessible by certain, relatively privileged, groups of women and girls: “Not all the world has the internet and can watch these programmes on the internet and there are still people that [think] that these centres were closed down for good after the spread of COVID-19 and they do not know that they are available online” (Adult woman, Afrin sub-district, Aleppo). Older women and adolescent girls who do not

own a mobile phone, in particular, were excluded from remote services: “During the pandemic only women who had a phone could access our (remote) services. Adult women who were survivors were able to access services because they had access to mobile phones, as compared to girls who didn’t. [...] Women with mobile phones can be reached with remote support, but they can afford a phone only from about the age of 25. Some older women who really wanted were not able to and tried to get phones from someone else which jeopardised confidentiality” (GBV expert, WoS).

Given the barriers specific to online and digital service delivery for GBV survivors, and as per UNFPA’s guidance on GBV service provision during COVID-19, it is essential that a certain level of face-to-face service provision is maintained for lifesaving GBV case management, health and psychosocial support services in all emergencies, while adopting and resourcing appropriate measures to minimise the risk of COVID-19 infection⁵².

on GBV Area of Responsibility (AoR) achievements in 2020

During the 2020 Humanitarian Response Plan the GBV AoR continued to work towards three main objectives. The achievement of these objectives has inevitably been impacted by the COVID-19 pandemic.

1. Provide quality and life-saving GBV response services, including case management and psychosocial support, enhance vulnerable groups’ access to these services and reinforce referral pathways

The continuous provision of life-saving services, such as case management and psychosocial support, was adapted to the new reality of the pandemic, with new modalities of service provision being used to ensure GBV survivors and women and girls at risk were able to seek support. This implied, among others, the creation of hotlines or use of service phone lines for remote case management, the re-adjustment of WGSS to infection prevention and control measures as well as extra effort to train GBV actors to provide services through alternative modalities. Even though efforts to reach women and girls who can’t physically access the services were already in place, such as through outreach and provision of transportation, the use of new modalities of service provision created other opportunities to reach vulnerable population that faced challenges in accessing in person services: “Since we started operating the hotline, we got more reports of women with disabilities. This encouraged us to establish transportation services so that we can allow these women to access services at the centre, otherwise they would

52 UNFPA (2020). COVID-19 Guidance Note on Gender-Based Violence Service Provision. Available at: https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/covid-19_gbv_guidance_-_apr_2020_-_final.pdf

not be able to come” (GBV expert, WoS). Thanks to the provision of GBV services and the trust built by GBV actors over time, “women and girls are using strategic steps to protect themselves, they relocate or create their own safety plans to respond to GBV, but also find/learn about GBV services and try to reach the case workers and encourage others to do the same”. (GBV expert, WoS). The TXB GBV Sub-Cluster worked closely with the CP AoR on an “increased number of newborn cases of survivors of rape that needed alternative care” (GBV expert, Turkey Cross Border). The GBV AoR also invested in greater coordination on Cash and Voucher Assistance to respond to the needs of GBV survivors and women and girls at risk. For example, the Turkey Cross Border GBV SC established a dedicated Cash Task Force in collaboration with the Cash Working Group. Special attention this year was given to inclusion and provision of dedicated services for people with disabilities and adolescent girls, two groups that are often neglected: “We started livelihood activities and many women with disabilities were also interested in participating” (GBV expert, WoS).

2. Enhance strategies to empower women and girls, with a particular focus on most at-risk groups (for example, adolescent girls, divorced and widowed women and girls, women and girls with disabilities and older women) to prevent GBV and to change negative attitudes and beliefs that foster harmful social norms.

Preventing violence from happening in the first place and empowering women and girls continued to be focus areas for GBV actors across Syria. This spanned from one-off awareness raising activities, including to mark international campaigns (such as the 16 Days of Activism Against GBV), to longer term prevention programmes, such as structured awareness raising with men, women, boys and girls through direct contact in group sessions, as well as dedicating male outreach teams to the programmes with men and boys that take place in community venues such as schools, camps and mosques for the Turkey Cross border hub or in community wellbeing centres for the Syria hub. The GBV AoR also invested in more ambitious gender transformative projects: *“In our organisation we have also used those awareness messages with medical service providers and they have had a very good impact in the society” (GBV expert, Turkey Cross Border).*

Access to WGSS and related empowerment and skills building activities is progressively supporting women and girls to re-create a social network and to become agents of change, especially for peer support: *“Beneficiaries are making use of the services they are receiving such as life skills. They are encouraging other women in their community to also attend those services. Some women are seeking legal services and trying to get legal documents to protect themselves from GBV. We are also seeing more peer support; women supporting girls*

outside of the WGSS on how to mitigate GBV and protect themselves” (GBV expert, Turkey Cross Border). It is also supporting resilient behaviours: “Women have more resilience now and are better able to express themselves and request the services they need. Survivors are also starting to make tough choices such as leaving the house when the violence becomes severe” (GBV expert, WoS).

On certain occasions, women and girls were even supported to create their own women committees, a form of community-based women and girls’ protection mechanism. While providing technical, organisational and material support to women-led organisations was already a focus in certain hubs: *“We intend to fund more women led projects because they are trying to increase their resilience and take initiatives. Projects of women committees demonstrate that they are becoming more resilient. The GBV actors have empowered them and they are more creative and are finding new initiatives. At the beginning, their role was mainly on awareness raising, and building knowledge, but now they take more initiative toward reducing GBV in their community and empowering other women and girls through trainings and life skills. The women committee members are pushed to think beyond their role, bringing other women onboard and coming up with the great initiatives to deal with conflict” (GBV expert, WoS).*

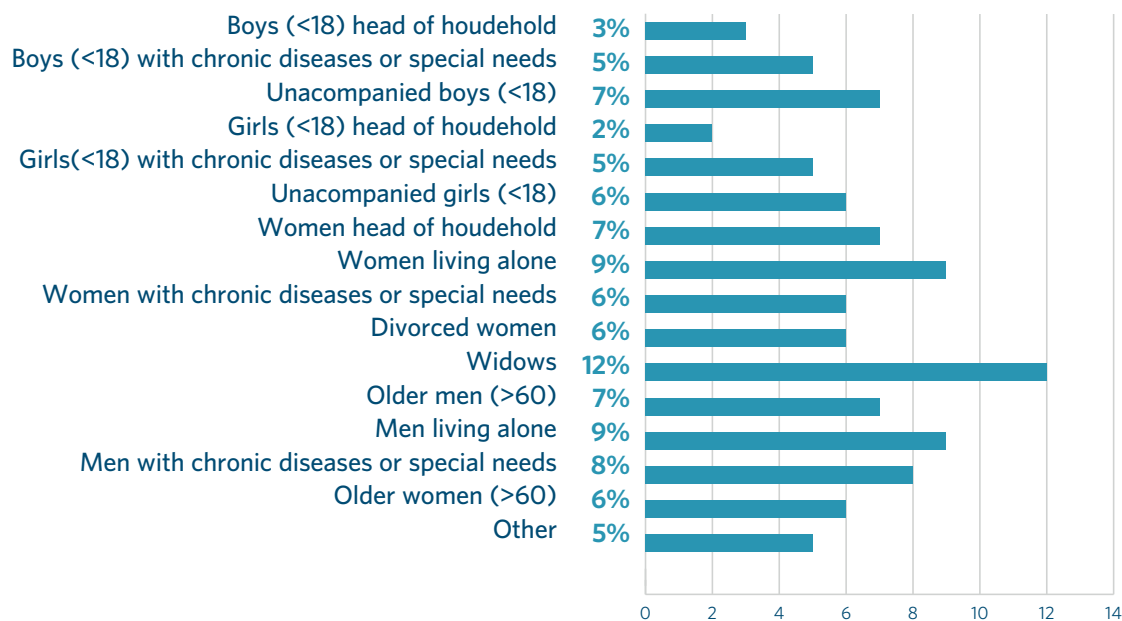
3. Promote GBV risk mitigation into all aspects of the humanitarian response

The GBV AoR continued to work with other sectors and humanitarian leadership to reduce GBV risks in the implementation of the humanitarian response. This included capacity building of humanitarian actors on GBV risk mitigation, including in-person and new online services, or targeting specific sectors to develop a joint action plan. As an example, the Turkey Cross Border GBV SC engaged with the education cluster to create a joint taskforce to enhance GBV risk mitigation strategies in education interventions. Finally, great emphasis was put in the collaboration with SRH coordination groups, in particular to further explore possibilities to provide integrated GBV and SRH services, such as the provision of family planning in WGSS. The GBV AoR also advocated for the humanitarian leadership to continuously reiterate that GBV risk mitigation is a shared responsibility and a non-negotiable aspect of any humanitarian response.



5 Gender and GBV in other humanitarian sectors

Graph 6 - Groups that are at risk of exclusion from receiving humanitarian aid and services



Education

Families frequently deny adolescent girls access to education, choosing to force them into early marriage instead, especially if the family is displaced and facing economic hardship and poverty: *"Girls are subjected to a lot of pressure which makes them more sensitive, besides being deprived from education because of displacement. Another participant: [We face] deprivation from education because of early marriage" (Adolescent girls, Azaz sub-district, Aleppo)*. Conservative and patriarchal views also force girls out of education: *"Violence is different when it comes to girls and boys because girls can be deprived from education because their parents are afraid for them whereas the boy would continue his education" (Adolescent girl, Jebel Saman sub-district, Aleppo)*.

In certain locations, including some camp settings, school and educational facilities remain limited: *"There is not yet any school in the camp – it is still under construction" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh)*. However, even when attending school, **girls are exposed to physical violence from educators**: *"Is it a must that the teacher or the parents hit us in order for us to study? How will the student like school, the teachers or the subjects being taught this way?" (Adolescent girl, Afrin sub-district, Aleppo)*. In addition, violence in schools was discussed as a widespread phenomenon that further deters parents from sending their children to school: *"The teacher beats the children in the school and this is why I took my children out of school" (Adult woman, Al-Bab sub-district, Aleppo)*.

Fear of exposure to **violence in the street or on**

public transportation, including sexual harassment and assault is also a strong deterrent from sending adolescent girls to schools: *"[I want] to complete my studies, but the only obstacle is the lack of security and safety" (Adolescent girl, Al-Bab sub-district, Aleppo)* and *"[I have] constant fear and anxiety. When my children go to school I feel worried about them" (Adult woman, Azaz sub-district, Aleppo)*. Lack of lighting in the street, and the lack of safe transportation on the way to and back from school makes seeking education unsafe for girls: *"Adolescent girl 1: School days are in the winter and most people don't have electricity or diesel and even the street would be empty by 5pm because it becomes dark outside, and our parents are worried for us about kidnapping and harassment, so they prefer not to send us to school or to any courses. Adolescent girl 2: This can all be resolved, but what happens in the streets is much worse than that, especially as there is no one who is willing to resolve these issues or offer a solution. A girl cannot leave her house and go to school and her parents would always be worried about her" (Adolescent girls, Afrin sub-district, Aleppo)*.

Access to education over the past year was also limited by **COVID-19 restrictions and lockdowns**, which kept many children out of school, or shifted them to online learning. Online learning contributed to new forms of sexual harassment of female students: *"[We've seen] more cases of cyber harassment. One of the contributing factors is girls attending online educational sessions which has in some instances led to blackmailing and even rape" (GBV expert, Turkey Cross Boarder)*.

Unanimously across all governorates, adolescent girls uniformly mention education as the key activity

they most wish to pursue: *“Education [continuation], especially for girls, so that the degree would be a weapon that a girl can use by spreading awareness, starting with family and relatives”* (Adolescent girl, Homs sub-district, Homs). However, adolescent girls also noted they are often forced to undertake paid work instead of education to sustain themselves and their families: *“I won’t return to studying again. I have put in my mind to learn a profession and support my family”* (Adolescent girl, Al-Bab sub-district, Aleppo).

Finally, **children with disability continue to be denied opportunities and access to specialised education**, a service that was requested by both men and women: *“Adult man 1: There should be a centre to provide care for children. Long ago we used to have a school for people with disabilities and many kids graduated from it, and now we have four kids who are blind, and they work in electronics. Adult man 2: They can go to school and be educated and become an integral part of society. Education is key”* (Adult men, Ar-Raqqa sub-district, Ar-Raqqa). Even when educational opportunities are available, the parents of children with disabilities expressed fears over discrimination and lack of specialised care: *“What could decrease violence is to integrate our kids into safe spaces with other kids but that won’t work in a school that has 1,000 students”* (Mixed gender group with a focus on persons with disabilities, Hama sub-district, Hama).

Child protection

Child labour

“Child labour is violence itself.” (Adult woman, Ar-Raqqa sub-district, Ar-Raqqa)

Child labour continues to be widespread: *“One of the worst phenomena that have spread in these circumstances is child labour, as there are a large number of children working, whether boys or girls”* (Adult woman, Kisreh sub-district, Deir-ez-Zor). Children of all ages work in various industries and jobs such as agriculture, construction, carpentry, housework, car repair workshops, collecting plastic or metal scraps, selling goods in shops or streets, and begging. Both adult and adolescent participants agreed that the most dangerous type of work children can be involved in is armed conflict through recruitment by various armed actors, as it exposes them to injury and death: *“Children also participate in hostile works and holding weapons, and this leads to many risks and leads to death or disabilities as they don’t know how to use weapons”* (Adolescent girls, Maaret Tamsrin sub-district, Idleb).

There are several gender factors that influence the type of labour children are involved with, based primarily on a community’s perception of gender-specific work. For example, some forms of labour are seen as more suitable for boys than girls, and vice versa. Societal views assume that boys – regardless of their age – are stronger physically and psychologically than girls, and

therefore, can be involved in dangerous manual labour such as blacksmithing, carpentry, or auto-mechanics: *“Child labour is spreading on a daily basis in our society, as we see girls working in agricultural fields and streets as well [street hawking] and some children practice dangerous professions like blacksmithing, but this is limited to boys”* (Adolescent girl, Maaret Tamsrin sub-district, Idleb).

Gendered ideas about who can be a family’s breadwinner are also enforced on boys early on in their childhood: *“It is generally accepted that when the boy reaches 12, he must learn a profession with his uncle, father, or grandfather. The important thing is to learn to take responsibility. They work in transporting goods, transporting stones, and cutting tiles. Now we hear about centres that teach children a profession or a skill, but the parents are not convinced. Their work brings money and this is the purpose, to learn and earn money, and even if he is tired, it is forbidden to miss his work”* (Adult woman, Al-Bab sub-district, Aleppo).

Meanwhile, adolescent girls are driven towards housework, sewing, selling sweets in the street, assisting in selling clothes or perfumes in shops, picking garbage, and other forms of labour that are frequently divided by age as well: *“Yes, girls work, and certainly there is a difference. Girls work according to their age, if they are adolescents they work in markets. Girls from 8-12 sell sweets in streets [...], from 12 years old they work in farmlands. Some young girls search in garbage and collect plastic bags; [...] this work is for young girls and they also work in begging which became very common in our community”* (Adolescent girls, Azaz sub-district, Aleppo).

Some families attempt to avoid girls’ outdoor labour due to their awareness of the sexual violence that girls are subjected to, including sexual harassment, exploitation, and society’s shaming of a girl if she is out unaccompanied for a long time or if she is sexually abused: *“Her relatives look badly on her because she enters homes that she does not know [...] They say that she doesn’t really clean houses that she might be doing another job”* (Adolescent girl, Idleb sub-district, Idleb). This also leads the family to better tolerate and justify boys’ outdoor labour: *“If I had a boy instead of a girl, I could have sent him to work and support the house financially, and support me, but because I have a girl, I fear for her and I do not let her work, but it is normal for a boy over the age of 12 to work”* (Adult woman, Al-Bab sub-district, Aleppo).

However, displacement and poverty challenge the rules on gendered child labour: *“In most families, male children are working, but if the family is very poor, all members of the family work”* (Adult man, Al-Hasakeh sub-district, Al-Hasakeh). Additionally, the disability of a breadwinner or an adult male in the family contributes to child labour: *“My younger brother is 11 years old and he works on construction sites. The other is 13 years old and he works in wholesale. We are forced to work. The father is old and the older brother has a disability and life is difficult”* (Adolescent girl, Al-Bab sub-district, Aleppo).

Working children are not only subjected to hazards that may cause them injury and place them at risk of

sexual abuse, but they are also deprived of education: *"They work because their mother or father is dead and they have no provider, and it is a must for them to work, and that affects them negatively as they might not finish their education and end up not knowing how to read or write as kids, and as adults too, and that's because they were forced to work"* (Adolescent boys, Ar-Raqqa sub-district, Ar-Raqqa). Additionally, MSNA survey data shows that the older a child is, the more likely she or he will be forced to drop out of school in order to work. Although some did not see child labour as a widespread phenomenon, 62% of communities surveyed agreed that adolescent girls between the ages of 15-17 drop out of school in order to work, while that number jumped to 84% in relation to adolescent boys of the same age. After this sentence insert sentence: For the age group 12-14, 42% of communities identified this issue for adolescent girls, while 60% for adolescent boys. The difference between adolescent boys and girls is additionally explained by the increased likelihood of early marriage for adolescent girls over adolescent boys. Early marriage is reported as "very common" by 17% of communities for girls 12-17, whereas this percentage is only 2% for boys of the same age.

Displacement once more increases the likelihood for children to skip school in order to work: *"As for educational services, there is simply not enough capacity to cater to all the IDPs that have arrived in certain areas, which is leading families to deprive their girls from schooling and forcing them into labour (e.g. in agricultural lands)"* (GBV expert, Turkey Cross Boarder). Long-term consequences of child labour for girls and boys are the loss of childhood and the likelihood of being trapped in poverty, which increase risks of violence against them: *"Child labour affects them greatly, it is ruining their future, and we know that, but they must manage. Parents send their children to work and create justifications"* (Adult woman, Al-Bab sub-district, Aleppo).

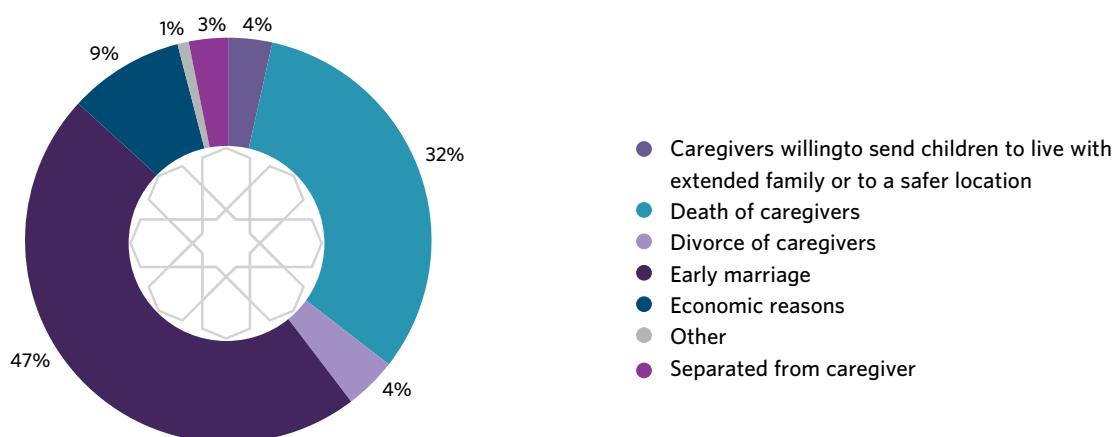
Unaccompanied and Separated Children

War and displacement continue to leave significant marks on the make-up of a family unit. A leading cause for the abandonment of a child by their biological parents was reported to be the death of one of the parents, followed by the divorce of a parent and/or their remarriage:

"Yes, there are those whose parents died, and there are those who divorce the mother, and the new wife does not accept the child, so he goes to his uncle or grandfather even though his father is alive, and there are those who lost their family and were lost during the displacement. There are those who are kidnapped and are made to live in places to exploit them, and there are children who have gone to neighbouring countries to find better human rights, which don't exist in our country. Their lives are miserable. They do not receive love, affection and education. They are deprived of everything [including] the so-called warmth of the family and human rights" (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh).

Widows or divorced girls and women who remarry sometimes face opposition from their new husbands who do not want to care for children from a previous marriage. Therefore, children are most frequently sent to live with their grandparents or relatives: *"Often these children are cared for by someone from the family, for example, the uncle, aunt, or maternal uncle or grandfather's house"* (Adult woman, Idlib sub-district, Idlib). As already noted, adolescent girls in particular are seen as an added burden when one of their parents is remarried. During the MSNA exercise, 39% of communities noted that girls (ages 12-17) have been separated from their families, while 29% mentioned family separation of boys of the same age. When family separation was mentioned for adolescent girls, 44% of communities mentioned early marriage as the reason.

Graph 7 - Type of Events leading to Family Separation for Girls



A further risk that children, and particularly girls, face when a parent is widowed, remarried, or migrates elsewhere, is abandonment: "In one known case, a stepmother kicked out her two stepdaughters, 12 and 14 years old, after living with them for more than seven years. According to their aunt, she said that they are not Muslims because she is not sure who their father is. She could not find out his aqida [religious belief system] because he is in prison in Hasakah. So she does not want to take care of them until they pass a religious exam to prove to her they are Muslims. They have nowhere to go so I took them to live with me."⁵³

Abandonment exposes children to risks of child labour and sexual abuse and, in the case of adolescent girls, to early marriage as a coping mechanism, therefore trapping the girl in a cycle of violence: *"The most difficult thing is those people who live without a father or a mother. In our family, there is girl whose father divorced her mother and travelled to Turkey and her mother got married and went to [government-controlled] areas and the girl stayed between the house of her aunt's husband and her grandmother's house, and they married her at the age of 13 years. The girl is tired. It is children who are most affected. No one asked about this child, how does she live? Is she able to take responsibility for a family at this age?"* (Adult woman, Al-Bab sub-district, Aleppo).

Another reason for abandonment is if the child was born as a result of rape, sexual relations outside of the context of marriage, or if the father is unknown: *"We had also cases of new-borns as result of rape that needed child protection support for alternative care"* (Expert FGD, Turkey Cross Border). In such cases, the child can be abandoned at birth: *"There are many children without parents, especially after the displacement and the marriage of women to ISIS members, and they did not know where their fathers were"* (Adult woman, Al-Bab sub-district, Aleppo).

Abandoned children can form their own child-headed households, or in case of the presence of an orphanage, the community may redirect them there. However, they remain at risk of neglect and abuse: *"Often organisations and associations concerned with separated or unaccompanied children protect and care for these children, provide them with a safe place, food and enrol them in schools, as the survival of these children alone without parents or these organisations makes them vulnerable to danger, exploitation and being dragged into terrorist acts, or exposes them to sexual exploitation, kidnapping or organ trade"* (Adult woman, Kisreh sub-district, Deir-ez-Zor).

General Protection

Housing, Land, and Property

"Who lives in their own house?! Almost half of Raqqa is destroyed and most of us do not live in our own home." (Adult woman, Ar-Raqqa sub-district, Ar-Raqqa)

War and displacement continue to effect women's and girls' access to secure housing. Across Syria, 74% of internally displaced households who own or owned property in their place of origin prior to displacement report that their property was damaged or destroyed.⁵⁴ Adult women and men also reported destruction and looting of their properties, and their inability to access it either due to lack of safety or due to its confiscation by armed groups: *"There is a problem in documenting a property even in the presence of its owner. Armed groups impose their control over the property of the residents and impose rents on these properties as if they belong to them"* (Adult woman, Afrin sub-district, Aleppo). Lack of documentation and proof of ownership emerges as the key obstacle to maintaining or reclaiming one's own land or property: *"When I was displaced from my house, I didn't take any property document that proves my identity or my ownership of the house and now I suffer a lot without such documents"* (Adult woman, Harim sub-district, Idlib). In addition, disputed ownership, either due to disagreements over inheritance, rent, or the unlawful occupation of land or a house were frequently discussed as common obstacles to securing housing: *"There are many problems in lands and properties as some people take properties of others by force. For example, when the father dies, the older son takes the full inheritance share of his brothers and sisters"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Women and adolescent girls are discriminated against in land and housing ownership opportunities. Typically women do not own much land or property, but in the rare cases that they do or when they are entitled to inheritance, they face an onslaught of gender-based discrimination that effectively deters them from claiming their rightful inheritance, and can be subjected to social stigma and violence: *"Usually when a woman claims her right to her inheritance from housing or land, or her inheritance in general, it is like committing a crime or it is a shame for her and they reject her"* (Adult woman, Kisreh sub-district, Deir-Ez-zor). Women are subjected to pressure from their families to give up their ownership of property or their rightful inheritance. Several women expressed that they face a difficult and unfair choice between losing their property or losing ties with their families who perceive standing up for their right as shameful. Therefore, they are frequently pressured into making a decision that pleases the family: *"I cede my rights because I don't want to lose my family" and "I would die if my family stop talking to me, so I cede my share"* (Adult women, Azaz sub-district, Aleppo).

53 Mironova 2020. Life inside Syria's al-Hol camp. Available at: <https://www.mei.edu/publications/life-inside-syrias-al-hol-camp>

54 Humanitarian Needs Assessment Programme (HNAP) (2020). IDP Report Series 2020: Shelter Conditions.

Widows are particularly susceptible to losing their inheritance from their deceased husbands due to lack of documentation of joint marital property, discrimination and exclusion from inheritance, and social stigma when seeking legal redress, which exposes them to the risk of homelessness: *"When my husband died, there was no paper proving that the house was mine, so I was expelled. I tried to go to the courts to prove that the house is my right and the right of my children, but the people of the estate started talking about me. How do you enter courts when you are a widow?"* (Adult woman, Al-Bab sub-district, Aleppo).

Displaced and divorced women and girls, as well as widows, are at a higher risk of losing their homes and rented property due to the absence of a male figure who could support their claims and intervene on their behalf in a patriarchal setting. In addition, the lack of written and binding contracts exposes women to poverty and homelessness when renting: *"Renting houses or selling houses, most of them are done by word of mouth, without paperwork or contracts. When a problem occurs, there is nothing to prove that this house is rented or sold. The poor woman who has no husband loses everything"* (Adult woman, Al-Bab sub-district, Aleppo). Women and girls also face higher rates of eviction such as in north Syria "where nine percent of the in-camp female-headed households have been evicted".⁵⁵ Widows and divorced girls refrain from engaging in disputes, as they often face increased risk of violence if they do: *"They don't dare to get involved because if they discuss such topics, they will be in trouble and hear bad insults and maybe get beaten"* (Adolescent girl, Basira sub-district, Deir-Ez-Zor).

Finally, persons with disabilities were mentioned to be systemically kept out of inheritance or property ownership, further increasing their social vulnerability and risk of homelessness: *"If normal [sic] people are not able to obtain their rights, then how would vulnerable groups get theirs? [...] If there is a person with disability at home the second brother would be the one who takes all the rights of this person"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Durable Solutions

While women were frequently included in decision-making regarding the future of their family, they reported having a weaker role and less of a say in the final decision: *"These are purely masculine societies, the first and last word is for the father or the brother, and within al-Hol community, the word of father and brother is the first and last. But in the event that there are no males in the house, the mother becomes the final decision-maker, even if her decision is not in the interest of her daughters"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh). However, experiences within the same focus group also differed: "Women even participate in discussions about political matters within the family. This has become normal for women" versus *"In my opinion, the reality is quite the*

opposite, especially among the displaced, the woman does not participate in anything but receives orders. The man comes at any moment and says to her: take your things, we will go from here, without knowing where to go" (Adult women, Idleb sub-district, Idleb).

Women's experiences also differed when it came to impactful decisions such as returning to their home or integrating into the community they were displaced in. In some families, women had a strong role in decision making: *"I have the authority to decide in accordance with my husband and children. We have discussed the idea of returning home to our house and lands and family, and my husband agreed on this, as we make decisions together"* (Adult woman, Harim sub-district, Idleb). Again, in contrast, many women expressed having little impact over decision making in their families which is exacerbated by the continuity of war and displacement: *"I tried to settle down, but I hesitate. There is no safety. We left several homes and areas. This is why my husband refuses to think about stability or for us to start furnishing the house"* (Adult woman, Al-Bab sub-district, Aleppo).

Adolescent girls were systematically ignored in decision making, as well as any members of the family with a disability: *"We don't have any opinion in our parents' houses"* (Adolescent girls, Basira sub-district, Deir-ez-Zor). In contrast, adolescent boys were being raised to take an active role in decision making in their families: *"Adolescent boys make an impact on our men and they listen to them and consider their opinion. Adolescent girls have no word or opinion"* (Adult woman, Basira sub-district, Deir-ez-Zor).

When discussing a resolution to displacement and, in particular, the decision to return to their original homes, women and girls voiced a range of concerns: *"Some families have adapted to the situation of displacement, and some families have tried to return to their homes to get rid of the suffering of displacement they are living in, but it is not that easy. There are several reasons that prevent them from returning, the most important of which is the forced conscription and the fear of women for their husbands and children as well as of the destruction and burning of their homes or the lack of safety in their places of origin"* (Adult woman, Kisreh sub-district, Deir-ez-Zor).

The lack of humanitarian assistance in their regions of origin was considered a barrier to return, especially for categories at risk or more dependent on external assistance: *"Life differs between the camp and returning back to the city. In the camp, I can have bread but if I return I won't be able to have bread or water, especially for old people or those with health conditions or girls"* (Adult man, Kisreh sub-district, Deir-ez-Zor).

Mine Action

All participants agreed that children are the most at risk of injury or death from an unexploded ordnance they find and play with. Children and adolescents working in farming, and metal and scrap collection are also exposed to the risk of coming across explosive

55 Humanitarian Needs Assessment Programme (HNAP) (2020). IDP Report Series 2020: Shelter Conditions. P.8.

hazards and not recognising them as life-threatening. Adults expressed concerns about the physical and psychological impact that bombings and explosive ordnances have on their children, which can lead them to restrict their movement or even their access to education: *"We heard from our neighbour that her cousin's son, their son, died because of a mine. He was close to the school. The people of the village did not send their children to school for two weeks. Children are the most vulnerable people to the danger of explosives"* (Adult woman, Al-Bab sub-district, Aleppo).

As explosives can cause serious injury and physical disability, girls and women can easily be pushed into further vulnerability, poverty, and insecurity as a result: *"There were men who were injured in the explosions, but sometimes there were women, and they ended up having disabilities. Those women and girls would be trying to find copper as a source of living, and they would end up tripping on a mine"* (Adolescent boy, Ar-Raqqa sub-district, Ar-Raqqa). Physical disability increases girls' and women's risk of experiencing GBV: *"Violence is very different when it comes to us because we are a vulnerable and weak group, and we are generally not able to avoid injustice or defend ourselves against a man"* (Adolescent girl with disability, Deir-ez-Zor sub-district, Deir-ez-Zor). In addition, girls and women with disabilities face restrictions in their movement, limits in their physical access to education, services, and distributions, and social discrimination: *"I am scared of letting my daughter outside, because you cannot imagine how people look at us"* (Mixed gender group with a focus on persons with disabilities, Hama sub-district, Hama).

Shelter and Camp Management

In concert with previous reports, camps continue to be reported as locations where various forms of GBV against girls and women increase significantly (see also Text Boxes above on Locations of Violence, Affected Populations and Risk Factors): *"We think those living in camps have greater GBV risks than other people and we are focusing on these groups and those in need in these areas"* (GBV expert, Turkey Cross Border). GBV experts noted lack of water and hygiene kits, discrimination against women by camp managers, and also further restrictions on girls and women's movement and limited access to services as forms of GBV that girls and women face: *"Through our regular safety audits, we observed that in some areas, there are no services so women and girls need to leave the camp and travel long distances to access services which is exposing them to various risks. In some areas, husbands and male family members do not allow their female members to leave the house at all - sometimes under the threat of 'honour killing' if they do so"* (GBV expert, Turkey Cross Border).

Overcrowding continues to be a common phenomenon as 25% of internally displaced households in Syria mentioned "lack of space" in their shelter as a primary

concern.⁵⁶ In addition, in non-camp settings, "18 percent of female-headed IDP households share their shelter with at least one other household - which is much higher than the rate for male-headed IDP households (7 percent)".⁵⁷ The subsequent lack of privacy, as well as scarcity of resources, the wider context of economic deterioration, lack of employment opportunities, and COVID-19 restrictions, are all factors that significantly increase girls and women's exposure to GBV: *"As a result of the recent displacements and the gathering of more than one family in the community centres and camps, and more than one family gathered in one residence, this has led to an increase in violence, especially domestic violence"* (Adolescent girl, Harim sub-district, Idlib).

The lack of privacy also creates added psychological distress for married women with regard to their sexual relations with their husbands: *"With regard to personal hygiene and shelter, the tent is small and does not accommodate all daily and private needs. There is no kitchen, bathroom, and private space for intimacy, and this exposes women to more psychological pressure"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

As already mentioned, women are also exposed to sexual violence and exploitation when seeking to find shelter, leave the camp, rent a house after displacement, or when attempting to return to their properties: *"There is great difficulty in returning to the looted property because the armed factions control it and refuse to return it, and if there is a chance, then this requires huge amounts of money that are twice the amount due. In addition to the sexual exploitation of women in exchange for returning these properties or asking men to join them"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

WASH

Water shortages were broadly reported, especially in northeast Syria, and particularly in Al-Hasakeh governorate. Adolescent girls and women face several barriers when accessing water and bathrooms. Even when a camp receives WASH supplies, the scarcity of water and its concentration in one area raises tensions and leads to inter-communal violence in camps among women: *"In addition to allocating one tank for more than one tent or joining the tank to the tent itself inside the personal space. It creates problems between women and causes them to quarrel between each other"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

In mixed camp settings, 33% of households share access to toilets,⁵⁸ which are often unlocked, improperly lit, lack security, and are overcrowded. Even in non-camp settings, "30% of female-headed IDP HHs are sharing access to functional toilets (11 percent for male-headed

56 Humanitarian Needs Assessment Programme (HNAP) (2020). IDP Report Series 2020: Shelter Conditions. P.1.

57 Ibidem. P.3.

58 Humanitarian Needs Assessment Programme (HNAP) (2020). IDP Report Series 2020: Shelter Conditions. P.3.

IDP HHs)".⁵⁹ Such conditions expose girls and women to sexual harassment and cause added psychological distress: *"The camps and shelters increase the violence because every five families share one bathroom and most of the bathrooms are without lock or doors and without a light which increases the risk for women and girls to be subjected to harassment, whether by touch or by sight"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Distributions: food and non-food items

Across all governorates, adolescent girls and women discussed facing sexual harassment, exploitation, abuse, and psychological pressure during distribution of food and non-food items (see also chapter on Sexual Exploitation and Abuse above). Amongst their concerns, women listed: *"Being exposed to harassment and sexual or psychological abuse when receiving aid in crowded places, sexual abuse, being photographed as they receive their basket, and sharing personal phone numbers for an extra basket"* (Adult women, Sarmin sub-district, Idlib). The high risk of SEA during distribution leads many women to feel unsafe: *"Most female focus group participants said that they rarely felt safe, however, some participants said that they feared exploitation while getting much needed humanitarian services, such as food assistance"*⁶⁰. For adolescent girls specifically, accessing distribution points comes at the risk of exposing themselves to communal shaming due to accessing male-dominated places, which can deter them from seeking needed aid: *"Adolescent girls in the whole village are forbidden to go out from the door of the house to places of distribution or gatherings. It is shameful for a girl to go out as long as men are present"* (Adult women, Basira sub-district, Deir-ez-Zor).

Adolescent girls and women living in displacement camps also expressed concerns about their inability to access aid due to favouritism and gender-based discrimination: *"Women are exposed to exploitation at work and during the distribution of food and non-food aid, as those in charge of the service (men) exploit their position [...] and this applies when distributing humanitarian aid, as favouritism and relationships play a role in that"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh). Additionally, forms of systemic discrimination against women appeared in distribution: *"This year we have had many cases of women reporting that local councils are depriving them of assistance either for no reason or because they want part of the assistance for themselves. We came across this during distributions of dignity kits"* (GBV expert, Turkey Cross Border).

Distance also proved to be a barrier to accessing food

and non-food item distribution not only for girls and women who fear for their safety, but also for older people and disabled persons: *"There is no place designated for distributions, it is mixed and some are subjected to verbal abuse and harassment by taking their turn. Those who suffer most when accessing services are the old people, divorced women, and people with health problems. Some women lack the ability to walk a long distance in order to get services. They should be helped by providing a designated car for them on distribution days"* (Adult women, Al-Hasakeh sub-district, Al-Hasakeh). Among further suggestions to decrease the risk of violence and discrimination against people with disability during distribution was: *"Allocating a day for people with special needs"* (Adolescent girl, Idlib sub-district, Idlib).

In some governorates like Ar-Raqqa, access to basic food and bread was very limited. For divorced and widowed women as well as adolescent girls and women without a male companion, standing in queues for long hours exposed them to higher risks of harassment and exploitation: *"I have a complaint about something important, which is the bread bakeries. It is difficult to get bread, and the quality of the bread is bad, and the line is so long, and the bakery locations are very far. Girls have to stand in line as well, and they sometimes have to stay waiting until 4pm"* (Adolescent boy, Ar-Raqqa sub-district, Ar-Raqqa).

⁵⁹ Ibidem.

⁶⁰ World Vision 2020. Northwest Syria Gender Analysis. A Comprehensive Gender and Age Analysis for the Northwest Syria Humanitarian Response. Available at: https://reliefweb.int/sites/reliefweb.int/files/resources/book%20world%20vision%20%20logo%20print_compressed.pdf

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6 Hopes and dreams of women and girls: recommendations

The impact of war, displacement, economic deterioration and COVID-19 on the lives of Syrian women and girls in 2020 has been brutal. Nonetheless, ten years on, women and girls are still demonstrating incredible resilience and strength in facing these dire conditions: *"The feedback from women and girls is very clear [about] what they want and what they expect. They come with concrete ideas and there are a lot of spontaneous initiatives. For example, during the lockdown in a camp, a group of women started sharing their mobile phones and spread the news among other women and girls that they can use those phones [to access services]; so such self- and community-based initiatives show resilience"* (GBV Expert, WoS). Many women and adolescent girls have developed a greater awareness of their rights and new strategies to respond to the violence they face and protect other women and girls from GBV: *"I defend myself and don't remain silent. I use dialogue and argument and demand my rights"* (Adult woman, Basira sub-district, Deir-ez-Zor).

Women's and girls' resilience in the face of conflict is particularly evident when they express their hopes and wishes for the future: *"Adolescent girl 1: I seek to learn and work as a doctor to be able to help people in this war and crisis. Adolescent girl 2: Me too, I want to become an architect to build more secure houses"* (Adolescent girls, Harim sub-district, Idleb). The impact of the violence they experience in their everyday life is visible in their desire to help their community be free of violence: *"[I want to] secure the basic needs of children and adolescents so that they are not exposed to violence, labour or exploitation"* (Adolescent girls, Al-Hasakeh sub-district, Al-Hasakeh).

Some expressed their wish to return to their home while confronting the harsh reality of a continuously unstable security situation: *"My dream is to study and return to Deir-ez-Zor, so we did not buy a house, but rented one instead, and my brothers started working. I am thinking about treating my leg, and taking courses, but the health situation is deteriorating and the security situation is uncomfortable ... the security situation is exhausting"* (Adolescent girl, Al-Bab sub-district, Aleppo).

In recognition of their resilience, and in line with the report's feminist approach, this report concludes by centring once again the voices of women and girls in order to outline their hopes and dreams for a better future and bring forward their recommendations for humanitarian actors to contribute to their safety and wellbeing.

1. Expand the reach and accessibility of GBV specialised programmes

The voices of women and girls documented in this report clearly point to the essential role that GBV specialised services play in responding to instances of GBV: *"Sometimes we turn to women in safe spaces for women and girls to complain to them about our concerns"* (Adolescent girl, Kisreh sub-district, Deir-ez-Zor). The role of WGSS was specifically highlighted: *"women centres play a major role in supporting women, especially when facing problems"* (Adult woman, Azaz

sub-district, Aleppo), alongside the advantages of GBV case management: *"Women and girls are the most vulnerable groups to violence in [our] society, but [thanks to] the presence of safe spaces for women and girls and awareness-raising sessions, women turn to those spaces to attend awareness sessions. Through these sessions, case management services are introduced and women and girls turn to these services to obtain support and advice that reduces the violence practiced against them"* (Adult woman, Kisreh sub-district, Deir-ez-Zor).

However, many women and girls, and in particular women and girls who face compounded forms of discrimination such as those with a disability, and those who are widowed or divorced, do not currently have access to GBV specialised services. Women and girls recommended the establishment of more WGSS: *"The humanitarian organisations should establish a big number of these centres in order to give the opportunity to everyone in the society to visit those centres"* (Adolescent boy, Harim sub-district, Idleb), with particular attention paid to the needs of the most at-risk members of society: *"There must be centres specialised in women issues, with particular emphasis on girls, widows and divorced women, who are the most vulnerable"* (Adult woman, Harim sub-district, Idleb).

Women and girls had clear suggestions on how to improve the accessibility of GBV services, especially for groups that are currently underserved, such as older women, widows, divorced women and girls and women and girls with a disability. The provision of free and safe transportation, or significantly reducing the distance of each community from the nearest WGSS, was considered essential by a vast majority of women and girls: *"There could be transportation provided in the villages, or for the service centres to be located near the residences, or to have mobile teams that visit houses and offer the services as this would be better for seniors, women and girls, and people with disabilities"* (Adolescent girl, Qourqeena sub-district, Idleb). Several recommendations were made to provide mobile services to reach groups that face movement restrictions, either because of physical impairments or social norms: *"Categories of people with disabilities, the old people, divorced women, widows and girls can be supported by establishing a mobile team that visits them. They would become in reach through field trips as well as through awareness sessions and brochures"* (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh).

Access to GBV services could be improved through the use of hotlines: *"Organisations can also assign a number to contact those who are afraid to come or complain"* (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa), though remote and digital solutions might not be appropriate for some women and girls: *"Yes [some groups have problems accessing online services] due to the inability of older people to use modern electronic devices and to communicate remotely"* (Adolescent girl, Harim sub-district, Idleb).

Summary of women' and girls' recommendations:

- Increase the number of WGSS and other GBV specialised services.
- Provide free and safe transportation to access GBV services.
- Provide mobile GBV services for women and girls that cannot access safe spaces.
- Provide GBV specialised services via hotlines and online platforms for women and girls who have access to technology.

2. Address the root causes of GBV: patriarchal norms and gender-based discrimination

Women and girls voiced their hopes for the transformation and elimination of patriarchal norms that support their devaluation and subjugation, and condone GBV against them: *"I hope for the discrimination between males and females to end, through spreading awareness"* (Young woman, Hama sub-district, Hama). Adolescent girls also expressed their hopes for empowerment: *"I wish that girls have a bigger role in society, and for everyone to trust our abilities"* (Adolescent girl, Afrin sub-district, Aleppo) and their wish to *"change the way boys think about girls, which is in a bad way; that our lives are only in the kitchen and we can't do anything in life"* (Adolescent girls, Basira sub-district, Deir Ezzor). The same sentiments were echoed in hopes for a change in society's sexist attitudes towards divorced and widowed women and girls, who are – as the reports demonstrates – subjected to much social judgement, rejection, and GBV: *"[We wish for] a change in the way society looks at widows and divorced women"* (Adolescent girl, Azaz sub-district, Aleppo).

In order to effectively combat social norms that sustain gender inequality and GBV in their communities, women, girls, boys and men demanded increased investments in awareness raising and other GBV prevention activities: *"We really would like to take part in activities that stop violence. I would feel happy and strong to be able to stop violence from happening and for them not to control us. And I want my voice to be heard and to reach to everyone that is not aware"* (Adolescent girl, Damascus sub-district, Damascus). Boys and men also supported the expansion of GBV prevention activities: *"There are additional preventive methods like spreading the awareness, social mobilisation and advocacy against early marriage by showing its downsides like the lack of harmony, divorce and abuse"* (Adult man, Idleb sub-district, Idleb). Recommendations included the strengthening of existing GBV prevention activities through more structured and longer-term engagement with women, girls, boys and men: *"One of the girls indicated their desire to set up awareness sessions and workshops to attend more than once, because she thinks that this would be more useful than having a single session where topics are shortened"* (Facilitator of adolescent girls group, Al-Hasakeh sub-district, Al-Hasakeh).

Summary of women' and girls' recommendations:

- Design and implement long-term, structured GBV prevention initiatives that address unequal gender norms in society.
- Involve adolescent girls and boys in the implementation of GBV prevention activities including raising awareness about GBV.

3. End early marriage and ensure access to education

Countering the practice of early marriage was a strong priority identified by many women and, particularly, adolescent girls who not only wanted to avoid it themselves, but also wanted to actively engage in spreading awareness about its dangers as a form of GBV: *"The participants mentioned that if they were able to change something in this society, they would definitely prevent early marriage and make education more mandatory so that they would not leave their education and get married or work. And that by their participation in child protection activities, awareness raising sessions and other similar activities, they will be more aware of their rights and reject violence directed at them"* (Facilitator of adolescent girls group, Kisreh sub-district, Deir-ez-Zor).

Education was considered as the main alternative path to early marriage: *"Continuing education and preventing early marriage until the girl is ready physically and mentally"* (Adolescent girl, Homs sub-district, Homs), as well as other forms of GBV: *"Schools can definitely protect children against violence"* (Adolescent girl, Qourqeena sub-district, Idleb). Making education mandatory was suggested as a strategy to prevent early marriage, together with instituting legal consequences for parents and other actors involved in forcing girls to marry: *"Adolescent girl 1: things that might help decrease violence are making education mandatory; Adolescent girl 2: preventing child marriage by forbidding religious marriage under 18 years old; Adolescent girl 3: applying sanctions on people responsible for early marriage"* (Adolescent girls, Jebel Saman sub-district, Aleppo).

Access to education was by far the most pressing need that adult women and adolescent girls across all governorates agreed upon. Adolescent girls in particular hope to start, return, or continue learning in schools. When asked *"What role do you see yourself playing in making change in the community?"* a group of adolescent girls in Deir-ez-Zor responded: *"We [want to] study and finish our school and show the world that girls are not only for kitchens and farmland, but that they also can be important people in society"* (Adolescent girls, Basira sub-district, Deir-ez-Zor). A young woman echoes their hopes and views education as her right: *"[I want] the right to education: to take my full right of education and employment"* (Young woman, Hama sub-district, Hama).

Summary of women' and girls' recommendations:

- Prioritise girls' access to education as a human right and as a preventive measure against early marriage and other forms of GBV.
- Involve adolescent girls in early marriage prevention initiatives.

4. Reinforce skill building, vocational training and economic empowerment opportunities for women and girls

As a complement to social norms change initiatives to prevent GBV, adult women and adolescent girls insisted that learning a skill can be a pathway toward economic sustenance and self-empowerment that would help in minimising both the occurrence and the impact of GBV: *"When we work, we face less violence"* (Young woman with a disability, Damascus sub-district, Damascus). Creating women-only employment opportunities for divorced and widowed women and girls could bring about a significant improvement to their lives, including by limiting their exposure to sexual exploitation and other forms of abuse: *"For the women who are subjected to violence, I wish there was a facility where they could go and work in so that they become financially secure. [...] this way she would be protected from being used by an employer to give her a job and to want something else from her in return"* (Adult woman, As-Sweida sub-district, As-Sweida). Therefore, adolescent girls and adult women continue to seek support for economic independence: *"Adolescent girl 1: We need support, such as loans from associations or offering payments in instalments for me to buy a laptop so I can establish my business. Adolescent girl 2: Providing job opportunities for young people. Adolescent girl 3: We need channels for us to be able to sell the things that we make such as having more fairs"* (Adolescent girls, Damascus sub-district, Damascus).

Livelihood support such as vocational training or start-up grants were specifically requested for widows and divorced women to enable them to safely cater for themselves and their children: *"Supporting widows and divorced women and training them on professions to help them provide for their families and give them back their self-confidence"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh). Professional training was also considered a priority for people living with a disability: *"We ask for something that would be beneficial for them so that they can rely on themselves and fill their free time such as teaching them a profession that is suitable to their situation"* (Mixed gender group, Hama sub-district, Hama). Adolescent girls also stressed the importance to participate in both education and professional learning: *"To change the camp, and how girls and women are treated to provide them more care. Improving service provision to include professional centres for girls. We wish to be part of this and carry on our education"* (Mixed gender adolescent group, Kisreh sub-district, Deir-ez-Zor). Overall, ensuring that livelihood programmes opened up concrete opportunities to make a living, instead of just teaching a skill, was considered an important priority: *"Providing job opportunities and not to limit the service to learning a profession only. [...] Distributing equipment at the end of the course, and not just the certificate"* (Young women group, Deir-ez-Zor sub-district, Deir-ez-Zor).

Summary of women' and girls' recommendations:

- Provide opportunities to learn skills, access safe employment and business start-ups for women and older girls as part of a multi-pronged approach to

preventing GBV and supporting women's and girls' coping strategies.

- Prioritise inclusion of women and girls facing multiple forms of marginalisation in livelihood and skill-building activities, including widows, women and girls who are divorced, women and girls with a disability. Establish dedicated programmes for these groups when appropriate.

5. Improve monitoring of humanitarian activities and recourse mechanisms to prevent and respond to SEA

Widespread frustration with how humanitarian aid is being distributed and how it affects the safety of women and girls, e.g. *"aid has no controls and is distributed in an unfair way, and it exploits women"* (Adolescent girl, Kisreh sub-district, Deir-ez-Zor), led respondents to request closer monitoring of humanitarian activities and all the actors involved in them, including local authorities and non-traditional humanitarian actors: *"There must be control over those who provide humanitarian aid to protect the rights of beneficiaries against exploitation"* (Adolescent girl, Kisreh sub-district, Deir-ez-Zor). Monitoring of humanitarian distributions and activities was the primary demand of women and girls in relation to SEA, appropriately placing the responsibility for preventing these abuses on humanitarian actors: *"Organisations must supervise and control distributions in a better way"* (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh); and: *"Associations managers should be monitored, so that everyone gets the services they need"* (Adult woman, Homs sub-district, Homs).

Staff training was recommended: *"The staff that handle the distribution of aid needs awareness sessions as well"* (Mixed gender group, Jaramana sub-district, Rural Damascus), as well as employing women as staff in charge of distribution: *"There could be women who work with the humanitarian organisations, and they would distribute the relief packages among the women"* (Adult woman, Qourqeena sub-district, Idlib). These measures were considered especially important to prevent the sexual exploitation and abuse of highly marginalised population groups, such as women and girls with a disability, older women, divorced women and girls and widows who might otherwise be prevented from accessing aid: *"[They are] the most vulnerable to exploitation due to their inability to defend themselves, so there must be monitoring of the work of these people and to ensure that they receive their aid completely"* (Adult woman, Kisreh sub-district, Deir-ez-Zor). The employment of female staff was also considered critical to ensure the safety and dignity of marginalised women and girls: *"For widows and divorced women, there should be a woman responsible for registering names and distributing and not a man"* (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa).

Ongoing efforts to strengthen prevention and response to sexual exploitation and abuse are having an impact in terms of awareness: *"We know that there is a complaints system for the organisation (WhatsApp - Email) and brochures are constantly distributed in the camp with phone*

numbers and e-mails for complaints. In addition, sessions are held by the protection teams about the mechanism of complaints and introducing the methods and approaches that can be used to file complaints" (Adolescent boy, Harim sub-district, Idlib). However, the effectiveness of these systems was questioned by community members: "If anyone wants to file a complaint against those who make the distributions, no one listens to them, but most of the time they deny them the aid or ask them for something in exchange for giving them the service, whether free or not, such as sharing half their allocation, providing personal services, or even sexual exploitation" (Adolescent girl, Kisreh sub-district, Deir-ez-Zor).

Fear of retaliation and of losing access to future aid was highlighted as a critical issue preventing women and girls who experience SEA from using the existing reporting mechanisms: "[widows and divorced women and girls] may be exposed to abuse and harassments without being able to speak out because they are in need of these aids" (Adult woman, Basira sub-district, Deir-ez-Zor).

Summary of women' and girls' recommendations:

- Implement effective monitoring and accountability systems to prevent SEA within the context of humanitarian assistance, including in situations where non-traditional humanitarian actors are involved.
- Increase the number of female staff involved in humanitarian distributions.
- Strengthen SEA reporting mechanisms to ensure they are able to effectively protect women and girls from further violence, including retaliation from the perpetrators, deprivation of humanitarian aid and stigmatisation from families and communities.

6. Address specific GBV risk factors for displaced women and girls within WASH, Shelter, Food and NFI distributions and other humanitarian sectors

When asked about factors that increase the risk of GBV, displaced women, girls, boys and men primarily pointed to the specific living conditions they faced after being displaced: "Certainly, there are matters that increase the risk of violence. Some girls added that places where the displaced are gathered, such as camps and shelter centres, and that health facilities are far from their place of residence, or they may be shared or without lights" (Adolescent girls, Al-Hasakeh sub-district, Al-Hasakeh). Overcrowding and the lack of sufficient facilities for the number of displaced households were commonly linked to incidents of GBV: "As a result of the recent displacements and the gathering of more than one family in the community centres and camps, and more than one family gathered in one residence, this has led to an increase in violence, especially domestic violence and in the streets due to overcrowding, in addition to the lack of job opportunities and child labour" (Adolescent girl, Harim sub-district, Idlib).

Collective shelters, where one is required to share accommodation and facilities with unrelated households, were considered particularly problematic: "In some cases there is increased violence while living with people who are not close because they are forced to share the residence, so the violence happens. I went once to a shelter I saw all of them together, so the violence becomes common and the bathroom is shared and the food as well" (Adult man, Ar-Raqqa sub-district, Ar-Raqqa). The need to share bathrooms, the lack of proper locks or doors and insufficient lighting at night made many WASH facilities unsafe: "The camp is small and the number of people in it is large and many problems occur when women go out to the bathroom at night. They feel afraid" (Adolescent boy, Idlib sub-district, Idlib). Lack of lighting was considered a risk factor affecting women and girls more generally within displacement camps and, in some cases, towns as well: "Lack of electricity in the streets increases the risk of harassment and violence" (Adult woman, Deir-ez-Zor sub-district, Deir-ez-Zor).

In response to the dramatic impact of these gaps in the provision of safe shelter, WASH facilities and other humanitarian assistance to displaced populations, respondents demanded that humanitarian actors more adequately plan and implement both shelter: "Increase the number of rooms within a residence for a single family" (Adolescent boy, Harim sub-district, Idlib), and WASH facilities: "If there were more bathrooms, the pressure will be reduced [...] We ask for humanitarian aid to make us bathrooms" (Adolescent girl, Idlib sub-district, Idlib).

In addition, women and girls made recommendations to make distribution sites safer and avoid sexual harassment affecting women and girls in mixed-gender queues: "Allocating special distribution days for women in order to avoid being harassed" (Adult woman, Azaz sub-district, Aleppo). Door-to-door distributions, which were piloted in some locations during the COVID-19 pandemic, were considered a safer option than mass distributions: "Allocating a place for women to be comfortable, and also during the distribution days, they are distributing aids to the tents and this is much better than going to the distribution sites" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Summary of women' and girls' recommendations:

- Provide adequate and dignified shelter to displaced populations residing both in camps and urban centres, limiting as much as possible the need for unrelated households to share the same shelter and facilities.
- Ensure that WASH facilities, and bathrooms in particular, are sufficient in number, gender-specific, provided with adequate lighting, secure doors and locks.
- Adopt alternative distribution approaches and risk-mitigation strategies to minimise risks of sexual harassment faced by women and girls at distribution sites.

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7 Analysis by governorate

Aleppo

Types of violence and risk factors

Girls and women experience several types of GBV in the governorate, and sexual violence in particular. In consistency with last year's findings, case workers reported the continued practice of **forced puberty** as a form of violence against adolescent girls. For example, a case worker in northern Aleppo recounted: "I had a young girl disclosing to me that she was forced to take medications and all she knows about them is that they speed up puberty"⁶¹. Women seek medications for their adolescent daughters who have not reached puberty yet in order to anticipate their marriage. Forced puberty is thus a risk for early marriage, sexual abuse, and negatively affects girls' physical and mental health through increasing chances of complications in development, pregnancy, and childbirth.

Across all districts, women and adolescent girls expressed concerns over and awareness of **early marriage** as a risk of violence against girls, and linked it to ongoing instability: *"War is the greatest violence practiced against the whole world. In our community, girls are married very young. My sister got married at the age of 13, and had twins babies at the age of 14"* (Adolescent girl, Azaz sub-district, Aleppo). Protection MSNA data confirmed that early marriage for adolescent girls between 12 and 17 years of age is a widespread concern, with 17% of communities indicating it is a very common practice for this age group, and an additional 45% of communities reporting cases of early marriage within the last three months although they do not consider this to be a widespread practice.

Girls use early marriage as a coping mechanism to escape **family violence**: *"But if girls face violence, they start wanting to get married so that they escape their father or brother's violence"* (Adult woman, Jebel Saman sub-district, Aleppo). Adolescent girls are forced into early marriage due to deteriorating economic consequences which leads their families to marry them off: *"They spare themselves from the girl's financial responsibility by marrying them"* (Adolescent girl, Al-Bab sub-district, Aleppo).

Women and girls in Aleppo continue to report **sexual harassment** in the street, camps, crowded places, distribution points, and at work: *"Boys are harassing girls in streets, I never go out of the house alone, because of harassment. I even started wearing a Burqa to avoid that and my mother wears it too for the same purpose"* (Adolescent girl, Azaz city sub-district, Aleppo). **Sexual exploitation and abuse** by men in roles of responsibility within the humanitarian response, such as camp managers or individuals involved in distribution, was also reported

widely in Aleppo during focus groups: *"I was subjected to [sexual harassment] by the management of the camp, while I was applying for a job"* (Adult woman, Atareb sub-district, Aleppo) and *"[we are concerned about] being exposed to harassment and sexual or psychological abuse when receiving aid in crowded places. [We face] sexual abuse – being photographed as we receive our basket – sharing our personal phone number for an extra basket"* (Adult woman, Atareb sub-district, Aleppo).

Women and girls also identified **displacement** as a key factor contributing to increasing the risk of facing GBV: *"Displaced women are exposed to harassment and abuse"* (Adult woman, Atareb sub-district, Aleppo). This is due to **discrimination against IDPs by host communities**: *"There is big discrimination between displaced people and residents"* (Adolescent girl, Azaz sub-district, Aleppo) and overcrowding: *"The number of displaced people is huge, and there are no longer enough places, therefore most people stay in camps and get exposed to violence"* (Adolescent girl, Azaz sub-district, Aleppo). Displaced adolescent girls were particularly concerned about being **denied education** due to their status: *"Displaced are more subjected to violence because they are new in the region. We were subjected to a lot of violence after displacement, we were refused access to school because we don't have IDs from Azaz council"* (Adolescent girl, Azaz sub-district, Aleppo).

Coping strategies and access to GBV services

Women linked **psychological distress** to the experience of displacement and **increased GBV** against women and girls: *"There has always been violence but after the displacement, it increased a lot. We started to see, live and hear new things. They started to give their daughters for marriage at the age of 12, no education, divorce became so common without a reason, neglect at home and the man doesn't allow the woman any rights. He threatens her to get remarried if her cooking is not good. Brothers hitting their sisters is justified by the fact that he has the right to educate her. In short, I mean that women and girls are more exposed to violence, the woman lives a constant nightmare of fear"* (Adult woman, Al-Bab sub-district, Aleppo). As in other governorates, women and girls cope with sexual harassment by **decreasing their movement and by changing their dress**: *"[I was exposed] to harassment because I wasn't wearing Burqa (Niqab), but I started wearing it to avoid men looking at me, and this changed my nature"* (Adult woman, Atareb sub-district, Aleppo).

Aleppo also experienced lockdowns and restrictions in movement during the pandemic with a mixed outcome on service provision: *"Services were still being provided at the centres during COVID-19"* (Adolescent girl with disability, Jebel Saman sub-district, Aleppo). Schools were specifically impacted as well: *"COVID-19 increased violence and prevented us from education" and "COVID-19 affected services, even education became online"* (Adolescent girls, Azaz city sub-district, Aleppo). Women and girls also perceived the COVID-19 pandemic to have increased GBV against them at home: *"COVID-19*

61 UNFPA and SRH 2020. Note about the consequences of the misuse of hormonal medication among little girls without direct medical supervision.

increased domestic violence due to the bad economic situation and the loss of jobs" (Adolescent girl with disability, Jebel Saman sub-district, Aleppo) and Change this quote to: "Everyone mentioned that violence rates are higher every year than the previous, some mentioned the COVID-19 pandemic has a role in generating violence" (Facilitator of adult women FGD, Al-Bab sub-district, Aleppo). Women in Al-Bab specifically mentioned **difficulty in reaching protection services**: "We have an urgent and massive need for protection services (to feel safe, we need services like any human being), but unfortunately, those arrangements are not available, there is no assistance or services. While Al-Bab is well served, there are no services in our region and surroundings, and they all demand us to go to the city" (Adult woman, Al-Bab sub-district, Aleppo).

Al-Hasakeh

Types of violence and risk factors

In concert with GBV trends in other governorates, girls and women face prevalent forms of violence including IPV and family violence, emotional and verbal abuse, followed by sexual violence including sexual harassment and exploitation. Amongst these, the recruitment of boys and girls by armed groups appeared to be a particular concern in Al-Hasakeh. Participants mentioned that **recruitment** of children by various armed groups is a common practice and the most dangerous form of **child labour**. Children mainly carry weapons and stand at checkpoints which subjects them to risks of violence, injury, and death: "The consequences for children participating in hostilities are always being in a state of fear and panic, insecurity, instability, and exposure at any moment to killing or even assault" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh). Both girls and boys are recruited: "There are many who participate in hostilities, including girls and boys, especially in the current situation, as we see many girls. These actions are no longer limited to boys, for example joining armed forces and severely beating others and shooting" (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh). The participation of boys in hostilities can have a gendered impact on girls and women too: "Yes, it is a big problem because the person who participates in the hostilities, his family is exposed to danger and surveillance, and if someone wants to take revenge on him, he may kidnap one of his sisters and sexually abuse her. The thing that encourages children to join the armed forces is carrying weapons and riding cars, as well as the attractive salary" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Girls and women identified **displacement** and living in camps as a central risk factor to experiencing GBV in Al-Hasakeh. Girls and women displaced in camp settings discussed feeling more vulnerable to sexual violence and exploitation. The absence of electricity, sharing tents, bathrooms without locks, and overcrowding, all contribute to an increase in sexual harassment and psychological distress: "The camps and shelters increase

the violence because every five families share one bathroom and most of the bathrooms are without lock or doors and without a light which increases the risk for women and girls to be subjected to harassment, whether by touch or by sight" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Other forms of widespread violence were also reported among women in camps, for example, fear of attack from other women: "Physical violence is very common among women" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Coping strategies and access to GBV services

Girls and women highlighted the importance of GBV and other protection services, how they seek their services while coping with violence, and the impact of their presence: "The existence of humanitarian organisations, and their focus on the role of women, the recognition of their rights, and the provision of awareness sessions, so women began to speak out, defending themselves and their rights and their presence in society: they are half of society not a minority. This encouraged her to turn to legal authorities in society to claim her rights and also seek out humanitarian organisations in order to receive psychological support service so that she becomes stronger and more confident" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Therefore, when services were reduced or restricted during lockdowns, this generated an impact on girls and women in and outside of camps: "Certainly because of COVID-19, there is a change as services are not available, and the protection centres have stopped providing services. This has affected us very much" (Adolescent girl, Al-Hasakeh sub-district, Al-Hasakeh). On the one hand, **lockdowns and movement restriction** are associated with the **reduction of some forms of violence such as kidnapping**: "The COVID-19 period has had a positive effect, as external violence has greatly decreased, as we no longer hear about people being kidnapped" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh). On the other hand, lockdowns were also associated with **an increase in other forms of GBV** in camp settings: "Because of the quarantine, violence increased in families, but women got rid of standing in queue for about three hours in order to obtain aid" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh) and "The COVID-19 pandemic period negatively affected the entire community due to the lack of movement and being in quarantine in their homes, sexual violence increased as well, and the pressure increased" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh). At the same time, experiences of sexual exploitation and fears of sexual harassment during service provision were reported as a safety concern: "During the distributions we are always afraid of exposure to unwanted physical contact" (Adult woman, Al-Hasakeh sub-district, Al-Hasakeh).

Ar-Raqqa

Types of violence and risk factors

Girls and women reported being subjected to physical, psychological, emotional and sexual violence. Girls specifically mentioned **movement restrictions** imposed on them by their families, **denial of education**, and the negative impact of such social isolation. This impact was acutely felt among children with disabilities who are prevented from social interaction by their families. Several participants also marked gender inequality, social stigma, and customs to be the cause of persistent violence against women and girls. Women and girls mentioned experiences of **sexual violence and sexual exploitation and abuse**, including **sexual harassment** in public places, camps, and bakeries, as well as sexual assault and exploitation at the workplace: *"Our neighbours' daughter works to help her family, to provide for her brothers, and she was exposed to sexual abuse by her employer. She has siblings with disabilities, she doesn't receive all her salary, she only gets 1000 SP/ per day, though she is persisting in order to help her family"* (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa). According to MSNA data, 14% of communities claimed that humanitarian assistance is not provided for free on a regular basis in the Governorate. **Sexual assault and rape** of adolescent boys were also disclosed: *"My son was subjected to violence by someone who sexually exploits children"* (Adult woman, Ar-Raqqa sub-district, Ar-Raqqa).

Early marriage is prevalent, with over 84% of communities assessed through MSNA reporting early marriage for adolescent girls between the ages of 12 and 17 within the last three months. This phenomenon, which was deemed very common by 45% of the communities, intersects with displacement and the deteriorating economic situation in Ar-Raqqa. Pressure to meet a family's needs leads to forcing girls into early marriage: *"In our community for example, during displacement many families forced their daughters to get married so they can get rid of them because they live in tents and random camps, and they would say that this way at least they don't have to carry her burden anymore"* (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa).

Fears of **kidnapping** due to an unstable security situation were communicated by several participants in the Ar-Raqqa governorate who recounted stories of abduction in their community: *"When someone disappears, they say that organ traders kidnapped him to Turkey, and that it is all happening because of the chaos. This happens all around the world, and even in Europe, so of course this would be happening to us while we are at war and there are no authorities to investigate the disappearance of a girl. A while back, a girl disappeared and it was a domestic [violence] issue, and also three other girls around the age of 15 were also kidnapped, and there is no official authority to investigate [these issues]. People became afraid"* (Adult man, Ar-Raqqa sub-district, Ar-Raqqa). Accounts of **organ trading** were also mentioned: *"In the case of the*

murder of a child and after a long search his parents found him in an abandoned building and the body was fragmented and dismembered. His organs were taken" (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa). MSNA data showed that kidnapping and abduction are considered an issue (by 15% of communities) especially in relation to adult men and, to a lesser extent, adolescent boys. Although it is difficult to assess the prevalence of this phenomenon, the fear of kidnapping and the perception of its widespread occurrence leads many to adopt various gendered coping strategies: *"My sister goes to an institute, and I always escort her because we fear that she might be kidnapped or harassed by guys"* (Adolescent boy, Ar-Raqqa sub-district, Ar-Raqqa).

Coping strategies and access to GBV services

Following broader trends in Syria, the impact of COVID-19 restrictions interacted with an already deteriorating economic situation, which saw a rise in costs of living, unaffordability of basic services such as electricity, unemployment, and overcrowding due to unaffordability of housing. As many girls and women shared, these experiences have led to a rise in and normalisation of GBV in the home and elsewhere: *"Because of the war and the crisis the country has gone through, violence has become normal at the family level and at the community level in general. Forms of violence have evolved and multiplied"* (Adult woman, Ar-Raqqa sub-district, Ar-Raqqa).

Service provision was also impacted during the COVID-19 lockdowns. On the one hand, long queues at bakeries and complaints about the bread quality were shared by all participants across Ar-Raqqa, with an increased gendered impact for girls and women who were exposed to **sexual harassment** in public: *"She is most exposed to violence when she goes to the bakery, as they hear bad words and insults. Moreover, women standing in the bakery at night is violence, no? If women go to wait for bread from midnight till the next day just to have bread, isn't this violence?"* (Adult man, Ar-Raqqa sub-district, Ar-Raqqa). On the other hand, some reported a **rise in availability of aid**, distributions, and services after the lifting of lockdowns: *"During the COVID-19 lockdown there were no services and this is normal because of the lockdown, but after the lockdown everything was available more than during the time of the lockdown"* (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa).

At the same time, corruption in **distribution** and perception of discrimination in receiving aid were also widely reported: *"Yes, we receive [distributions], but in very small amounts, and the local authority takes the majority of these aids. He gives from the camel only the ear"* (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa) and *"No we don't, we only had a food aid once, because the commune leader always distributes aids as he wishes. He gives it to his sons and relatives"* (Adolescent girl, Ar-Raqqa sub-district, Ar-Raqqa).

As-Sweida

Types of violence and risk factors

As-Sweida has the largest percentage of female headed households in the whole of Syria, standing at 24%, which partially explains why girls and women frequently reflected on the economic crisis and their need to find employment⁶². Girls and women also recounted experiences of **sexual harassment** in the street and at work, as well as the **spread of IPV** and **family violence**. **Early marriage** also emerged as a concern from the MSNA exercise, with 72% of communities indicating they were aware of one or multiple cases of early marriage involving adolescent girls aged 12-17 during the past three months.

Noteworthy in As-Sweida is girls' and women's level of awareness of systemic gender-based discrimination. As they try to make sense of the GBV they face on a daily basis, girls and women noted the role that **customs, traditions, cultural attitudes**, education, and awareness play in their experiences: "[Sexual harassment] is more widespread here than it is outside of the country because the foundations are rotten. Our society claims perfection and yet the problem is getting worse because the kids are being brought up wrong" (Adult woman, As-Sweida sub-district, As-Sweida). For example, the custom of isolating divorced and widowed women and confining them within the homes of their in-laws, was highlighted as problematic: "The idea of having a separate room for divorced and widowed women is a harmful thing and is considered huge violence and insulting to women. A woman would bear the pressure and the insult just because she doesn't want to go back to live with her parents" (Adult woman, As-Sweida sub-district, As-Sweida). As a result of this awareness, in As-Sweida women and girls were likely to demand additional efforts to address unequal social norms in their community: "Spreading awareness and spreading education are the most important so that they stop holding it against her that she is divorced" (Adolescent girl, As-Sweida sub-district, As-Sweida).

A consequence of widespread tolerance of GBV is **victim blaming**: "But sometimes even if you complain I wouldn't get proper attention from the police and they wouldn't believe me because they trust the perpetrator. And if you tell your parents or his parents, they would blame you saying that you tempted him to do what he did but if you were respectful with him, he would not have done what he did" (Adult woman, As-Sweida sub-district, As-Sweida). In addition, girls and women do not disclose their experiences of GBV, as seeking justice through police or courts would likely result in a violent backlash: "We stay quiet and don't say anything so that we don't shame ourselves" (Adult woman, As-Sweida sub-district, As-Sweida).

Coping strategies and access to GBV services

Girls and women reported that services were halted during lockdown and their access to them was also hindered due to movement restrictions. The impact of services such as awareness sessions and safe spaces was felt in As-Sweida. For example, adolescent girls showed awareness of the dangers of early marriage: "A girl's body under 18 is weak and is not capable of pregnancy and childbirth and if she bled while giving birth she might die or the baby might die" (Adolescent girl, As-Sweida sub-district, As-Sweida).

The need to find work was framed as a coping mechanism to escape both economic violence and IPV. Girls and women reflected on the positive impact of safe spaces: "For the women who are subjected to violence, I wish there was a facility where they could go and work in so that they become financially secure. Not necessarily to sleep there, but this way she would be protected from being used by an employer to give her a job and to want something else from her in return" (Adult woman, As-Sweida sub-district, As-Sweida).

Dar'a

Types of violence and risk factors

Data collection for the Governorate of Dar'a was limited to the MSNA exercise. This consultation highlighted the prevalence of **early marriage** in the Governorate, with 46% of communities regarding it as very common, and 87% reporting being aware of a case of early marriage involving an adolescent girl over the age of 12 in the past three months.

Finally, while the MSNA protection data did not report any cases of harassment or demand for favours in exchange for humanitarian aid, the vast majority of communities who took part indicated that aid is not provided for free but rather in exchange for money. Dar'a had the highest rate, across all Governorates, of communities (50%) who considered **requests for money to access humanitarian aid** very common and affecting all gender and age groups fairly equally.

62 Humanitarian Needs Assessment Programme (HNAP) (2020). Summer 2020 Report Series: Demographic Overview. P.3.

Damascus

Types of violence and risk factors

In Damascus, girls and women continued to experience **verbal, physical, and psychological violence** at home. Additionally, fighting between children and the use of physical violence were mentioned as a concern too. As is the case in other governorates, the economic crisis together with COVID-19 exacerbated levels of GBV. Girls and women continue to face **sexual harassment** at home, in the street, at school, at the university, when using public transportation and at work: *"Harassment on transportation means [that] when they know I am a widow they quickly assume that I am easy to get and they would ask for my phone number and say that they would be there for me if I ever needed anything"* (Adult woman, Damascus sub-district, Damascus).

Displaced children, women and girls were marked as especially vulnerable to sexual harassment and assault: *"Even children in the streets or IDPs are being used because they are so weak, and they use them physically"* (Adolescent participant, Damascus sub-district, Damascus). **Kidnapping and abduction** emerged as a concern in the MSNA data, as a common form of violence that seemed however to affect all genders and age groups, including children under the age of 12.

Coping strategies and access to GBV services

Girls and women cope with IPV and sexual harassment through **non-disclosure**: *"It depends. I prefer keeping it inside and not to talk so that I wouldn't cause problems at home"* (Adolescent girl with disability, Damascus sub-district, Damascus). Other coping mechanisms were also mentioned, such as seeking protection services and attending activities at **protection centres**: *"We really would like to take part in activities that stop violence. I would feel happy and strong to be able to stop violence from happening and for them not to control us. And I want my voice to be heard and to reach to everyone that is not aware"* (Adolescent girl, Damascus sub-district, Damascus).

The impact of the economic crisis and of COVID-19 increased the need for basic aid and services: *"Yes, all people are in need. The economic situation is difficult and everything is expensive. People are not getting enough food. [We need] food assistance for sure, and education. Everyone needs both"* (Adult woman, Damascus sub-district, Damascus). The same sentiment was echoed in regard to healthcare services: *"During COVID-19, the health aid was reduced a lot. Doctors wouldn't come over or allow us to go visit them. I was scared to go to hospitals because of COVID-19, and the doctors took advantage of the situation"* (Adolescent girl, Damascus sub-district, Damascus).

While some positive feedback was shared about

humanitarian support during programme monitoring discussions in Damascus: *"Humanitarian assistance is free and even with a smile. I never feel bothered"* (Adult participant, Damascus sub-district, Damascus). COVID-19 caused a **reduction in service provision**, which was lamented by adolescent girls in particular: *"They dismissed violence and focused on COVID-19"* (Adolescent girl, Damascus sub-district, Damascus) and *"They forgot about us girls"* (Adolescent girl, Damascus sub-district, Damascus).

Rural Damascus

Types of violence and risk factors

Following trends in the rest of Syria, IPV and family violence, including verbal, psychological, sexual and physical continue to affect girls and women in Rural Damascus. Persons with disabilities, divorced and widowed women as well as adolescent girls emerge as particularly exposed to various types of IPV: *"Divorced women are the most exposed to violence and all society thinks of them as an easy catch, I am ashamed to say that I am divorced"* (Adult woman, Jaramana sub-district, Rural Damascus).

COVID-19 related lockdowns are perceived to have increased girls and women's vulnerability to GBV: *"Violence increased during COVID-19, the streets became less safe, the psychological pressure increased in the streets. Men started taking all of this out on their wives"* (Adolescent participant, Jaramana sub-district, Rural Damascus). **Sexual violence and abuse** were also reported: *"During COVID-19, I heard of an uncle who sexually harassed his niece [at home]"* (Adult woman, Babella sub-district, Rural Damascus). Echoing patterns in all governorates, **family violence** continued throughout the last year: *"I saw a son throw his mother out of the car because his wife does not want her and I took her to an orphanage and I asked a friend of mine from another association for help"* (Adolescent participant, Jaramana sub-district, Rural Damascus).

Coping strategies and access to GBV services

Girls and women found **disclosure** to be a desired coping mechanism for GBV: *"We should not remain silent. I have to defend myself so that I do not have psychological issues"* (Adolescent participant, Jaramana sub-district, Rural Damascus). Adolescent girls also highlighted the importance of **safe spaces and protection services** as avenues to turn to when facing violence and looking for coping mechanisms: *"We could come to X Association and they could help us as we can trust them"* (Adolescent girl, Babella sub-district, Rural Damascus).

Services were listed as free with some **barriers to access such as distance** or parents' unwillingness to allow their adolescent girl to participate: *"Not everyone*

is capable of coming here [to the centre] because of the parents" (Adolescent girl, Babella sub-district, Rural Damascus). Girls and women express their desire for additional psychological assistance, safe spaces for children and people with disabilities: "We need specialist centres for people with disabilities that are convenient for them and with a staff that can help them and have their own special activities" (Adolescent girl, Babella sub-district, Rural Damascus) as well as continuing raising awareness in order to stop violence: "We need more awareness, because the centre on its own is not enough. People will go back to violence if they do not have awareness" (Adolescent girl, Babella sub-district, Rural Damascus).

Deir-ez-Zor

Types of violence and risk factors

Early and forced marriage was prominent amongst the various forms of violence against women and girls, which were estimated to have increased over the past year in the Deir-ez-Zor governorate: "Early marriage has increased more this year" (Adult woman, Basira sub-district, Deir-ez-Zor). Frequent mentions of early marriage in FGDs with men, women, boys and girls confirmed findings from REACH's June 2020 Situation Overview for the governorate, which states: "The difficulties reportedly faced by all populations in meeting basic needs in an unstable economic context are resulting in heightened risk of resorting to negative coping strategies. Across assessed locations, KIs in both communities and informal settlements all reported child labour and early marriage as protection risks for residents and IDPs. Household economic pressure likely increases child protection risks, as child labour and early or forced marriage were listed as a coping strategy for lack of income in more than 80% of communities"⁶³.

The impact of the deteriorating economic situation on rates of violence in the area was highlighted by several respondents: "Every year, violence increases clearly due to the current crisis and deteriorating economic conditions from bad to worse" (Adult woman, Kisreh sub-district, Deir-ez-Zor), and "This year the violence increased due to the high prices and the tightening of restrictions on us by our men" (Adult woman, Basira sub-district, Deir-ez-Zor). This already precarious situation has been further affected by restrictions imposed due to COVID-19: "What increased in the violence in the COVID-19 stage was the absence from work and studies, the high prices, and men staying at home, which caused psychological crises and stress for most individuals" (Adolescent girl, Kisreh sub-district, Deir-ez-Zor). **Intimate partner and family violence** against women and adolescent girls were a widespread concern for women and girls who

participated in the focus groups: "Due to the preventive measures of COVID-19 and the ban [...] domestic violence has increased, as men have become very nervous and practice violence against those around them in the house because they do not leave the house except for necessity" (Adult woman, Kisreh sub-district, Deir-ez-Zor). At the same time, women and girls across the governorate tended to report a decrease in sexual harassment and other forms of violence outside the home: "Yes, because of the social distancing, cases of harassment reduced for girls and women" (Adult woman, Basira sub-district, Deir-ez-Zor).

In Deir-ez-Zor, high rates of early marriage appeared to coincide with specific forms of discrimination affecting **adolescent girls** within their families and society more broadly: "Forcing them to get married early, as their parents believe to know what is best for them, as if marriage will solve their problems, but the opposite is true" (Adult woman, Basira sub-district, Deir-ez-Zor). Their movements appeared highly restricted with severe consequences for their health and wellbeing: "Many girls are at risk of their lives because of their parents forbidding them to go to the doctor or even marrying them at a young age and so on" (Adolescent girl, Kisreh sub-district, Deir-ez-Zor).

Adolescent girls were also exposed to violence within the context of **child labour**, which appeared common across the whole governorate: "Most of the girls left their schools in order to work in agricultural lands and handicrafts such as sewing or even housework" (Adolescent girl, Kisreh sub-district, Deir-ez-Zor). Working outside the home was considered a critical risk factor for sexual abuse and other forms of violence: "The most dangerous for girls is working with men in markets as this may expose them to exploitation" (Adolescent girl, Basira sub-district, Deir-ez-Zor). Importantly, Deir-ez-Zor was one of the few governorates where respondents described adolescent girls being **recruited by armed factions** alongside boys: "Girls work on the land and in sewing shops, and join the armed factions, and this is a danger and the phenomenon of girls' involvement in armed factions is very widespread" (Adolescent girl, Kisreh sub-district, Deir-ez-Zor), and "there are [many] of them, whether girls or boys, joining the weapons carriers for a low salary and sometimes for the sake of power and their egos" (Adult woman, Kisreh sub-district, Deir-ez-Zor).

Financial pressures requiring women to work outside the home, and in particular in agriculture, were also flagged as factors exposing adult women to **sexual exploitation**: "There is also financial and sexual exploitation in exchange for work" (Adult woman, Kisreh sub-district, Deir-ez-Zor) and **sexual violence**, especially in the agricultural sector: "Violence is also higher in rural areas at locations of planting and reaping where women might be harassed or raped by their relatives. And because the agricultural machinery would be running loudly, no one can hear a woman shouting" (Adult woman, Deir-ez-Zor sub-district, Deir-ez-Zor).

63 REACH 2020. Situation Overview: Deir-ez-Zor Governorate. Northeast Syria. June 2020. Available at: https://reliefweb.int/sites/reliefweb.int/files/resources/REACH_SYR_Factsheet_DeirEzZor-Situation-Overview_June2020.pdf

SEA by those perceived to be local authorities, humanitarian workers and other actors providing aid to the communities was widely reported during FGDs in Deir-ez-Zor: *"[Aid is] free but local authorities ask for transportation fees and sometimes he takes a share of the aid in order to provide it, and in some cases he sexually abuses women and girls"* (Adult woman, Basira sub-district, Deir-ez-Zor). Divorced women and widows were considered to be especially vulnerable in this regard: *"[They] might be abused because they are in need, they might be asked for sexual favours in return for providing services"* (Adolescent girl, Basira sub-district, Deir-ez-Zor). When complaint and reporting mechanisms to address SEA were explicitly discussed by women and girls, they were not always considered effective: *"If anyone wants to file a complaint against those who make the distributions, no one listens to them, but most of the time they deny them the aid or ask them for something in exchange for giving them the service, whether free or not, such as sharing half their allocation, providing personal services, or even sexual exploitation"* (Adolescent girl, Kisreh sub-district, Deir-ez-Zor). Women and girls called for enhanced monitoring of humanitarian actors and distributions to avoid exploitation: *"There must be control over those who provide humanitarian aid to protect the rights of beneficiaries against exploitation"* (Adolescent girls, Kisreh sub-district, Deir-ez-Zor). Beyond humanitarian actors and local authorities, however, the inability to meet the most basic needs has left women exposed to exploitation by men in a range of positions: *"Violence increases at places like bakeries as some women resort to become girlfriends of bakery workers to get some bread in return"* (Adult woman, Deir-ez-Zor sub-district, Deir-ez-Zor).

Coping strategies and access to GBV services

In line with data from other parts of the country, some women and girls in Deir-ez-Zor highlighted **silence and adherence to social norms** as a common coping strategy: *"When we girls are exposed to violence, we cannot respond except by crying or turning to someone we trust to complain about our concern, and some girls resort to other methods to reduce violence such as submission and accepting anything that could keep this violence away from them"* (Adolescent girl, Kisreh sub-district, Deir-ez-Zor), while also pointing to the risks involved in seeking legal or other forms of redress for the violence they experienced: *"We have a women house, and local councils, but it is shameful for women to complain against her parents [...] they will slaughter us"* (Adolescent girl, Basira sub-district, Deir-ez-Zor).

Nonetheless, amongst women and girls in Deir-ez-Zor, there was also a distinct sense, compared with other regions, of their right to a life free of violence: *"I defend myself and don't remain silent. I use dialogue and argument and demand my rights"* (Adult woman, Basira sub-district, Deir-ez-Zor) and of the role of safe spaces in supporting women and girls who experience abuse: *"Women may also turn to other women in safe spaces and inform them of what happened, and they in turn shed light on the origin of the problem, or sometimes if the type of violence is very*

hard, such as severe beating, we can reach some centres that protect the rights of women" (Adult woman, Kisreh sub-district, Deir-ez-Zor).

Several FGDs indicated **WGSS** as a key resource to access help, guidance and psychosocial support: *"Having safe spaces for women and girls and being familiar with case management services helped many girls obtain health and psychological services, and local councils and women's houses also helped them obtain legal services"* (Adolescent girl, Kisreh sub-district, Deir-ez-Zor). Critically, multiple respondents drew a direct link between the presence of WGSS and a reduction in GBV within their communities, thanks to increased self-confidence and knowledge of women's rights amongst women and girls themselves: *"[Thanks to] the presence of some safe spaces for women and girls, as well as the women house, and thanks to the continuous awareness sessions, girls are rejecting early marriage and demanding that they complete their education and educate women about their rights and duties, leading to a reduction of violence against them"* (Adult woman, Kisreh sub-district, Deir-ez-Zor).

Increased **awareness about GBV** in the broader community also appeared to have had an impact, in the view of women and girls, on levels of violence around them: *"Violence changed from last year due to people's awareness, and every year the concept of violence rises as a result of awareness of some local committees and non-governmental organisations, but there is violence, but at a lesser rate"* (Adolescent girl, Kisreh sub-district, Deir-ez-Zor). Awareness raising activities on the topic of early marriage were singled out as particularly effective for both adult women and adolescent girls: *"The early marriage initiative was fun and contained important things that we were ignorant of, psychologically and socially"* (Adult woman, Basira sub-district, Deir-ez-Zor). While this perceived impact is encouraging and points to widespread acceptance of GBV prevention activities amongst women and girls, trends highlighted above and by other assessments regarding the phenomenon of early marriage in the region do not necessarily corroborate such a strong effect on actual behaviour.

While widespread knowledge and access to GBV services emerged from consultations in Deir-ez-Zor, women and girls pointed out a number of remaining **barriers**. These included gender norms and movement restrictions, as well as distance and accessibility concerns for women and girls with disabilities: *"Girls mentioned the availability of child-friendly spaces and safe spaces for women and girls, but there is a difficulty for some in accessing these spaces, especially if the space is far from their homes, while others suffer from [not being] allowed to go to these spaces, and it is also difficult for the disabled and the old people due to transportation difficulties"* (Adolescent girl, Kisreh sub-district, Deir-ez-Zor). Furthermore, resistance and distrust of services by men was sometimes an issue: *"There are men who prevent their wives from going to these spaces, considering that these spaces incite women against men"* (Adult woman, Kisreh sub-district, Deir-ez-Zor).

The impact of **COVID-19** restrictions on the availability of GBV services in the governorate varied from minimal impact: *"Everything was available in the village" (Adolescent girl, Basira sub-district, Deir-ez-Zor)* to substantial disruptions, though efforts were clearly made to maintain a minimum level of services through online solutions: *"Protection services were not available during the spread of COVID-19 because most centres work remotely and some have closed their centres, and not everyone has access to the Internet" (Adolescent girl, Kisreh sub-district, Deir-ez-Zor).*

In contrast with the broader situation in Deir-ez-Zor, the availability of services in the **camp** settings appeared more limited: *"Participants agreed that there is no medical care or legal assistance provided in case women and children are subjected to violence" (Mixed gender adolescent group, Kisreh sub-district, Deir-ez-Zor).* COVID-19 worsened the situation: *"Schools are closed and medical services stopped, and there are no awareness sessions, social distancing is not applied, it is crowded" (Adult man, Kisreh sub-district, Deir-ez-Zor).* As a result, women and girls have to resort to traditional reconciliation mechanisms: *"As our region is a tribal region, we have respected old people that we refer to when problems happen (reconciliation)" (Adult man, Kisreh sub-district, Deir-ez-Zor),* which was confirmed by adolescent boys and girls as well. Finally, widows and divorced women are exposed to increased scrutiny within the context of a camp where movements can be easily observed and social pressure is greater: *"Widows are not like married women. If she runs out of aid she has no one to provide for her, and they are in a critical situation because if they go out of their tents everybody questions and wonders: why is she out" (Adult man, Kisreh sub-district, Deir-ez-Zor).*

Hama

Types of violence and risk factors

Discussions with women and girls in Hama governorate revealed a range of different types of violence affecting them, including IPV, physical and emotional violence, forced and early marriage, rape and other forms of sexual violence: *"The husband doesn't let his wife work or even leave the house. Harming, beating or burning, physical violence, psychological violence (bullying) and harsh words. Sexual violence (harassment and rape) [...] It's a high percentage" (Adult women, Hama sub-district, Hama).* Restrictions related to COVID-19 affected GBV similarly to other regions, particularly as it pertains to **IPV**: *"Violence increased. Domestic and economic abuse" (Mixed young people group, Masyaf sub-district, Hama).*

Adolescent girls were facing movement restrictions and other limitations of their rights: *"A girl's reputation – a guy is allowed to do anything he wants but a girl is not allowed to go to certain places, or to go somewhere by herself" (Young woman, Hama sub-district, Hama).* **Early marriage** was highlighted as a very common practice affecting girls aged 12-17 in Hama by 29% of

communities surveyed by the MSNA, **Women who are divorced** were also exposed to high levels of abuse: *"Divorcees are exposed to verbal violence more than anyone else. Anything she does is highly criticised, they put her under the microscope, and she is not allowed to go anywhere" (Adult woman, Hama sub-district, Hama)*

People with disability, including children, also emerged as a group at particular risk of sexual violence: *"People with a disability are subjected to violence, because they cannot defend themselves, the person inflicting the violence on them thinks that they are weak and they use that weakness to sexually harass them" (Adult woman, Hama sub-district, Hama).* Violence against people with disability, including girls, women, men and boys, happens within a context of severe discrimination and social exclusion: *"I would never trust to let my son out on his own, he would be subjected to violence and exploited in a horrible way – if we go to a park now, you will see everyone staring at us like he is something strange" (Young woman, Hama sub-district, Hama).*

Finally, violence within the context of **detention** was also highlighted by respondents in Hama: *"Prisons witness the worst violence where jailors actually become creative in their methods of violence. There is no one to hold them responsible or to supervise them" (Adult woman, Hama sub-district, Hama)*

Coping strategies and access to GBV services

When discussing strategies to deal with GBV, women and girls spoke predominantly of the need to "keep the peace" within the household by either **avoiding** their partner or "**accepting**" the abuse they are facing: *"Women usually avoid responding or complaining in order to keep her house and her family intact" (Mixed young people group, Masyaf sub-district, Hama).* These strategies tended to imply a justification of male violence against women as a product of economic or other forms of stress: *"Adult woman 1: Social and financial circumstances affect the man sometimes so I would avoid him and keep my distance until he calms down. Adult woman 2: A woman should not fight or expose her husband to violence. Adult woman 3: A person must self-preserve – when a man or any other person becomes agitated, we should stay away until he calms down. That's how we preserve our dignity" (Adult women, Hama sub-district, Hama).*

Alternatively, though less common, responses included seeking the support of an influential community member: *"I would leave the house and go to someone I know to ask for help and that person should be someone whom the person inflicting the violence would listen to" (Young woman, Hama sub-district, Hama),* or seeking support from a dedicated organisation: *"To have someone to be able to open up to, and if there isn't, one should come to [the] centre as it has psychological support and it is discrete. They give us confidential advice that benefits us and they have specialist people with experience" (Adult woman, Hama sub-district, Hama).*

Knowledge of **services** and their role in protecting women and girls from GBV was overall more limited in Hama, and concerns were raised regarding their quality as well: *"Services that are not available: respect – trust – dignity – equality – there is quantity of services but very bad quality"* (Adult woman, Hama sub-district, Hama).

Homs

Types of violence and risk factors

While a range of types of violence were mentioned by women and girls in Homs governorate, early marriage stood out as an increasing trend in the area: *"Cases of early marriage had increased – a father would force his daughter to get married so that he gets rid of her burden"* (Adult woman, Homs sub-district, Homs). This upward trend was associated both with economic needs and with COVID-19, though as with everywhere else the two factors ultimately compounded each other: *"Early marriage as well, which had increased during COVID-19"* (Adolescent girl, Homs sub-district, Homs).

The intersection between COVID-19 and financial pressure was particularly felt at home: *"During COVID-19, and because men are staying home, domestic violence increased and violence against his wife and kids, due to stress and lack of financial income"* (Adult woman, Homs sub-district, Homs). The impact of lockdown measures was however also felt outside the home: *"We became scared to walk in the street during the quarantine because we're afraid we might be harassed, kidnapped, robbed, especially in small and empty streets"* (Adult woman, Homs sub-district, Homs).

Sexual harassment was also highlighted by adolescent girls as a form of violence that particularly affects them as they are more likely to use public transport to go to school or university: *"There is a lot of physical harassment in buses because they are overcrowded. Guys take advantage of this"* (Adolescent girl, Homs sub-district, Homs). Finally, **sexual exploitation and abuse** also appeared to be a concern, although this was not reflected in the MSNA data and it was expressed more indirectly than in other governorates: *"Sometimes the person who is giving out aid would look unpleasant, and that is why women and girls should not go to places where they would feel uncomfortable"* (Adolescent girl, Homs sub-district, Homs).

Coping strategies and access to GBV services

Analogous to other regions, women and girls in Homs described the social barriers that prevent many women and girls from seeking help when they are affected by violence: *"Society blames women when they are harassed, and this stops women from talking about it sometimes, and she wouldn't even tell her own mother"* (Adolescent girl, Homs sub-district, Homs). Dynamics of **victim-blaming** were common in the region: *"The woman is always the*

one to blame when she is subjected to violence. Whereas the male is forgiven by society" (Adolescent girl, Homs sub-district, Homs).

Nonetheless, both adult women and adolescent girls in Homs reported a significant impact of **dedicated safe spaces** and services on the capacity of survivors of violence to deal with the abuse and, potentially, even access **legal recourse**: *"A wife can divorce her husband, she should come to the centre and learn and become strong, and divorce him"* (Adolescent girl, Homs sub-district, Homs), and *"There is awareness now and there are centres where one can turn to in cases of violence. And we can appeal to the law now, because there is more awareness"* (Adult woman, Homs sub-district, Homs).

Idleb

Types of violence and risk factors

IPV was the most common form of violence discussed by women and girls in Idleb governorate: *"The majority of the attendees agree that domestic violence is one of the most prevalent and dangerous types of violence in the community and is considered to be the most dangerous for women as all kinds of physical and psychological violence and deprivation of resources may be applied at home"* (Facilitator of adult women FGD, Al-Dana sub-district, Idleb). IPV was often accompanied by descriptions of **family violence** against adolescent girls and young women by their fathers and brothers: *"There is physical violence exercised by husbands to their wives, as well as violence by brothers to their sisters and also the older to the younger"* (Adult woman, Harim sub-district, Idleb).

Sexual violence was also discussed in the contexts of work, detention or life in a displacement camp: *"Being at the camp exposes people to rape, harassment or kidnapping"* (Adolescent girl, Qourqeena sub-district, Idleb). Sexual harassment and sexual violence within the context of work were mentioned frequently in relation to girls engaged in **child labour**: *"Girls may work in cleaning houses, and girls may be exposed to types of harassment or sexual assault, so we consider girls to be a group that is more exposed than boys, and with time this girl who is exposed to this will become an outcast"* (Adult woman, Idleb sub-district, Idleb). Meanwhile, some communities argued that girls were unlikely to engage in child labour, unlike adolescent boys, and more likely to enter an early marriage: *"It is different for girls, as with regard to social customs and traditions, the girl doesn't work"* (Adolescent boy, Harim sub-district, Idleb), others confirmed that girls do engage in a number of productive activities: *"They might work at picking olives, grocery shops, cleaning houses or cleaning building stairwells for a small fee"* (Adult woman, Qourqeena sub-district, Idleb). Working at a young age, especially in some of the most dangerous forms of labour, exposes girls to additional risks: *"Of course, the problems faced by females are more severe than males because our society looks at the girl begging, it is possible that there is a person who has sexual designs*

on her, and he can harass her or exploit her and offer her certain things and she is not protected and is also sexually exploited" (Adult man, Idleb sub-district, Idleb).

Early marriage was reported as a very common practice affecting adolescent girls between the ages of 12-17 by 30% of communities in Idleb, with 82% of assessed communities claiming they had witnessed a girl this age getting married in the past three months. A little over 2% of communities mentioned they were aware of cases of early marriage involving girls and boys under the age of 12. These figures stand out amongst all other Governorates for which MSNA data is available, pointing towards serious concerns amongst the local population in regard to early marriage trends in their communities.

Direct references to sexual exploitation and abuse by humanitarian actors and local authorities were not as common in Idleb as in some other governorates, a finding which is confirmed by MSNA results regarding humanitarian assistance. On the other hand, focus group participants were more likely to highlight the risk of **sexual harassment** during distributions of aid, confronted in particular by women and girls who are facing additional forms of social exclusion, such as widows: *"There are also some women, widows and old people in distribution sites, which exposes them to further violence and a special mechanism must be found in order to deliver this assistance to the homes of these people" (Adult man, Al-Dana sub-district, Idleb).*

Compared to other governorates, residents of Idleb seemed more concerned about the risk of **kidnapping** and especially the kidnapping of women, children and adolescent girls: *"Yes, I hear about children kidnapping and I feel so afraid for my children" (Adult woman, Harim sub-district, Idleb).* These fears were corroborated by GBV experts working in the region who stated: *"We have seen more cases of kidnapping in general and especially of women and girls in Idleb" (GBV expert, Turkey Cross Border).*

The impact of **COVID-19** restrictions on GBV in Idleb was perceived similarly to other governorates, with women and girls highlighting an increase in intimate partner and family violence: *"COVID-19 had an impact on violence types and rates: during quarantine, when a man stays home, clashes must happen between him and his wife and children, and accordingly he will beat his wife and that would increase physical and psychological violence" (Adult woman, Qourqeena sub-district, Idleb).* Adolescent girls, on the other hand, were more likely to reflect on the reduction of sexual violence within and on the way to school since education was interrupted in this period: *"Harassment cases have decreased in my opinion as the schools were closed and this impacts girls" (Adolescent girl, Harim sub-district, Idleb).*

Within Idleb governorate, the Voices from Syria report was able to reach a number of women, girls, boys and men who resided in **camps for displaced populations**. Thanks to these consultations, specific risk factors

exposing displaced women and girls living in camps to GBV were surfaced, primarily the lack of appropriate **sanitation facilities** and overcrowding of camps: *"Facilitator: for example, some of you are displaced in the camp. What are the things that increase violence for you? Adolescent girl 1: The bathrooms; Adolescent girl 2: We go out of the tent to go to the bathrooms, and we meet young men on the street, and get exposed to harassment, so we return. Adolescent girl 3: Yes, I was going to the bathroom with my mother or brother, and suddenly a man came out of the women's bathroom" (Adolescent girls group, Idleb sub-district, Idleb).*

Living conditions in the camp were widely considered as conducive to both IPV: *"We are in a small camp. Whenever a woman leaves her tent and stays a bit late, the husband beats her" (Adolescent boy, Idleb sub-district, Idleb),* and violence from strangers due to overcrowding and lack of privacy: *"Places such as collective shelters, collective accommodation or camps, they are exposed to more violence because of the large numbers and mixing between different groups of society and various cultures" (Adult woman, Idleb sub-district, Idleb).*

Coping strategies and access to GBV services

While life in **IDP camps** was considered particularly dangerous for women and girls in Idleb, it is worth noting that access to protection services seemed to be relatively easier for those living in camps compared to women and girls living in villages and other communities: *"There are a lot of children and women who go to child protection and women's protection centres as well as psychiatric clinics in the camp, and there are a lot of sessions that they loved, such as risks of early marriage, school dropouts, sewing, hairdressing" (Adolescent boy, Harim sub-district, Idleb).* Men who participated in FGDs also demonstrated a high level of acceptance of protection services for women and girls in the camps: *"The participants stressed the need and importance of these centres, which acted as a breathing space for women and children to unload and try to integrate and adapt to the surrounding environment" (Facilitator of adult men group, Al-Dana sub-district, Idleb).* Encouragingly, camp-based respondents also demonstrated a solid understanding of systems in place to report and counteract SEA: *"We know that there is a complaints system for the organisation (WhatsApp - Email) and brochures are constantly distributed in the camp with phone numbers and e-mails for complaints. In addition, sessions are held by the protection teams about the mechanism of complaints and introducing the methods and approaches that can be used to file complaints" (Adolescent boy, Harim sub-district, Idleb).*

Overall, **knowledge of women's safe spaces** seemed high in Idleb governorate amongst all participants: *"Women and girls usually turn to their parents or relatives, or maybe protection centres [...] where they attend sessions about violence and how to protect themselves against it. Violence cannot be diminished, it is very widely spread. A girl can get help from her parents or from protection centres and the safe spaces" (Adolescent girl, Qourqeena sub-*

district, Idleb). However, access to the existing services for survivors of GBV and women and girls more broadly was impaired by several factors. Firstly, women and girls highlighted how **distance** meant the safe spaces were often inaccessible for them: *"Many girls endure difficulties to reach protection centres due to fear of abduction on the roads, and due to large distances"* (Adolescent girl, Mareet Tamsrin sub-district, Idleb). Similarly, a group of adolescent girls listed **"lack of transportation"** and *"difficult to reach"* as key obstacles to accessing protection services, together with concerns about harassment by men (Adolescent girls FGD, Idleb sub-district, Idleb). Secondly, **social norms** which blame women for the violence they experience and punish them for seeking support continued to hinder help-seeking behaviour: *"The difficulty for females to access these mechanisms is due to fear of society's perception or customs, traditions and possible violence in the event of resorting to these mechanisms, fear of deprivation of resources and children, fear of exclusion or imprisonment, lack of trust in existing security institutions, and many girls do not turn to any party in the event of any kind of harassment due to fear of stigma, lack of confidentiality or protection and loss of confidence in these entities"* (Adolescent boy, Harim sub-district, Idleb).

Importantly, **lack of trust in service providers** was mentioned by some respondents in Idleb: *"One of the obstacles to reaching centres is the loss of confidence in the centres"* (Adult woman, Idleb sub-district, Idleb). Concerns about safety and confidentiality represented an important barrier to seeking legal redress in particular: *"In any harassment case, girls do not turn to any party due to the fear of stigma and because of these institutions' failure to apply the principles of protection and confidentiality and so they have no trust in them"* (Adolescent girl, Harim sub-district, Idleb).

A very mixed picture emerges in Idleb as concerns the continuation of services during the **COVID-19 pandemic**. While everyone confirmed that schools were closed, some respondents indicated protection services remained available, albeit with limitations: *"An infirmary and organisations for distribution, child-friendly spaces, safe spaces for women; these services are available now in the area but the schools however, closed down and the organisations have decreased the numbers of beneficiaries because of COVID-19"* (Adolescent girl, Qourqeena sub-district, Idleb), but others complained of a more widespread closure of facilities: *"Because of COVID-19, we can no longer benefit from these services like before because many of the centres closed or stopped working for a while or they have decreased the number of beneficiaries"* (Adolescent girl, Qourqeena sub-district, Idleb). Not everyone, however, found the transition to **online and remote services** difficult and instead perceived it as an opportunity: *"It has changed positively as access to assistance has become easier and online services are provided remotely"* (Adolescent girl, Harim sub-district, Idleb).

Lattakia

Types of violence and risk factors

GBV in Lattakia seemed to follow similar trends to the rest of the country: *"Physical violence such as beating and harming others; verbal violence, insults and curses; depriving women from their allowance and from working outside the house; depriving women from inheritance; harassment and rape, sexual violence"* (Young woman, Lattakia sub-district, Lattakia). The impact of COVID-19 was primarily felt in terms of **intimate partner and family violence** in Lattakia as well: *"I believe that during the quarantine the violence increased greatly. I used to always hear couples fighting in our neighbourhood"* (Young woman, Lattakia sub-district, Lattakia).

Sexual harassment and other forms of sexual violence were discussed and the specific vulnerability of adolescent girls and women and girls with a disability was highlighted: *"Harassment in the street – rape which girls are subjected to, especially those with a disability because she would not be able to express what happened with her"* (Young woman, Lattakia sub-district, Lattakia).

Focus groups in Lattakia revealed that humanitarian distributions have not reached displaced and host communities for several years: *"We haven't received any aid in a long time. We only received it in the beginning of the crisis"* (Young woman, Lattakia sub-district, Lattakia). Within the context of economic crisis and unemployment, a lack of material support could result in exposure to sexual exploitation and other forms of abuse for women, girls and other at-risk groups.

Coping strategies and access to GBV services

Awareness of existing services dedicated to women and girls varied amongst women and girls consulted, as did their trust in the capacity of these services to meaningfully protect them from violence. On one hand, some women accurately pointed out the role of case managers in the local women's centre: *"I would turn to the case manager here at the centre and explain my situation and consult her advice"* (Young woman, Lattakia sub-district, Lattakia). Prevention of GBV was also considered possible thanks to information gained at the woman's safe space, which women and girls could in turn disseminate within their communities: *"I think that spreading awareness about violence might be able to decrease it and we have become very knowledgeable about the subject and we talk to our friends about it"* (Young woman, Lattakia sub-district, Lattakia).

On the other hand, not everyone seemed aware of this service: *"There is no place where girls and women can turn to if we were subjected to violence. I haven't heard of such a place"* (Young woman, Lattakia sub-district, Lattakia). Legal support was particularly unattainable for young women and girls: *"I don't think a girl can go to court if she*

was subjected to violence by her father or siblings. There is no place for her to go” (Young woman, Lattakia sub-district, Lattakia). Furthermore, access to existing services was impaired by movement restrictions imposed to prevent COVID-19: “During quarantine it was difficult for us to come to the centre or to go anywhere else, even if we were subjected to violence. We couldn’t leave the house” (Young woman, Lattakia sub-district, Lattakia).

months. The MSNA data also showed very limited concerns regarding cases of **abduction or kidnapping** in the region.

Quneitra

Types of violence and risk factors

Data collection for the Governorate of Quneitra was limited to the MSNA exercise, thus leaving a highly incomplete picture of the situation of women and girls in the area and the forms of GBV they might experience.

Early marriage appears to be a concern affecting adolescent girls after the age of 12 in Quneitra. Early marriage was highlighted as a very common practice by 27% of the communities surveyed, 91% of them reported a case of early marriage involving a girl between the ages of 12 and 17 during the past three months. In contrast, only 12% of communities mentioned a similar case involving a boy in the same age group.

MSNA data showed that 45% of communities mentioned family separation as occurring for adolescent girls (12-17) and 51% of those communities identified early marriage as the main reason. Restrictions to freedom of movement for adolescent girls and women are also a concern across population groups, in fact 26% of communities identified movement restrictions imposed by intimate partner, community and family for IDP adolescent girls, 23% for adolescent girls of host communities and 31% for returnee girls. Quneitra has also the highest level of reports of abduction and kidnapping for girls below 12 years of age, with 5% of communities reporting this issue.

Tartous

Types of violence and risk factors

Data collection for the Governorate of Tartous was limited to the MSNA exercise, which paints a relatively positive picture of the experiences of Syrians in this region, including women and girls. The limitations of the data and the lack of complementary qualitative information, however, cautions against an overestimation of living conditions and, importantly, of the safety of women and girls, in Tartous.

After Lattakia, Tartous was the Governorate with the lowest reported rates of **early marriage**, with only 5% of communities indicating they were aware of girls under the age of 17 getting married in the last three



8 Annexes

Annex 1: Methodology

Focus Group Discussions

FGDs were conducted by GBV and other protection actors working from the northeast Syria (NES) and Turkey Cross Border (TXB) hubs. When deciding which sub-districts to conduct FGDs in, the following criteria was followed:

- % of IDPs in the sub-district in relation to overall number of IDPs in Syria
- Population size of sub-district
- Severity of needs in the sub-district
- Capacities of partners, access, feasibility of conducting FGD.

FGDs conducted in person followed safety precautions and social distancing measures where required. In-person FGDs hence varied in size, the largest including 15 participants, the smallest including one participant. Online FGDs were conducted through mobile applications such as WhatsApp and typically included 1-4 persons who met in a common space and shared a phone.

Facilitators and note takers were trained in using a streamlined Arabic tool for moderating the discussion and gathering qualitative data. All notes were then translated into English and coded thematically using MAXQDA software. The code taxonomy included over 600 codes and was reviewed in conjunction with all relevant protection sectors (GBV, General Protection, Child Protection, Mine Action).

GBV Expert FGDs

Two FGDs were conducted with 14 GBV experts working on the Syria humanitarian response. The two FGD followed the Delphi method which consists of presenting several statements that participants can agree or disagree with and elaborate on, with the aim of reaching a consensus on the formulation of each statement. As such the expert FGDs are critical in providing an accurate and holistic review of the status of GBV and GBV protection interventions in Syria in 2020.

Multisectoral Needs Assessment

Preliminary quantitative results from the 2020 MSNA conducted by OCHA in collaboration with all humanitarian actors operating in Syria was also used to complement qualitative data. The MSNA exercise was conducted in all 14 Governorates of Syria through KIIs (for protection questions). Data was aggregated at community level.

Secondary Literature Desk Review

The report also relies on secondary data on the humanitarian and GBV situations in Syria throughout 2020. This data includes various published reports, assessments reports, and other agency reports. This data was coded using the same coding system in MAXQDA and cited in the report.

Gaps and Limitations

As mentioned in the report, movement restrictions due to the COVID-19 crisis limited facilitators' access to some areas and participants, which led them to replace in-person FGDs with online FGDs. The facilitators noted several important challenges in conducting online FGDs, namely: not all participants own phones or have access to an internet connection, and online conversations do not offer the same possibility for reading participants' facial expressions which are important cues for moderating the discussion. For some participants, securing a safe and private setting from which to call and participate also proved challenging.

Annex 2: Terminology

Abduction

The criminal taking away a person by persuasion, by fraud, or by open force or violence. It is the unlawful interference with a family relationship, such as the taking of a child from its parent, irrespective of whether the person abducted consents or not. Kidnapping is the taking away of a person by force, threat, or deceit, with intent to cause him or her to be detained against his or her will. Kidnapping may be done for ransom or for political or other purposes.

Child or minor

Article 1 of the Convention on the Rights of the Child (CRC) defines a child as *“every human being below the age of 18 years unless under the law applicable to the child, majority is attained earlier”*. The Committee on the Rights of the Child, the monitoring body for the Convention, has encouraged States to review the age of majority if it is set below 18 and to increase the level of protection for all children under 18. Minors are considered unable to evaluate and understand the consequences of their choices and give informed consent, especially for sexual acts.

Child labour

The term ‘child labour’ is often defined as work that deprives children of their childhood, their potential and their dignity, and that is harmful to physical and mental development. It refers to work that: is mentally, physically, socially or morally dangerous and harmful to children; and interferes with their schooling by: depriving them of the opportunity to attend school; obliging them to leave school prematurely; or requiring them to attempt to combine school attendance with excessively long and heavy work.

In its most extreme forms, child labour involves children being enslaved, separated from their families, exposed to serious hazards and illnesses and/or left to fend for themselves on the streets of large cities — often at a very early age. Whether or not particular forms of ‘work’ can be called ‘child labour’ depends on the child’s age, the type and hours of work performed, the conditions under which it is performed and the objectives pursued by individual countries.

Confidentiality

An ethical principle associated with medical and social service professions. Maintaining confidentiality requires that service providers protect information gathered about clients and agree only to share information about a client’s case with their explicit permission. All written information is kept in locked files and only non-identifying information is written down on case files. Maintaining confidentiality about abuse means service providers never discuss case details with family or friends, or with colleagues whose knowledge of the abuse is deemed unnecessary. There are limits to confidentiality while working with children or clients who express intent to harm themselves or someone else.

Consent/informed consent

Refers to approval or assent, particularly and especially after thoughtful consideration. Free and informed consent is given based upon a clear appreciation and understanding of the facts, implications and future consequences of an action. In order to give informed consent, the individual concerned must have all adequate relevant facts at the time consent is given and be able to evaluate and understand the consequences of an action. They also must be aware of and have the power to exercise their right to refuse to engage in an action and/or to not be coerced (i.e. being persuaded based on force or threats). Children are generally considered unable to provide informed consent because they do not have the ability and/or experience to anticipate the implications of an action, and they may not understand or be empowered to exercise their right to refuse. There are also instances where consent might not be possible due to cognitive impairments and/or physical, sensory or intellectual disabilities.

COVID-19

COVID-19 is an infectious disease caused by a newly discovered (late 2019) coronavirus. Most people infected with the COVID-19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment. Older people, and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness.

Denial of Resources, Opportunities or Services

Denial of rightful access to economic resources/assets or livelihood opportunities, education, health or other social services. Examples include a widow prevented from receiving an inheritance, earnings forcibly taken by an intimate partner or family member, a woman prevented from using contraceptives, a girl separated from attending school, etc. Economic abuse is included in this category. Some acts of confinement may also fall under this category.

Disability

Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others. (UN Convention on the Rights of Persons with Disabilities)

Domestic violence (DV) and intimate partner violence (IPV)

While these terms are sometimes used interchangeably, there are important distinctions between them. 'Domestic violence' is a term used to describe violence that takes place within the home or family between intimate partners as well as between other family members. 'Intimate partner violence' applies specifically to violence occurring between intimate partners (married, cohabiting, boyfriend/girlfriend or other close relationships), and is defined by WHO as behaviour by an intimate partner or ex-partner that causes physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviours. This type of violence may also include the denial of resources, opportunities or services.

Early marriage (also referred to as forced or child marriage)

Early marriage is a formal marriage or informal union before age 18. Both girls and boys can be affected. Even though some countries permit marriage before age 18, international human rights standards classify these as child or early marriages, reasoning that those under age 18 are unable to give informed consent. Therefore, child or early marriage is a form of forced marriage as children are not legally competent to agree to such unions.

Economic abuse / Violence

An aspect of abuse where abusers control victims' finances to prevent them from accessing resources, working or maintaining control of earnings, achieving self-sufficiency and gaining financial independence.

Emotional abuse (also referred to as psychological abuse)

Infliction of mental or emotional pain or injury. Examples include threats of physical or sexual violence, intimidation, humiliation, forced isolation, social exclusion, stalking, verbal harassment, unwanted attention, remarks, gestures or written words of a sexual and/or menacing nature, destruction of cherished things, etc. 'Sexual harassment' is included in this category of GBV.

Empowerment of women

The empowerment of women concerns women gaining power and control over their own lives. It involves awareness raising, building self-confidence, expansion of choices, increased access to and control over resources, and actions to transform the structures and institutions that reinforce and perpetuate gender discrimination and inequality.

Gender

Refers to the social attributes and opportunities associated with being male and female and the relationships between women and men and girls and boys, as well as the relations between women and those between men. These attributes, opportunities and relationships are socially constructed and are learned through socialisation processes. They are context/ time-specific and changeable. Gender determines what is expected, allowed and valued in a woman or a man in a given context. In most societies there are differences and inequalities between women and men in responsibilities assigned, activities undertaken, access to and control over resources, as well as decision-making opportunities. Gender is part of the broader socio-cultural context.

Gender-based violence

An umbrella term for any harmful act that is perpetrated against a person's will and that is based on socially ascribed (i.e. gender) differences between males and females. The term 'gender-based violence' is primarily used to underscore the fact that structural, gender-based power differentials between males and females around the world place females at risk for multiple forms of violence. As agreed in the Declaration on the Elimination of Violence against Women (1993), this includes acts that inflict physical, mental or sexual harm or suffering, threats of such

acts, coercion and other deprivations of liberty, whether occurring in public or in private life. The term is also used by some actors to describe some forms of sexual violence against males and /or targeted violence against individuals or groups with diverse SOGIESC, in these cases when referencing violence related to gender-inequitable norms of masculinity and/or norms of gender identity.

Gender Equality

This refers to the equal rights, responsibilities and opportunities of women and men and girls and boys. Equality does not mean that women and men will become the same but that women's and men's rights, responsibilities and opportunities will not depend on whether they are born male or female. Gender equality implies that the interests, needs and priorities of both women and men are taken into consideration, recognising the diversity of different groups of women and men. Gender equality is not a women's issue but should concern and fully engage men as well as women. Equality between women and men is seen both as a human rights issue and as a precondition for, and indicator of, sustainable people-centred development.

Gender roles

A set of social and behavioural expectations or beliefs about how members of a culture should behave according to their biological sex; the distinct roles and responsibilities of men, women and other genders in a given culture. Gender roles vary among different societies and cultures, classes, ages and during different periods in history. Gender-specific roles and responsibilities are often conditioned by household structure, access to resources, specific impacts of the global economy, and other locally relevant factors such as ecological conditions.

Humanitarian assistance and services

Assistance and services provided for free for humanitarian purposes (i.e. non-political, non-commercial, non-military purposes) to persons based on their needs. This can include food and non-food items, medical supplies, clothing, and shelter material. Humanitarian services can include all activities of support offered to the population in need.

So-Called Honour Killings

Violence stemming from a perceived desire to safeguard family "honour", which in turn is embodied in female behaviour that challenges men's control over women, including control exerted through sexual, familial and social roles and expectations assigned to women by traditional ideology. Such female behaviour may include adultery, extramarital sex, premarital relationships that may or may not include sexual relations, rape, dating someone unacceptable to the family and violations of restrictions imposed on women and girls' dress, employment or educational opportunities, social lifestyle, or freedom of movement.

Perpetrator

Person, group or institution that directly inflicts or otherwise supports violence or other abuse inflicted on another against his/her will.

Physical assault/ Violence

An act of physical violence that is not sexual in nature. Examples include hitting, slapping, choking, cutting, shoving, burning, shooting or use of any weapons, acid attacks or any other act that results in pain, discomfort or injury.

Protection from sexual exploitation and abuse (PSEA)

As highlighted in the Secretary-General's 'Bulletin on Special Measures for Protection from Sexual Exploitation and Sexual Abuse' (ST/SGB/2003/13), PSEA relates specifically to the responsibilities of international humanitarian, development and peacekeeping actors to prevent incidents of sexual exploitation and abuse committed by United Nations, NGO, and inter-governments (IGO) personnel against the affected population, to set up confidential reporting mechanisms, and to take safe and ethical action as quickly as possible when incidents do occur.

Psychosocial support services

Any type of local or outside support that aims to protect or promote psychosocial well-being and/or prevent or treat mental disorder, and/or help to heal psychological wounds after an emergency or critical event. Psychosocial support services can be specialised for GBV survivors, such as focused individual counselling or group counselling aimed at addressing the harmful emotional, psychological and social effects of GBV.

Rape

Physically forced or otherwise coerced penetration – even if slight – of the vagina, anus or mouth with a penis or other body part. It also includes penetration of the vagina or anus with an object. Rape includes marital rape and anal rape/sodomy. The attempt to do so is known as attempted rape. Rape of a person by two or more perpetrators is known as gang rape.

Separated child

A child separated from both parents, or from their previous legal or customary primary caregiver, but not necessarily from other relatives. These may, therefore, include children accompanied by other adult family members.

Sexual abuse

The term ‘sexual abuse’ means the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

Sexual assault

Any form of non-consensual sexual contact that does not result in or include penetration. Examples include attempted rape, as well as unwanted kissing, fondling, or touching of genitalia and buttocks.

Sexual exploitation

The term ‘sexual exploitation’ means any actual or attempted abuse of a position of vulnerability, differential power or trust for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another. Some types of forced and/or coerced prostitution can fall under this category.

Sexual favour

The term ‘sexual favour’ or simply ‘favour’ is used in the Syrian and Middle Eastern context to refer to acts of sexual exploitation and abuse, and specifically demands for sex acts in exchange for something, such as money or humanitarian assistance.

Sexual harassment

Unwelcome sexual advances, requests for sexual favours, and other verbal or physical conduct of a sexual nature.

Sexual orientation, gender identity and expressions, sex characteristics (SOGIESC)

The acronym SOGIESC combines together different terms to refer to individuals and groups that do not fit within normative (heterosexual and cisgender) standards of sexuality, gender identity and gender expression. Sexual orientation (SO) is understood to refer to each person's capacity for profound emotional, affectional and sexual attraction to, and intimate and sexual relations with, individuals of a different gender or the same gender or more than one gender. Gender identity (GI) is understood to refer to each person's deeply felt internal and individual experience of gender, which may or may not correspond with the sex assigned at birth, including the personal sense of the body (which may involve, if freely chosen, modification of bodily appearance or function by medical, surgical or other means) and other expressions of gender, including dress, speech and mannerisms. Gender expression (GE) refers to external manifestations of gender, expressed through one's name, pronouns, clothing, haircut, behaviour, voice, or body characteristics. Sex characteristics (SC) include primary sex characteristics (e.g., inner and outer genitalia and/or the chromosomal and hormonal structure) and secondary sex characteristics (e.g., muscle mass, hair distribution and stature).⁶⁴

64 CBM Australia, Edge Effect, Nossal Institute (2020). Out of the Margins: An intersectional analysis of disability and diverse sexual orientation, gender identity, expression & sex characteristics in humanitarian and development contexts. Available at: https://www.edgeeffect.org/wp-content/uploads/2020/08/Out-of-the-Margins_Full-Report_June-2020_FINAL.pdf

Sexual violence

For the purposes of this publication, sexual violence includes, at least, rape/attempted rape, sexual abuse and sexual exploitation. Sexual violence is *“any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic a person’s sexuality, using coercion, threats of harm or physical force, by any person regardless of relationship to the victim, in any setting, including but not limited to home and work”*. Sexual violence takes many forms, including rape, sexual slavery and/or trafficking, forced pregnancy, sexual harassment, sexual exploitation and/or abuse, and forced abortion.

Survivor

A survivor is a person who has experienced GBV. The terms ‘victim’ and ‘survivor’ can be used interchangeably. ‘Victim’ is a term often used in the legal and medical sectors. ‘Survivor’ is the term generally preferred in the psychological and social support sectors because it implies resilience.

Trafficking in persons

The recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.

Unaccompanied and separated child

Separated children are those separated from both parents, or from their previous legal or usual caregivers, but not necessarily other relatives. As a result, this may include children accompanied by other adult family members.

Unaccompanied children are children who have been separated from both parents and other relatives and are not being cared for by an adult who, by law or custom, is responsible for doing so.

Victim

A victim is a person who has experienced GBV. The term recognises that a violation against one’s human rights has occurred. The terms ‘victim’ and ‘survivor’ can be used interchangeably. ‘Victim’ is a term often used in the legal and medical sectors. ‘Survivor’ is the term generally preferred in the psychological and social support sectors because it implies resilience.

Women and Girls Safe Spaces (WGSS)

WGSS are places (formal, informal and, most recently, online) where women and girls feel physically and emotionally safe. “Safe” in this context refers to the absence of trauma, excessive stress, violence (or fear of violence) or abuse. WGSS also provide a place where women can access confidential services, discuss issues and concerns with other women and professional staff. Safe spaces also provide an entry point for women and girls to access referrals to other safe and non-stigmatising GBV response services.

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