

Executive Summary

Adolescent Girls in Lebanon

Their Access to Education and Other Relevant Services: Barriers and Facilitators

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Key Terms and Definitions

Access to Education¹

Access to education includes on-schedule enrolment and progression at an appropriate age, regular attendance, learning consistent with national achievement norms, a learning environment that is safe enough to allow learning to take place, and opportunities to learn that are equitably distributed.

The Glossary of Education Reform² lists the types of access that government agencies, service providers, and schools may provide to students:

- Access to adequate public transportation to attend public schools and charter schools that may or may not be located near students' homes.
- Access to assistive technologies, accommodations, or modified school facilities and transportation vehicles that make full participation in school programmes possible for students with various forms of disability.
- Access to equal opportunities in educational programmes and activities regardless of gender, race, or sexual orientation, including extracurricular activities and sports.
- Access to adequate healthcare and nutritional services, including free or reduced-price school breakfasts and lunches to ensure that children living in poverty are not attending school sick or hungry.
- Access to counselling, social services, [academic support](#), and other resources that can help students who are [at risk](#) of failure or dropping out to remain in school.
- Access to technology, including high-speed internet connections and adequate hardware (computers, laptops, tablets) and software (particularly learning applications) so that students have equitable access to digital and online learning opportunities regardless of their family's income level or ability to pay for these technologies.

Adolescent³

Persons aged 10–19, as defined by the World Health Organisation and UNICEF.

Adulthood⁴

Adulthood implies a maturity of sorts, whether it be physical or psychological. In many cultures, adulthood is marked with a "coming of age" ritual. This does not necessitate the age group above 18 years, though legally it is categorised as such.⁵

Basic needs⁶

Basic needs comprise any resource deemed necessary for persons or households to achieve and maintain physical well-being (Collin & Campbell, 2008). In this study, these are taken to include food, water, and shelter, healthcare, sanitation, social recognition, and education.

¹ Lewin, Keith M. (2015). *Educational access, equity, and development: planning to make rights realities*. Fundamentals of Educational Planning 98. Paris: UNESCO-IIEP.

² Sabbott. (2013, May 15). The Glossary of Education Reform. <https://www.edglossary.org/access/>.

³ Ozer, Emily J. & Piatt, Amber A. (2017). *Adolescent Participation in Research: Innovation, Rationale and Next Steps*. Innocenti Research Brief No. 2017/07.

⁴ "adulthood." <https://www.vocabulary.com/dictionary/adulthood>.

⁵ United Nations. (1996, June 7). Concluding observations of the Committee on the Rights of the Child: Lebanon. CRC/C/8/Add.23, paras. 5-6, 31-36, pp. 114-137.

⁶ Rewathy, K. (2021, February). Vagrant Community and Their Basic Needs: A Case Study Based on Thotalanga Homeless People. *Sri Lanka Journal of Population Studies*, Vol. 22 (1), pp. 45-57.

Caregiver⁷

Caregivers are those responsible for the care of children and may include mothers and fathers, grandparents, siblings, and others within and beyond the extended family network.

Child⁸

Persons aged below 18 years, as defined by the Convention on the Rights of the Child, unless the laws of a particular country set the legal age for adulthood younger.

Child Health⁹

Child health is a state of physical, mental, intellectual, social, and emotional well-being, and not merely the absence of disease or infirmity. Healthy children live in families, environments, and communities that provide them with the opportunity to reach their fullest developmental potential.

Child Labour¹⁰

Employment of children of less than a legally specified age. Child labour includes both paid and unpaid work. In the latter category, care work¹¹ represents one of the forms in which women and girls from socially disadvantaged groups are engaged. Care work includes attending to the direct (feeding; nursing) and indirect (cooking; cleaning) needs of one or more people.

Child Marriage¹²

Child marriage refers to any formal marriage or informal union between a child under the age of 18 and an adult or another child.

Child Protection¹³

UNICEF uses the term “child protection” to refer to prevention and response to violence, exploitation, and abuse of children in all contexts. This includes reaching children who are especially vulnerable to these threats, such as those living without family care, on the streets, or in situations of conflict or natural disasters.

Formal Education¹⁴

Learning that takes place in education and training institutions and centres. This learning is recognised by national authorities and bodies, and leads to diplomas and qualifications. Formal learning is structured according to educational arrangements such as curricula, qualifications, and teaching-learning requirements.

⁷ UNICEF. (2021). Global Multisectoral Operational Framework for Mental Health and Psychosocial Support of Children, Adolescents and Caregivers Across Settings.

⁸ Ozer, Emily J. & Piatt, Amber A. (2017). *Adolescent Participation in Research*.

⁹ First Things First. (2007). Framework for Early Childhood Recommendations.

¹⁰ “child labour.” (2023). *Encyclopaedia Britannica*. <https://www.britannica.com/money/topic/child-labour>.

¹¹ Addati, I., Cattaneo, U., Esquivel, V. & Valarino, I. (2018). *Care work and care jobs for the future of decent work*. International Labour Organisation. https://www.ilo.org/global/publications/books/WCMS_633135/lang--en/index.htm.

¹² UNICEF. (2020). “Child Marriage.” <https://www.unicef.org/protection/child-marriage>.

¹³ UNICEF. (December 2015). “Child protection overview.” <https://data.unicef.org/topic/child-protection/overview/>.

¹⁴ UNESCO. (2019). “National strategy for alternative education pathways.” <https://en.unesco.org/news/national-strategy-alternative-education-pathways>.

Forms of Violence¹⁵

Violence against children includes physical, emotional, and sexual abuse. Children may be subjected to violence in everyday settings, such as in their homes, schools, and communities, both in-person and online. Common, everyday forms of violence may be socially accepted as a normal part of growing up and may not even be considered violence.

Gender Norms¹⁶

Gender norms are socially learnt roles and responsibilities assigned to both sexes in a given culture, along with the societal structures that support these roles.

Non-Formal Education¹⁷

Non-Formal Education is learning that has been acquired in addition to or alternatively to formal learning. In some cases, it is also structured according to formal educational and training arrangements, but is more flexible. It usually takes place in community-based settings, the workplace, and through the activities of civil society organisations. Through a recognition, validation, and accreditation process, non-formal learning can also lead to qualifications and other recognitions.

Socio-Ecological Model¹⁸

A framework that takes into account the interactive effects of personal and environmental factors that determine human behaviour. A socio-ecological framework usually includes five levels of analysis: individual, interpersonal, community, organisational, and policy or enabling environment.

Social Norms¹⁹

Social norms are rules or expectations of behaviour in a cultural or social group. They are dynamic and can change over time, with new norms emerging to replace old ones. While many norms are supportive of well-being and development, others may be oppressive or even harmful to some community members, or only beneficial to certain members. Social norms persist because of social approval when they are followed and disapproval when they are violated.

Youth²⁰

Persons aged 15–24, as defined by UNICEF.

Youth-Led Participatory Action Research (Y-PAR)²¹

An innovative approach to research and positive youth development based on social justice principles in which adolescents are trained to conduct systematic research to improve their lives, their communities, and the institutions intended to serve them.

¹⁵ UNICEF. (2021). Child Protection Advocacy Briefing, Violence Against Children. <https://www.unicef.org/media/96686/file/VAC-Advocacy-Brief-2021.pdf>

¹⁶ UNICEF Eastern and Southern Africa Region. (2016). *Addressing social norms and gender in support of equity in education*.

¹⁷ "Non-formal education." UNESCO Institute of Statistics. <http://uis.unesco.org/en/glossary-term/non-formal-education>.

¹⁸ Ozer, Emily J. & Piatt, Amber A. (2017). *Adolescent Participation in Research*.

¹⁹ UNICEF Eastern and Southern Africa Region. (2016). *Addressing social norms and gender in support of equity in education*.

²⁰ Ozer, Emily J. & Piatt, Amber A. (2017). *Adolescent Participation in Research*.

²¹ Ibidem.

Introduction

In Lebanon, several studies have addressed the impact of the economic and COVID-19 crises on adolescents and youth; however, most do not primarily focus on the realities and rights of adolescent girls.²² This study aims to fill in the literature gap by emphasising the impact of the pandemic combined with the economic, social, and political crises on adolescent girls' access to education in its broadest definition, including access to alternative learning opportunities and relevant services.

The study explores adolescent girls' experiences and realities in accessing education within an ecological model, and unpacks possible barriers. The voices of the adolescent girls are central to this study; they identified challenges, needs, and possible solutions to alleviate barriers to accessing education.



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²² Trovato Maria G., Al-Akl, Nayla, Ali, Dana & Fakher, Sara A. (2020). *Syrian Refugees in Lebanon: Protection Amidst Crises*; Youssef, S. (2020). *Adolescent boys and youth in Lebanon. A review of the evidence*. Gender and Adolescence: Global Evidence; Youssef, S., Jones, N., Małachowska, A., & Saleh, M. (2020). *Listening to young people's voices under covid-19. Double crisis in Lebanon: effects of a pandemic and economic crisis on Lebanon's most vulnerable adolescents*. Gender and Adolescence: Global Evidence; Abouzeid, M., et al. (2021). A Generation at Risk: The Impacts of Lebanon's Escalating Humanitarian Crisis on Children. *Front Public Health*, 2021;9.

Background

Research on youth has shown that adolescent girls are one of the most vulnerable groups in societies, since they often face complex challenges limiting their ability to lead safe, healthy, and self-sufficient lives.²³ In times of crisis, adolescent girls' right to access basic services such as education and healthcare is undermined, and they become one of the most severely affected groups at risk of missing a pivotal period of human development.²⁴ The COVID-19 pandemic increased the barriers to accessing education, in large part because of the unprecedented school closures.²⁵ Despite the worldwide effort to provide alternative education opportunities, many children and adolescents were left out, resulting in substantial learning losses.²⁶

In Lebanon, the adversities of the COVID-19 pandemic were aggravated by the socio-economic crisis that has impacted the lives of many groups, including women, children, and other marginalised communities. However, the lived experiences of adolescents are often different and occasionally disproportionate due to the interplay of age and gender.²⁷ Their experiences are also further determined by their nationalities, with Syrian and Palestinian girls facing additional challenges.²⁸ Some research in Lebanon indicates that adolescent girls are limited in their choices, their voices are not heard, and that access to safe spaces where they could be heard is hindered by current adversities.²⁹

It is important to note here that, as per the Lebanon Crisis Response Plan (LCRP) 2021, adolescent girls aged 10-19 constitute 8% of the Lebanese population. They comprise 8% and 14% of the Palestinian and Syrian populations, respectively.³⁰ The above-average percentage of adolescent girls in the Syrian population is noteworthy and translates to the need for greater resource allocation and protection measures to meet their needs.

Additionally, Lebanon is a country rife with structural gender inequalities, as highlighted by the Global Gender Gap,³¹ with Lebanon ranking 132nd out of 146 countries (146 being the worst) regarding gender equality. Despite women being adequately represented in the educational system and having positive health indicators, the situation is starkly different when it comes to political and economic indicators and access to education and healthcare services. In short, women still do not participate enough in the labour market (scoring 127/146) and have insufficient political representation (144/146). These stark structural gender inequalities are alarming and impact adolescent girls in Lebanon, reducing their opportunities and their aspirations.

²³ UNICEF MENARO and Burnet Institute. (2023). *Young people's health and wellbeing in the Middle East and North Africa Region: Initial secondary analysis of quantitative data for selected indicators of health and wellbeing among 10–24-year-olds in 20 countries*.

²⁴ International Rescue Committee. (2017). *A safe place to shine: Creating opportunities and raising voices of adolescent girls in humanitarian settings*; Plan International. (2020). *Adolescent programming toolkit: Guidance and tools for adolescent programming and girls' empowerment in crisis settings*; Amin et al. (2013). The adolescent girls' vulnerability index: Guiding strategic investment in Uganda.

²⁵ UNICEF. (2021). *Education disrupted: The second year of the COVID-19 pandemic and school closures*.

²⁶ UNICEF. (2020). *What have we learnt? Overview of findings from a survey of ministries of education on national responses to COVID-19*.

²⁷ UNICEF. (2021). *Lebanon: Children's future on the line: The devastating, compounding impacts of economic depression, COVID-19, the Beirut Port explosions and political instability*.

²⁸ Jones, N. & Gercama, I. (2017). *Adolescent girls in Lebanon: The state of the evidence*. Gender and Adolescence: Global Evidence.

²⁹ Ibidem.

³⁰ Lebanon Crisis Response Plan. (2021).

³¹ The World Economic Forum. (2023). Global Gender Gap Report 2023. https://www3.weforum.org/docs/WEF_GGGR_2023.pdf

Executive Summary

Adolescents, particularly girls, are recognised as one of the most vulnerable social groups by a large body of research. During adolescence, children grow physically, cognitively, and emotionally, begin to explore their sexuality, and form their adult identities, grappling with their roles in their community and future aspirations. By addressing the often-neglected needs of adolescents and highlighting the crucial importance of focusing on this segment of the population, we invest in the future of communities.

Lebanon, a nation hit by economic crises, social turmoil, and political instability, also grapples with deeply rooted patriarchal norms that exacerbate gender disparities. These systemic inequalities affect the development of boys and girls differently, placing adolescent girls at particular risk. Girls face both traditional and emerging threats, including gender-based and online violence. Amid these conditions, there is limited research focused on the challenges adolescent girls face in accessing specific rights and services, particularly in education. Economic constraints, social factors, and obstacles within the education system often hinder adolescent girls' access to education, creating barriers that erode their right to learning opportunities.

This study aims to identify facilitators and barriers to adolescent girls' access to education. The results of this research will guide future strategies, developing programmes, and interventions to support and facilitate adolescent girls' access to education and learning opportunities, as well as support advocacy campaigns to raise awareness about the importance of adolescent girls' education in Lebanon.

This study employed a mixed-methods approach to investigate the barriers and facilitators experienced by adolescent girls in accessing education and other relevant services, exploring family, school, community, and broader societal dynamics. The study heavily relied on adolescent-centred participatory research (Y-PAR), which placed the voices and experiences of adolescent girls at the centre of the research. The qualitative methodology entailed 30 oral history interviews (OHIs) and a participatory workshop with 10 adolescent girls. The sample included vulnerable groups, such as girls in child marriage, engaged in child labour, and with disabilities. Focus group discussions (FGDs) with four with caregivers, four with teachers, three with community leaders, and two with adolescent boys, along with 18 in-depth interviews with key informants, complemented the data gathered from the adolescent girls and provided a comprehensive understanding of the world around them. The quantitative survey was administered to 1,100 Lebanese, Syrian, and Palestinian girls aged 12-18, and included information on their current situation, parental background, knowledge and perception of specific topics (safety, harassment/bullying), and future aspirations. The survey aim was to complement and triangulate qualitative data gathered in the interviews and workshop with quantitative statistics and statistical packages.

Through Y-PAR, the study ensured an ethical representation of adolescent girls in Lebanon from different populations. However, the research did not include all vulnerable groups, such as stateless girls. Therefore, conducting further research on specific target groups not covered in the sample would enhance programming aimed at reaching the excluded categories of adolescent girls.

Key Findings

Facilitators

The study findings identified the main facilitating factors that enable adolescent girls' access to education to be parents and girls perceiving the importance of education; teachers' efforts to support students and prevent dropout; school strategies to support families; and aid from the international and non-governmental organisations (I/NGOs) that focus on access to learning opportunities.

The importance of education is widely acknowledged by parents and girls, a finding supported by quantitative data that showed a correlation between higher educational levels of parents and increased enrolment rates among girls. Teachers and schools play a crucial role in supporting girls' education by preventing dropout through psychological and material support, and by implementing practices that can be adapted to other contexts. Additionally, the aid provided by I/NGOs is essential in creating tailored educational opportunities for adolescent girls.

Adolescent girls in child labour and in child marriage highlighted education's importance and their motivation as key factors driving their return to school or vocational training. Quantitative data supported this, showing strong support for girls in child marriage continuing their education.

Barriers

The research also identified several barriers that affected the ability of adolescent girls to access learning opportunities.

Financial constraints were found to be a primary barrier, with the high costs of transportation, school fees, and materials making education unaffordable for many. Financial issues were the most frequently cited reason for changing schools (54%), while lack of transportation was the third highest reason (10%). This issue is even more pronounced when considering reasons for not being enrolled in school at all, with lack of transportation being the primary reason (51%). Period poverty¹ emerged as a psychological barrier, with over half of the girls feeling unable to participate in social, educational, and work activities during their period.

Adolescent girls report significant concerns related to safety, including bullying and school violence, in both schools and their broader communities. Qualitative and quantitative data indicate that protection concerns significantly hinder adolescent girls' access to education, with gender-based violence (GBV), harassment, and abuse being major barriers within schools and community environments. Social stigma, community rejection, and a pervasive culture of shame prevent girls from reporting such incidents and accessing necessary protection services. Quantitative data reveals that many girls choose not to disclose harassment or bullying, contributing to a culture of secrecy.

Both boys and girls report feeling unsafe in school environments due to bullying and violence, although boys are more often involved in physical altercations, while girls are both victims and perpetrators of bullying. The lack of centralised national services exacerbates these issues, highlighting a critical gap in support for young victims. The feeling of insecurity varied according to the girls' nationality and the governorate in which they reside, possibly reflecting the impact of local conditions on their sense of safety.

Results from the study indicate that while factors such as school quality and distance equally affect education opportunities for both genders, girls face unique social and gender norm pressures. A common reason cited for withdrawing girls from school is caregivers' lack of trust and fear of inappropriate relationships. Furthermore, it is worth noting that the challenging economic situation frequently compels families to make tough choices about their children's education, resulting in many girls being married prematurely or engaged in child labour to support their families, ultimately leading to them dropping out of school.

The school system was widely described as inadequate, failing to meet the learning needs of adolescent girls due to inappropriate curricula and insufficient resources. There is a marked disparity between urban and rural areas, with girls in rural areas facing additional challenges due to lack of infrastructure and educational resources. Community leaders and key informants pointed to the lack of clear educational vision and strategy as a root cause of these educational shortcomings.

Differences in nationality emerged as barriers for adolescent refugee girls, who face additional challenges accessing quality education compared to their Lebanese peers. Palestinian and Syrian girls reported more obstacles due to bias and prejudice in schools, as well as bullying based on nationality from Lebanese students. OHIs and FGDs with refugee boys revealed concerns about security and safety. Palestinian boys and girls cited episodes of school violence, including abusive behaviour from teachers and a tense school environment. Adult participants echoed these concerns, noting a decline in education quality, especially during afternoon shifts.²

Similar facilitators and barriers are present in the context of healthcare. Facilitators for healthcare access include providing services in schools and support from international organisations and NGOs. Additional barriers include individual challenges, especially in accessing sexual and reproductive healthcare, with oral history interviews, FGDs, and in-depth interviews (IDIs) highlighting a lack of information about these services. Community perceptions, nationality-based discrimination, social stigma, and social norms also significantly impact access. Both adult and adolescent participants identified financial constraints and the quality and accessibility of healthcare services as major barriers.

Recommendations

The study reveals that despite facilitators for adolescent girls' education, numerous roadblocks persist, limiting their educational opportunities. Recommendations for national and international stakeholders aim to address these challenges and ensure quality, safe access to education through four key areas: systemic changes, organisational change, institutional support, and individual empowerment.

Systemic Changes:

1. **Legislation:** Strictly enforce existing laws (e.g., Law No. 686) and introduce new ones to safeguard girls' educational rights. Key goals include allowing girls in child marriage to enrol in school and setting the minimum marriage age at 18.
2. **Budget Increase:** Allocate more funds to the Ministry of Education and Higher Education (MEHE) to support policies promoting girls' access to education.
3. **Stronger Penalties:** Implement stronger penalties for sexual violence and rape to protect girls from abuse.

Organisational Change:

1. **International Labour Law:** Ensure implementation of Decree No. 5362/1966, restricting underage labour.
2. **National Strategy:** Develop a national strategy to revise educational curricula in public and private schools to meet students' needs.
3. **Disability-Inclusive Educational Facilities:** Raise awareness on disability-appropriate terminology and beliefs to create an environment of acceptance and foster positive change and acceptance from youths.
4. **Safe Learning Environment:** Ensure gender-segregated bathrooms and combat gender-based violence with awareness sessions for parents, caregivers, and students.

5. Sexual Reproductive Health (SRH): Incorporate SRH material into the curriculum and establish on-site SRH services for girls.
6. Monitor Education Quality: Establish a mechanism to monitor the quality of education in afternoon-shift schools.
7. Technical and Vocational Education: Enhance Technical and Vocational Education and Training (TVET) programmes to align with labour market demands and integrate career guidance services.

Institutional Support:

1. Empower Caregivers: Include caregivers in discussions about the MEHE's violence reporting channels and enhance financial support for transportation, school fees, and educational materials through I/NGOs.
2. Childcare Provision: Provide free childcare through the Ministry of Social Affairs (MoSA), local municipalities, or NGOs to help girls in child marriages pursue their education.
3. Menstrual Hygiene: Ensure educational institutions supply menstrual hygiene products and sanitary pads.
4. Support for Girls with Disabilities: Develop programmes to bolster resilience and confidence in girls with disabilities, including necessary accessibility measures.
5. Parent-Teacher Communication: Establish open communication between parents and teachers to improve academic and social outcomes and reduce stigma around GBV.

Individual Empowerment:

1. Self-Efficacy: Foster self-efficacy and empowerment among girls by promoting help-seeking behaviours and raising awareness of available services.
2. Social Media Awareness: Educate girls on the impact of social media and encourage wise navigation.
3. Community Awareness: Educate parents/caregivers on the impact of child marriage and labour.
4. Utilise Strengths: Encourage girls to recognise and utilise their strengths and seek support when needed.



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