



Gender-based Violence Working Group
Lebanon
Minutes of the Meeting

GBV WG MoM	
Date	19 February 2025
Time	10-12:00
Location	Hybrid facilitation
Chairpersons	Sophie Etzold (GBV WG Coordinator, UNHCR) Tesfaye Barge(GBV WG Coordinator, UNFPA) Mohita Joshi (GBV sub-sector IM Specialist)
Participants	28 participants online and 10 agencies in person
Supporting documents	Deck Presentation is attached.
Agenda	<ul style="list-style-type: none">● Update on coordination work streams<ul style="list-style-type: none">➢ Coordinators' update➢ Follow up action points from the previous meeting➢ Work plan – see link to final version➢ Log frame and reporting framework – see link to shared folder here➢ Update on LRP 2025 progress (<i>including Flash Appeal (Jan-Mar)</i>)➢ Update on the impact of US funding cuts on GBV sector activities● Presentation from GIZ on their MHPSS and GBV program● Partner Update (CARE safety audit)● Brief about UNFPA's planned study on the impact of the conflict on GBV in Lebanon● <i>Short overview of Safety Audit findings and VASyR 2024 (Safety Audit will be circulated shortly) – postponed to next meeting and separate invite for Safety Audit as necessary</i>● AOB

Main Follow up Action Points (Action Points in yellow)

1) Coordination Updates and Work Streams

- **New coordinator arrived for UNFPA:** Mr Tesfaye Barge (barge@unfpa.org)
- **GBV WG 2025 Work plan** – see link to [final version](#)
 - Thanks to all partners involved in the workshop in developing the work plan and for colleagues of core groups and coordinators for any additional feedback
- **Core Group election process**
 - The CG ToR was finalized and will be shared in the coming days. The election process will be launched shortly.
 - GBV WG coordinators are asking for relevant UN agencies + 4 national and 4 international NGOs with relevant profile



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- An anonymous online survey for the nomination of the Core group will be shared shortly.
- **NGO co-coordinator**
 - Information on agreement across core group members to introduce an NGO co-coordinator
 - NGO co-lead guidance note and ToR will be shared with the Core team soon. Once the ToR is approved, the anonymous online survey will be shared with WG members to nominate the co-lead.
- **Updating of contact information**
 - GBV IM Specialist created a form to reflect the agency-specific focal point and alternate responsible for the technical implementation and GBV response of the partner
 - The contact list is different from the mailing list as the contact form indicates only 1 or 2 actors by the agency to be held accountable/ responsible for the agency's program

Action Points:

- Partners to identify areas where they can actively contribute to outcomes, activities, initiatives, etc.
- GBV IM Specialist to add partners who appealed under the relevant outcome areas
- Finalization of Core Group and NGO Co-coordinator TORs and circulation to all members (within February)
- Partners to fill out the Contact Form asap

Log frame and reporting framework – see link to [shared folder here](#)

- Presentation by IM specialist of appealing partners and reporting achievements
- GBV WG indicators for 2025 mainly remained in line with previous years, but reduction of legal indicators and disaggregation simplification

Changes to indicators in red

- Maintained key indicators on systems strengthening/ capacity building
 - a. Differentiation between governmental or humanitarian stakeholders
 - b. Included increased knowledge on GBV
- Access to legal aid to be provided through GBVIMS data on % of survivors accessing legal aid
 - a. Indicators on legal aid by legal aid/ GBV actors are taken out
- Prevention indicators remained the same
 - a. Dignity kits and satisfaction included
- Response indicators remain similar with slight changes on case management and adding the below:
 - a. Client feedback surveys to be reintroduced
 - b. Cash indicators are now to be reported under GBV

Action Points:

- Question on whether all actors have to report separately on cash impact:
 - Yes, please use the sectoral cash SOPs and PDM
 - GBV coordinators to add Cash SOPs, including PDM, to the shared reporting folder



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Update on LRP 2025 Appeal and Reporting Progress (including Flash Appeal (Jan-Mar)) – details in the PPT attached from GBV WG deck presentation 23 February.

- The main findings include a high number of partners (55) appealed under GBV in the Lebanon Response Plan; however, only 14 partners reported on ActivityInfo
 - Appealing partners, requesting for a total of \$47.5 Million (higher than expected sector planning ~30 million USD).
 - 55% for Outcome 3
 - 31% for Outcome 2
 - 14% for Outcome 1
- 26 NNGOs
- 24 INGOs
- 6 UN agencies

Questions and Discussion:

- Awareness reporting is higher under LRP than Dignity Kits, which is in line with sectoral guidelines, however, under the Flash Appeal, the # of DKs is significantly higher than the # of people reached with awareness
 - Guidance: DK distribution is part of GBV programming – mostly provision of awareness on services, as an entry point to provide GBV services, and as part of prevention or response services
 - Indicators for general awareness and provision of dignity kits should be separately reported (add * to share that this could include the same beneficiary who is benefitting from a different service)
- On the cash transfer value – partners can apply flexibility with the Transfer Value; in January 2025, the TV was set to 150 USD for all protection (CP/GBV) actors using cash assistance as part of their programs;
 - If partners are unable to upscale any previously developed program, they can implement the highest ceiling value possible in accordance with the case's needs.

Action Points:

- Timely reporting on bi-weekly (3 indicators until the end of March) and on a monthly basis for regular LRP activities
- GBV IM and coordinators to follow up and contact 55 partners, appealing and reminding them on reporting requirements
- Need for further guidance on reporting responsibility; for the past 12 years, the process has been that appealing actors add information under the LRP appeal and the Lebanon Aid Tracking while the implementing actor who implements the program is required to report on a monthly basis
- Confirm appeal by NCA (Mohita and Sophie)



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- Add guidance to the online GBV log frame on the indicators on DK and awareness
- North to review the reporting of sector members (for Tripoli and T5)

Update on the impact of US funding cuts on GBV sector activities

- In 2024, the US was the primary donor for the GBV Sub-Sector (GBV SS), contributing 14.2% of the total funded activities, while no other donor exceeded 11%.
- Based on this calculation, approximately 39,000 people will be affected by the US funding cuts.
- However, a review of the reached population revealed that 32% of all individuals reached in 2024 were supported through US-funded programs.
- If this is applied to the 2025 planning figures, an estimated 91,200 people out of the 285,569 targeted in 2025 will be at risk of not accessing services.
- It is also worth noting that by the end of 2024, the GBV sub-sector had secured only 61% of the required funding, leaving a critical 39% gap threatening lifesaving GBV interventions.

Discussion/ challenges:

- Partners shared concerns that some partners have already started renaming programs;
- It was also mentioned that in previous years, when an anti-gender/GBV discourse erupted, partners have amended names as required to prevent cutting of life-saving GBV programs.

Action Points:

- Additional analysis on the impact on funding throughout the year and the impact on GBV and gender-specific challenges/ cuts and policies affected
- GBV actors to provide additional feedback to national and sub-national coordinators should a program be changed
- All partners to update the Service Mapping ASAP but latest by **28 February**

2) Presentation from GIZ on their MHPSS and GBV program

- GIZ colleagues presented their 4-year program on MHPSS and GBV; see the details in the PPT
- The project aims at strengthening the MHPSS capacities of local institutions and community-level actors to support violence prevention and quality of response to GBV

Questions/ comments:

- Who are the implementing actors
 - GIZ works mainly through direct implementation for this specific project and will recruit specialized consultants for some of the areas
- UNFPA recently launched a study on MHPSS good practices in GBV
 - To be shared with GIZ for reference
- Relevant actors to be included are a syndicate of social workers, order of psychologists and midwives.
- On the capacity of PHCCs, UNFPA also mentioned that the CMR TF has an updated list/ mapping of existing PHCCs with SRH services included; MOPH is assessing the capacities and needs of PHCCs
 - GIZ to be connected to Hussein Sweid and Wafaa from MoPH/leads of the CMR TF



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- On the Bystander training (pool of TOT to roll-out training to community actors), more information on the nature of the training is to be provided by GIZ to enable actors to comment more comprehensively.
- GIZ to look at GBV WG service mapping to see locations and service available in the respective locations, that will help them to avoid duplication and enhance complementarity with existing MHPSS interventions.

Action Point:

- Set a separate meeting with the relevant core group and sector members for more detailed feedback on the questions, if required, for GIZ.
- Connect GIZ colleagues with relevant WGs

3) Partner Update (CARE safety audit)

- CARE International presented an overview of its planned safety audit
- Safety Audit will commence in March 2025, with a data/ desk review started in February
- Overall, the Safety Audit by CARE has some overlap in the locations (country-wide) and information collected compared to the recently launched GBV Safety Audit of the GBV WG

Action Points:

- Recommendations included sharing the Safety Audit tools with the GBV Core Group and ensuring that there is no duplication in the information given the large-scale IA assessment just finalized.
- Focus on safe shelters to be discussed with safe shelter actors and GBV coordinators.
- Also, ensure close collaboration between consultants of UNFPA study on the impact of war/ crisis and the CARE SA

4) Brief about UNFPA's planned study on the impact of the conflict on GBV in Lebanon

- UNFPA has recently commissioned a study to assess the impact of the crisis/ war on GBV in Lebanon
- Main objectives
 - Assess the impact of the conflict on the **access, availability, effectiveness, and quality** of the SRH and GBV services.
 - Assess the impact of the conflict on **GBV risks** (e.g., sexual violence, intimate partner violence, child marriage) and **SRH concerns** like UTI and maternal outcomes.
 - Identify the **gaps and needs** of delivering SRH and GBV services during the conflict.
 - Draw up **the lessons learned** from the last conflict to enhance SRH and GBV emergency preparedness and response.

Action Point:

- UNFPA to add the assessment on the LASER platform on the Lebanon Information Hub
- Reminder for all partners to share any planned or conducted assessments with the GBV WG coordinators at national level to ensure repository, guidance from sector level, alignment to



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sectoral standards and participatory process is upheld. It is also crucial to share plans to ensure resources are used carefully and to prevent overlap and prevent assessment fatigue.

5) Short overview of Safety Audit findings and VASyR 2024

- Due to a shortage of time, the presentation of Safety Audit findings was postponed and it was decided to develop a core team working on cross-sectoral findings stemming from the IA GBV SA
- VASyR findings also quickly to be presented in the next WG meeting (see presentation for an overview)

Action Point:

- A follow-up meeting to be held by GBV Coordinators and to discuss recommendations and cross-sectoral findings to be presented to ISCG

END