IMAGES Country Study Documentation

Lebanon

2017



Gender-based inequality as measured by the 2014 Gender Inequality Index (GII) is moderately low in Lebanon as compared to other countries in the Middle East and North Africa (MENA) region (UNDP, 2015). Out of 155 countries, Lebanon ranks 78th on the composite index which reflects reproductive health, empowerment and economic activity. The maternal mortality ratio (16/100,000) and the adolescent birth rate (12/1,000) are comparatively low, demonstrating good reproductive health delivery. The percentage of women (53%) and men (55.4%) with secondary education is about the same, which is supported by high literacy rates among both men (98.9%) and women (99.3%) aged 15-24 years old (World Bank, 2015). However, the participation of women in the labor force is 23.3% compared to 70.9% among men and only 3.1% of parliamentary seats are held by women (UNDP, 2015). Therefore, the overall GII value indicates a 38.5% loss in human development due to inequality between female and male achievements in Lebanon.

In the World Economic Forum's 2016 Gender Gap Index, Lebanon ranks 135th out of 144 countries with a score of 0.598 (0.00 = inequality, 1.00 = equality) (World Economic Forum, 2016).

The Gender Gap Index assesses the gap between men and women in four categories: economic participation and opportunity, educational attainment, health and survival and political empowerment. As the GII indicates, Lebanon scores high in educational attainment and health and survival. However, the equality indicators for economic participation and political empowerment result in Lebanon being the 6th most gender unequal Arab state.

Following the end of the 15-year long civil war in 1990, Lebanon ratified the Convention on the Rights of the Child (CRC) in 1991 and the Convention of the Elimination of All Forms of Discrimination against Women (CEDAW) in 1997. Despite efforts to promote gender equality in Lebanon, historical, political and legal particularities of the country seem to hinder successful change towards equality between men and women. The Lebanese society is strongly embedded within traditional social practices and diverse religious beliefs. It also faces a feeble legal and political system, which maintains discriminatory practices against women.

Evidence on men's and women's gender related attitudes and behaviors in Lebanon is scarce. Academic research and civil society's engagement have focused on women and their empowerment, however initiatives that comprehensively address men's practices and perspectives have yet to be created. The influx of Syrian refugees poses an additional complexity to gender dynamics in the Lebanese context which has led to increased discussion on the impact of conflict on men's and women's roles and women's rights, specifically with regard to gender-based violence.

At the root of gender-based violence are gender expectations, norms, and power dynamics which shape behaviors, opportunities, and material realities. Addressing these issues requires interventions that involve men and boys and considers deeply rooted gender dynamics between men and women across multiple dimensions of daily life. The role of men and their own gendered experiences, however, are rarely acknowledged in policies, programs, and public discourse.

The goal of IMAGES is to provide data and insight to understand how gender and masculinities impact a wide range of wellbeing and development outcomes. IMAGES is one of the most comprehensive household studies ever carried out on men's and women's attitudes and practices on a wide variety of topics related to gender equality. The study's emphasis on understanding gendered dynamics influencing a wide range of men's and women's behaviors complements existing research and policy initiatives. The data and conclusions generated from IMAGES have also served as the foundation for program development and have informed nationallevel discussions and the development of new policies.

The IMAGES study in Lebanon was part of a four-country MENA study (also including Egypt, Morocco, and Palestine) that collected data through surveys, qualitative focus groups, and in-depth interviews. The study objectives were to assess the current behaviors and attitudes of men on a wide range of gender-related issues, including gender-equality and gender roles, and their experiences related to intimate relationships, fatherhood, and gender based violence; compare these results with women's attitudes and behaviors as well as with regional and international data; assess men's knowledge of and attitudes towards policies that have sought to promote gender equality; and explore factors that may explain variation in men's behaviors in their family lives and intimate and sexual relationships, including childhood experiences of violence, gender norms, stress, migration, and unemployment, among others. A year-long consultation, starting in 2015, was conducted with research partners in the region as well as with civil society, UN Women staff in each country, and government counterparts.

A review of existing research and surveys on context-specific issues related to masculinities and gender equality in the MENA region complemented the process.

Survey

Surveys were built on existing IMAGES questionnaires used in other contexts, which drew from the "Questionnaire on Gender Equality and Quality of Life" developed by the Norwegian Ministry of Gender Equality and Children Affairs, the World Health Organization's (WHO) multicountry study on violence against women, and the Gender Equitable Men (GEM) Scale developed by Promundo and others.

The survey included questions on:

Sociodemographic information and status, childhood information (gender relations in childhood household, gendered experiences, discipline, difficult life circumstances), household relations (time use and division of labor in the household, final say in the household, empirical and normative expectations), parenting and relationship with children (antenatal care, time use and caregiving, non-residential biological children, child discipline techniques, empirical and normative expectations), women's participation and public life, laws and policies, violence in relationships (relationship control, violence against women, rape myths, empirical and normative expectations), health and quality of life (general health information, health seeking behavior, substance abuse, life satisfaction and locus of control, depression, sexual and reproductive health, attitudes about family planning, fertility aspirations and family planning, sexually transmitted diseases, abortion), attitudes on relations between men and women, life experiences (neighborhood violence, social cohesion), media exposure, and survey satisfaction.

The Lebanon survey only asked questions related to parenting and intimate partner violence to married respondents.

Data was collected over 10 weeks between June and September 2016 by 10 fieldworkers, 5 of whom were male and 5 of whom were female. Respondents were selected through a two-stage cluster sampling approach. The study was conducted in all governorates of Lebanon and was designed to provide representativeness of both Lebanese and displaced Syrians.

In light of the ongoing conflict in Syria and the great number of Syrians residing in Lebanese communities, both Lebanese and Syrians were included in the study sample. The IMAGES study in Lebanon therefore also sought to compare and correlate gender dynamics within the country and other men and women in the region. In total, 1,380 men and 1,380 women were targeted, accounting for an anticipated refusal rate of 12% and a non-completion rate of 3%. These numbers were based on the rational for cluster sampling to reach representativeness of the target population.

Households were approached in 92 randomly selected clusters from official administrative geographical divisions of Lebanon, named municipalities/cadasters, by probability proportional to size. PPS sampling has the advantage of attributing different probabilities of selection to communities according to their respective size. If one cadaster was sampled more than once, different starting points were set based on the number of times it was chosen with certainty, so that an equal division in terms of demographic concentration could be ensured.

The division of cadasters was done using satellite images, which was supplemented by the help of local authorities to delineate boundaries of the field.

Researchers sampled men and women in different clusters to avoid interviewing men and women in the same household. Only male fieldworkers interviewed male respondents, and only female fieldworkers interviewed female respondents. Some clusters that were randomly selected had a low number of residents. Since these did not ensure the representativeness of the study, alternative clusters were chosen.

Because Lebanon lacks household listings and no enumeration was possible prior to the implementation of the survey, the World Health Organization's Expanded Program of Immunization (EPI) cluster approach method was applied to select households. The EPI cluster approach is one of the most common spatial sampling methods adopted in household surveys in low resource settings. A list of locations such as landmarks, markets, mosques, or churches was established.

A location was randomly chosen from this list and used as a starting point for the random identification of a direction to start household selection, which was determined by spinning a pen or sharp object. Male fieldworkers started walking in the direction of the blunt end, and female workers started in the direction of the sharp end. This guaranteed that male and female participants were not chosen from the same part of the cadaster. No problems were reported during the data collection phase regarding household selection.

Fieldworkers proceeded by visiting the first building or house pointed to by the object. If an apartment building was approached, fieldworkers started with the highest floor on the right side. Fieldworkers then skipped five households before selecting the second household. To continue, fieldworkers went to the nearest door of a building or house on the right and repeated the process to recruit new study participants until the target number of 15 participants was reached. If a boundary or cluster was reached without being able to recruit 15 participants, the sampling in that cluster stopped and no replacement took place.

One participant was selected per household. In order to qualify as a respondent, individuals had to be between ages 18 and 59 years old. If the eligible person was not present at the time of visit but was able to be interviewed at another time during the day of recruitment, the person was revisited. Because many male respondents worked during the day, fieldworkers approached participants in the evening. If the eligible person was not present at all, the fieldworker randomly selected another person from the household for the interview.

All respondents were fully informed about the purpose and procedures of the study and were told that their participation in the survey was voluntary and that they had the right to terminate the survey or refuse to answer any questions. In the case of questions about suicidal ideation, respondents were offered contact information for local service providers able to provide care and support. To ensure confidentiality, fieldworkers were not allowed to be from the cadaster in which they were conducting interviews.

Interviews lasted between 20 minutes to 1.5 hours depending on the respondent's understanding of the survey. As data collection progressed, the length of interviews was reduced, which may have been linked to fieldworkers' accumulated experience.

Tablets were used to create a database on KoBo Toolbox software. The use of tablets fastened interview completion and facilitated data entry. Download and analysis of data was carried out daily to allow survey teams to correct errors. This process was supervised by a technical team through regular quality checks and close monitoring of the quality and validity of data entry files.

The questionnaires were piloted in a cluster within Beirut which was not part of the clusters in the study later on. Close supervision by Connecting Research to Development (CRD) staff was done on fieldworkers' performance in sampling, interviewing and filling in forms. Fieldworkers were also asked to complete a feedback form after each interview to obtain respondents' opinions and comments on the questionnaire.

A debriefing session was done after fieldworkers returned in which trainers and fieldworkers discussed challenges faced in the field, major problems with the questionnaire and tablets, and respondents' feedback. After 150 questionnaires were completed from June to July 2016, results were evaluated by the team. Changes were made to the questionnaire because many respondents and fieldworkers reported misunderstandings. These initial questionnaires were reconsidered as pilot questionnaires, taken off the sample and replaced.

After the questionnaire was adjusted due to the number of identified confusions among both fieldworkers and participants during pilot testing, reported misunderstandings were minimal. Clarifications made for fieldworkers helped to reduce the confusion among participants. Nevertheless, there were a few issues continuously reported during fieldwork. First, the length of the questionnaire was often demotivating for participants and assumed to be an important factor for high refusal rates. Second, the sensitivity of questions led to a number of participants that refused to answer some of the questions.

Third, to conduct the interview alone in a private setting was sometimes difficult to obtain due to local circumstances. Some respondents insisted on family members to sit with them during the interview. It was particularly challenging for respondents to answer questions related to intimate partner violence (IPV), so the research team developed an additional 'nested' sample on IPV using a shorter, more focused questionnaire.

Two forms, the household tracking form and individual selection form, were not compatible with the KoBo Toolbox. The data for these forms were collected on paper and eight data entry personnel administered the entry data manually. Each form was checked by supervisors in the field for completeness and accuracy.

To minimize response bias, only those interviewed participants who completed the questionnaire were included in the final analysis. A questionnaire would have been considered as incomplete if a participant stopped and discontinued the questionnaire at any point during the interview process.

Final data analysis included descriptive and bivariate analyses focusing on prevalence and frequency outputs. T-tests and chisquared tests were used to test specific associations between Lebanese and Syrian respondent answers. Additional multivariable analysis was conducted in selective cases, i.e. gender attitudes and perpetration of violence and sexual harassment. A p-value of less than 5% was considered a statistically significant result.

<u>Focus Groups and Interviews</u> Qualitative data were also collected that re not detailed here.

3

SAMPLE SIZE AND LOCATION

All men and women between ages 18 to 59 of Lebanese or Syrian descent were eligible to take part in the study. In total, 1,380 men and 1,380 women were targeted. The calculation of the sample size was based on the rationale for cluster sampling assuming a significance level of 5%, a design effect of 3, a precision of 5% and a probability of 50% of individuals having a positive attitude towards gender equality (and 50% of individuals having a negative attitude towards gender equality). This probability was chosen to account for any possibility, without relying on existing data. The sample size calculation led to a total of 1,152 males and 1,152 females, founded up to 1,200 each. To account for an anticipated refusal rate of 12% and a non-completion rate of 3%, the targeted number of both males and females were each raised to 1,380 participants.

Data from IMAGES questionnaires was collected from 2,186 respondents from ages 18 to 59, 1,050 of whom were male and 1,136 who were female. 407 respondents were Syrian (slightly under 20% of the sample), which is roughly proportionate to their representation in the current Lebanese population.

SAMPLE SIZE AND LOCATION

The Palestinian refugee population was not included in the quantitative sample since access could not be secured to the largest Palestinian refugee camp in Lebanon. 278 participants in 20 focus group discussions and 26 semi-structured interviews with Lebanese residents and Syrian refugees in North and South Lebanon, Beirut, and Mount Lebanon were conducted.

The following two tables show the location of study participants. Further details on the demographic characteristics are available in the full quantitative research report.

Geographical coverage of all governorates in Lebanon was achieved apart from few areas which were not accessible for the fieldworkers due to their potentially compromised safety.

Number of Urban and Rural Respondents by Region, Total Sample IMAGES MENA, Lebanon 2016								
	Number	Percent	Number	Percent				
Beirut	301	14%	1	0.2%				
Mount Lebanon	928	44%	120	19%				
North	396	19%	164	26%				
Bekaa	153	7%	156	24%				
South	252	12%	51	8%				
Nabatieh	77	4%	151	24%				
Total	2,107	77%	643	23%				

SAMPLE SIZE AND LOCATION

The table combines the men's and women's samples.

Governorate	District	Original Target	Adjusted Target for Security	Reached Target	Percentages	Number of Revisits
Total						
Beirut	Beirut	240	240	240	100	40
	Total	240	240	240	100	40
Bekaa	Baalbak	180	90	74	82.2	9
	Hermel	30	30	30	100	0
	Rachaya	30	30	30	100	0
	West Bekaa	60	60	54	90	11
	Zahle	180	180	168	93.3	24
	Total	480	390	356	91.3	44
	Aley	120	120	111	92.5	20
	Baabda	330	330	314	95.2	52
	Chouf	120	120	105	87.5	19
Mount Lebanon	El Metn	270	270	254	94.1	70
Lebalion	Jbeil	30	30	30	100	3
	Keserwen	120	120	107	89.2	33
	Total	990	990	921	93	197
	Bint Jbeil	30	30	30	100	2
	Hasbaya	30	30	30	100	5
Nabatieh	Marjeyoun	30	30	30	100	2
	Nabatieh	60	60	49	81.7	5
	Total	150	150	139	92.7	14
North	Akkar	210	210	194	92.4	29
	Batroun	30	30	24	80	1
	Bcharre	30	30	30	100	1
	Koura	30	30	30	100	0
	Minieh- Donnieh	90	90	60	66.7	0
	Tripoli	180	180	165	91.7	26
	Zgharta	30	30	30	100	3
	Total	600	600	533	88.8	60
South	Jezzine	30	30	30	100	1
	Saida	150	150	138	92	17
	Sour	120	120	104	86.7	11
	Total	300	300	272	90.7	29
Total		2,760	2,670	2,461	92.2	384

4 RESPONSE RATE

Data from IMAGES questionnaires was collected from 2,186 respondents from ages 18 to 59, 1,050 of whom were male (response rate (%) = 89.6) and 1,136 who were female (response rate (%) = 94.8).

Sample	Total	Men	Women
Anticipated number of participants	2,760	1,380	1,380
Number of visited participants	2,670	1,335	1,335
Number of revisited participants	384	201	183
Number of non-accessed participants due to security situation in Baalbak	90	45	45
Number of refusals	209	139	70
Refusal rate (%)	7.83	10.41	5.24
Sample size	2,186	1,050	1,136
Response rate (%)	92.30	89.60	94.80

5 WEIGHTING PROCEDURE

No additional information available in this section.

6 MISSINGNESS ASSESSMENT

No additional information available in this section.

7

QUALITY CONTROL

Download and analysis of data was carried out daily to allow survey teams to correct errors. The process was supervised by a technical team through regular quality checks and close monitoring of the quality and validity of data entry files.

The dataset was checked for missing values to validate the quality of data that was collected. Since the electronic tools did now allow an interviewer to 'skip' a question, no missing values were reported. However, refusals or 'don't know' answers were recoded as 'missing.'

Data was also pre-checked for any errors. The likelihood of data errors was reduced by the integration of coding in the electronic tool which enabled a direct transfer of the correctly coded variables into the dataset. Recoding was needed for open-ended questions.

8 INTERVIEWER TRAINING

Fieldworkers were trained during a sevenday training conducted by Connecting Research to Development in cooperation with Promundo and UN Women. The training included a review of the questionnaire, role playing scenarios, pretesting tools, and learning how to use a tablet and KoBo Toolbox software in order to help participants fully comprehend data collection methods. The training also included discussions about ethical considerations and training on gender, violence, ethical procedures in gender and masculinities research, and how to ask sensitive questions and respond to respondents in distress. PowerPoint presentations, discussions and role-playing were the key techniques used throughout the course of training. At the end of each day and of the training as a whole, participants provided feedback through elective anonymous evaluations. Challenges encountered included the length of training and technical issues with the KoBo application on tablets.

9 DATA COLLECTION PARTNER

Connecting Research to Development (CRD) assisted in quantitative research as well as the training for fieldworkers. ABAAD conducted qualitative focus group discussions for Lebanese and Syrian participants and CRD conducted focus groups for Palestinian refugees with assistance from independent researcher Jinan Usta (AUB).

TO ETHICAL APPROVAL

Ethical approval was obtained by IRB at La Sagesse University in Lebanon and followed standard ethical procedures for research on intimate partner violence (IPV).

11

NOTES ON STUDY

Acknowledgments:

Connecting Research to Development team who contributed to the outcome of this study decisively with guidance from UN Women and Promundo, as well as all those who assisted in one way or another to make this project a success, including Dr. Ziad Mansour, Dr. Mary Deeb, Lina Brandt, Racha Said, and Lina Torossian.

IMAGES International Men and Gender Equality Survey