



TURNING LEARNING INTO ACTION

Sexual and gender based-violence
prevention, risk mitigation and response

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BACKGROUND

As a core part of its protection mandate, United Nations High Commissioner for Refugees ([UNHCR](#)) is committed to ending all forms of sexual and gender based-violence (SGBV) by preventing and reducing the risks of SGBV before it happens, and responding to the needs of all survivors.

In 2018, UNHCR launched a mainstreaming project, through funding from [Safe from the Start \(SftS\)](#), with the specific objective of enhancing UNHCR work towards further institutionalization of SGBV prevention, risk mitigation and response interventions. For UNHCR, SGBV mainstreaming specifically refers to the integration of appropriate prevention, risk mitigation and response strategies across all areas of programming and response.

The project specifically focuses on risk mitigation and understanding who is at risk, the source of that risk, and the (un)intended impact of acting or not acting in order to mitigate risks. Mainstreaming also requires that UNHCR workforce and partners know how to safely handle disclosure as well as the referral pathways for services and case management.



The development of this guide was made possible with support from the US BPRM Safe from the Start Initiative on protection from Sexual and Gender-based Violence in emergencies.

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MAINSTREAMING IN PRACTICE:

CAPACITY DEVELOPMENT THROUGH PROJECT IMPLEMENTATION

A call for proposals on SGBV prevention, risk mitigation and response mainstreaming was launched in 2018. The overall objective was to support the implementation and documentation of practices and multisectoral projects in country of operations that aimed to:

- ➔ initiate or boost SGBV mainstreaming activities, and/or;
- ➔ build on/develop innovative new responses to SGBV mainstreaming programming, and/or;
- ➔ strengthen UNHCR institutional process/ element of the operations management cycle (OMC) with regard to mainstreaming/ integrating SGBV prevention, risk mitigation and/or response components.

The application process was open to 16 operations that participated in a [regional workshop on mainstreaming SGBV prevention, risk mitigation and response](#). The selected projects were part of an overall approach and support to develop staff capacity and to build evidence and fill an information gap on how to effectively operationalize mainstreaming in different aspects of UNHCR work.

The projects were important institutionally and supported the communities in the following ways:

- ➔ addressed the needs and rights of communities in line with UNHCR policy on age, gender and diversity (AGD);
- ➔ offered a practical opportunity for the implementation of the 2015 [Inter-Agency Standing Committee \(IASC\) Guidelines on Integrating Gender-Based Violence Interventions in Humanitarian Action](#), and the application of core mainstreaming principles across different sectors¹; and

- ➔ provided UNHCR the chance to identify, document and field test different ways of increasing appropriate, early, efficient and effective programming to prevent, mitigate and respond to SGBV across UNHCR operations.

A preliminary screening of applications ensured that the projects met the following submission criteria:

The selection panel prioritized projects that supported a multifunctional approach in design, implementation, monitoring and demonstrated that a site-specific multifunctional coordination mechanism was in place to provide oversight.

Remote technical support was available for each implementing project team through a multifunctional team comprised of regional and headquarters-based colleagues. Throughout the process, lessons learned were documented in order to disseminate and replicate the practices.



¹ For more information on the GBV Guidelines please visit www.gbvguidelines.org.

PARTICIPANT OPERATIONS IN REGIONAL MAINSTREAMING SGBV PREVENTION, RISK MITIGATION AND RESPONSE WORKSHOPS



SELECTED PROJECTS

TURKEY:

Building cross-sectoral bridges to combat SGBV with involvement of the Protection, Cash and Livelihoods sectors and a focus on creating increased cross-sector linkages and safe livelihood opportunities to support the recovery of SGBV survivors.

UGANDA:

*The Protection, Education, Livelihoods and WASH sectors worked together to implement *Enhancing protection of women and girls through improved menstrual hygiene management*, which aimed to improve menstrual hygiene management programming, particularly in schools, and increased available information and safe access to SGBV services.*

EGYPT:

The Women's Leadership, Empowerment, Access and Protection (LEAP) project was implemented through Protection and Livelihoods and aimed to increase resilience and empowerment through increased women's leadership.

JORDAN:

*Protection, Innovation and Community Technology Access Units together implemented the *project Ensuring safe access to SGBV services and mitigation of SGBV risks within sectors using "empowerment" mobile application.**

THE DEMOCRATIC REPUBLIC OF THE CONGO (DRC):

*The project *Promoting hygiene and self-reliance through the production of cloth sanitary pads by IDP women and girls in Kitchanga, North Kivu* involved a multifunctional team including Protection, WASH and Livelihoods. Its focus was to create safe livelihoods opportunities, reduce risk of exposure to SGBV and increase access to appropriate hygiene products and information.*

TURKEY

ANKARA, ISTANBUL AND HATAY PROVINCES

BUILDING CROSS-SECTORAL BRIDGES TO COMBAT SGBV

Partners: Mavi Kalem and Association for Solidarity with Asylum Seekers and Migrants (ASAM) (NGOs in Istanbul), Support to Life (NGO in Hatay), The Flying Broom Foundation (NGO in Ankara), Ankara Metropolitan Municipality, UNHCR, Community members

Context²

Turkey continued to host the world's largest number of refugees by mid-2018, with a registered refugee population of 3.6 million. Of all refugees in Turkey, 98 per cent were from Syria.³ Numerous participatory assessments undertaken with refugee communities in Turkey since 2016 indicated that incidents of SGBV, particularly intimate partner violence (IPV) and sexual harassment, as well as engagement in harmful practices such as child and forced marriage and sex work were increasing. Several identified contributing factors were specifically noted, including the protracted nature of the displacement, a lack of economic opportunities, social exclusion, discrimination and social tensions.

Some of the main challenges related to employment and skills development reported by women and youth to UNHCR include: lack of day care services for children, language barriers, lack of relevant skills to seek employment, limited education, no proof of previous academic attainment, all of which limit access to job opportunities. The limited access to formal work permits was also reported as well as a lack of insurance, poor pay and long working hours and increased potential exposure to risk of exploitation and abuse.

It is widely acknowledged that SGBV remains highly underreported by refugee communities in Turkey, including in employment contexts, mainly due to cultural barriers and stigma. Gaps in the multisectoral referral pathways and uneven levels of community engagement also exist in places compounding the contributing factors.

Project background and objective

UNHCR Turkey is committed to supporting the creation of safe environments, and to implementing proactive SGBV prevention, risk mitigation and response intervention. Honouring this commitment requires a coordinated, multisectoral, multilayered approach requiring close coordination at all levels, actively conducting SGBV sensitization, capacity development, and strengthening multisectoral response and risk mitigation interventions across all sectors.

The *Building bridges* project was implemented across multiple sites in three provinces: Istanbul, Ankara and Hatay. Through partnerships with national institutions active in the prevention and mitigation of SGBV risks, the objective of the project was to strengthen the skills and coping mechanisms of individuals at-risk of SGBV and to increase quality and timely response for SGBV. This involved three interrelated components:

- Capacity development of stakeholders: capacity development activities focused on SGBV prevention, risk mitigation, response mainstreaming into existing programmes implemented across all sectors.
- Sensitization: information dissemination targeted refugee and local communities on SGBV prevention and response.
- Multisectoral interventions targeting those at-risk and survivors of SGBV, including:

² To provide a picture of the context in which each project was implemented, the population data details for each country is limited to 2018, which was when the projects began.

³ <https://www.unhcr.org/5c52ea084.pdf>.

- Turkish language training (A1 and A2 levels);
- vocational training (mainly adolescents and adults above 18);
- referrals to public education opportunities (mainly children under 18);
- provision of cash-based incentives to ensure meaningful participation in language/ vocational courses;
- multipurpose cash grants for survivors of SGBV; and
- provision of case management services including psychosocial support in individual and group sessions, legal support, education and social protection support.

Community engagement in project design

Individuals and communities were engaged in every facet of the project, from its design, through consultative and decision-making processes, as well as implementation, monitoring and evaluation processes.

“ I learned a lot from the training and would like to thank you. You gave us hope, and we learned that we should be powerful for our own future and fight for everything that we want to achieve.”

Girl-child participant in the sensitization sessions.

“ We learned very useful information and will also teach and tell others what we have learned.”

Girl-child participant in the sensitization sessions.

“ When we return home, let’s all wash the dishes...”

Male participant in the awareness-raising sessions

Results

Nine hundred and six individuals were identified as interested in the provision of support through both language and/or vocational training and SGBV

sensitization sessions. This included individuals who were also referred to multisectoral support including education and psychosocial support.

Out of the 131 women at-risk and SGBV survivors identified in three provinces, 79 successfully completed the Turkish A1 level language classes, six currently continue at A2 level, and 35 are pending new enrolment. Beyond the outcome of language acquisition, participants reported to have more freedom due to the increased support to attend the courses from male family members.

“ Prior to taking the course, I was afraid of approaching my child’s teacher. The more I learn, the more I feel comfortable to start talking with the teacher. I hope I will be able to talk with her fluently one day.”

TR language course participant in Hatay

Some participants also started attending additional sessions on their rights, available assistance and services. Reflecting of the value appointed to the sessions, some participants brought people from their communities increasing the scope of the project. The participants’ commitment was also observed in terms of low drop-out rates, as well as the willingness of participants to pursue their studies in 2019.

The project contributed to build a positive social cohesion and peaceful coexistence from the perspective of the participants. As a result of increased confidence in learning the Turkish language, the majority of participants reported feeling more comfortable when interacting with the local host community.

Attendance rates in language classes remained high. Forty-eight women were provided with multi-cash payments, and a total of 93 women (with attendance rates of 80 per cent and above) were provided financial support to attend the Turkish language courses.

Finally, a total of **827 individuals from all three provinces, including men and boys**, benefitted from sensitization sessions on SGBV prevention and response.



📷 Children painting and drawing in kindergarten in Hatay. Their parents are participants of the Building bridges project. The project supports children of participant by ensuring the care arrangements, as well as providing psychosocial support (PSS) activities in the child friendly spaces. Photo credit: Support to Life (Hatay)

Lessons learned and tips for replication

- Standardizing procedures for programme implementation across locations and having a consistent timeline for payment cycles are effective practices and essential to ensure that cash payments are received on time.
- Providing training to all participating staff on good practices and risk mitigation in cash-based interventions at the beginning of the project is essential to develop capacity and common ways of working, and to increase coordination amongst a multifunctional team.
- Developing common training materials for sensitization sessions, as well as common reporting templates for partners' use for more consistent and unified reporting, increases smooth and systematic implementation and monitoring of project results and outcomes.
- Addressing barriers (e.g. transportation costs to improve access to education, life skills and vocational activities) is essential to allow for participation and to reduce risks to potentially harmful practices.

“The project supported SGBV risk mitigation in cash assistance in a contextually relevant and meaningful way.”

UNHCR staff member

Next steps

Turkish language courses and vocational courses will continue. In Istanbul, there was a strong willingness to continue to A2 level language courses in 2019 by women who have received A1 level certificates. Some partners have also established close linkages with local authorities who have agreed to prioritize SGBV survivors and those at-risk of SGBV to enrol in courses (e.g. at the Public Education Center in Istanbul). The use of multipurpose cash as a protection mechanism to support survivors of SGBV will be increased and will include a measurement of the impact in the protection monitoring strategy that is being modified and updated. UNHCR Turkey will expand the recipients of multipurpose cash to include male and gender-non-conforming SGBV survivors. This component is also expected to increase the numbers of SGBV referrals to UNHCR and partners.

UGANDA

KYANGWALI REFUGEE SETTLEMENT

ENHANCING PROTECTION OF WOMEN AND GIRLS THROUGH IMPROVED MENSTRUAL HYGIENE MANAGEMENT

Partners: Humanitarian Initiative Just Relief Aid (HIJRA), Lutheran World Federation (LWF), UNHCR, community members

Context

As of 31 October 2018, Uganda hosted 275,100 refugees from the DRC along with refugees from Burundi (31,200), Somalia (18,700) and Rwanda (13,800).⁴ Established in the 1960s to receive Rwandan refugees, as of March 2018 Kyangwali refugee settlement hosted 68,703 persons of concern comprised of 60 per cent children under 18 years of age and 49 per cent women and girls of reproductive age.⁵

The protracted nature of displacement coupled with deteriorating economic conditions and limited livelihood opportunities continue to increase the risk of SGBV, especially among female heads of households, unaccompanied children and adolescent girls. Among the South Sudanese and Congolese refugees who make up the majority of the population in the Kyangwali settlement, menstrual hygiene management (MHM) presents a significant challenge and affects women and girls who are unable to afford hygiene materials.

Kyangwali's population has nearly doubled since the arrival of refugees from the DRC in mid-December 2017, straining the already limited resources. The humanitarian response has since struggled to meet the needs of the community, resulting in inadequate menstrual hygiene facilities and service provision.

⁴ <https://www.unhcr.org/5c52ea084.pdf>.

⁵ <https://data2.unhcr.org/en/documents/download/63277>.

Project background and objective

The 2017 AGD participatory assessment conducted by UNHCR and partners in Kyangwali refugee settlement with girls, parents and school management committees highlighted that the lack of gender-segregated latrines, lack of acceptable menstrual hygiene materials, insufficient water supply in schools and the lack of private changing facilities for girls during menstruation were contributing to an increase in school dropout rates and risks of SGBV following drop out. Lack of female teachers and dedicated parent representatives to educate girls on MHM were compounding factors.

To ensure acceptability of the product, the multifunctional team carried out consultations with women in Kyangwali to:

- Identify materials used for menstrual hygiene management before and after their arrival in the refugee settlement.
- Explore challenges faced by women and girls of reproductive age when using menstrual hygiene products that were previously distributed in the settlement.
- Understand women and girls' choices on the type of sanitary pads that they prefer and the effects of having or not having the menstrual hygiene management products in their routine activities.
- Identify the preferred channels for information dissemination about menstrual hygiene.
- Assess the availability of WASH facilities in the school and out-of-school environment in the project implementation areas.



📷 Partner staff holding meeting with women's group in Nyamiganda benefitting from the MHM project.
© Norman Mpirwe (HIJRA)

The project had two main objectives:

- ensuring that the population has optimal access to education facilities with safe and conducive WASH facilities in school that promote girls' retention, thereby mitigating SGBV-related risks and consequences; and
- reducing the risk of SGBV through an increase to access business skills and financial services for women.

Community engagement in project design

Extensive consultation with refugee women and girls during the initial assessment and throughout the project ensured a robust community-based approach was applied from the outset. Training was conducted for the multifunctional team, which included staff from WASH, Education, Livelihood and Health sectors and included training on the IASC GBV Guidelines⁶ and the [Menstrual Hygiene Management in Emergencies Toolkit](#).

⁶ For more information and resources see <https://gbvguidelines.org/en/>.

Results

Community sensitization on SGBV and the importance of MHM was conducted: 2,417 (F=1,450 and M=967) community members were reached with sensitization and community-based activities focusing on menstruation and menstrual hygiene management, stigma related to menstruation, safe disposal of used products and SGBV.

Women's groups and committees were empowered with business skills: 17 women's groups comprised of 320 women were trained on SGBV, business skills and the production of reusable sanitary materials. The training provided women's groups the financial capacity and business skills to access local financial services and increased their confidence in buying and selling reusable sanitary pads locally and through the savings associations. To ensure sustainability of the project, the selected women's groups were trained on the Village Savings and Loan Associations (VSLAs) methodology and entrepreneurship and self-employment.



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Lessons learned and tips for replication

- Creating livelihood opportunities through production of low-cost reusable sanitary materials enables refugee women and girls to reduce the risk of SGBV and to develop a sense of self-reliance.
- MHM is an area that requires cross-cutting coordination to ensure that the hierarchy of MHM needs are effectively addressed, along with the 4Cs of effective MHM programming—**coordination, consultation, culture and communication**.⁷
- A rapid contextualized assessment with community members on the availability, accessibility, acceptability and quality of menstrual hygiene supplies is essential prior to the design stage.
- Sectors responsible for communal facilities, particularly schools, hospitals and other public buildings must consult women and girls on the appropriate design of latrine facilities. Planning and costing must incorporate these factors.
- Ensuring optimal use of resources is paramount and avoiding the later correction of unacceptable latrines should be a priority. All agreements with those responsible for implementing the programming must adhere to context-appropriate design in line with appropriate standards.
- Ensure that the women's groups producing reusable sanitary pads have an adequate safe space and a sustainable structure for their production activities and for storing fabrics and work kits.

Capacity of service providers, sectoral leads and project participants on SGBV mainstreaming and case management was enhanced: 207

(F=100, M=107) teachers and members of parent teachers associations (PTAs), school management committees, WASH committees, and school clubs were trained on basic concepts of SGBV and risk mitigation pertinent to particular sectors. A workshop on case management, including safe disclosures and referrals, was also conducted.

Infrastructure to ensure safe disposal of menstrual waste in school and to promote girls' retention was constructed or rehabilitated:

rehabilitation of dilapidated latrines and construction of incinerators was carried out in six schools.

Contextually appropriate menstrual hygiene kits were distributed to women and girls to contribute to school retention and potential exposure to sexual exploitation and abuse:

a needs assessment on the use of MHM products was carried out in two villages to ensure that the items selected as part of the MHM kits were deemed acceptable and of good quality.

⁷ For more information please see the MHM in Emergencies Toolkit – <https://bit.ly/2Rb1Obj>.

“When confronted with the monthly menstruation cycle at school ...sometimes I do not have option but [I am] forced to ask my boyfriend for money to buy sanitary pads as my parents can't afford them ... then my boyfriend asks for sex in return and I feel abused especially if the money is given to me by my boyfriend after sex.”

“When we want to answer a question in the classroom, I fear to stand up as my blood may come out and the boys will laugh at me.”

“And those who don't have money to buy pads use locally available materials as long as money is not there, those materials they use really burn between the legs, and later on blisters come out.”

“Last term I did not come to school during the exam time that coincided with my menstrual period, as I do not have sanitary materials and could not afford to buy any, I missed the exam, that's why I repeated Primary 6.”

Excerpts taken from focus group discussions during assessment and community-based sensitization sessions

Next steps

All initiated activities will continue in 2019. The inclusion of MHM in fundraising plans and advocacy will be prioritized.

UNHCR and partners will support the women's groups who are producing and selling reusable sanitary pads materials and technical support to increase self-reliance.

The operation is also developing a tool that will be used to conduct assessment on MHM programming and a guidance note to support partners with MHM programming.

Story of change

“When we came from [DR] Congo during the war, I left my husband back... and I came with my children. In Congo, issues surrounding menstruation is so ... personal and you cannot tell your mother or your father that you are experiencing menstrual periods. Most of the families in Congo, especially in rural villages, have never seen or even used menstrual hygiene sanitary pads other than locally available clothing materials. When I turned 13 years old in 1976, I was in Primary three and this is when I got my first period. I did not know what to do and I thought something wrong was happening ... maybe I had been bewitched! When I arrived in Uganda as an asylum-seeker in 2014 my daughter was given two pieces of sanitary pads at the reception centre in Kagoma and I thought it was edible because it was well packaged. The pads were meant for my young girl and she had never seen the packed sanitary pads at 15 years of age. I got to know that they were pads, and later we got a training conducted by HIJRA and a female staff mobilized in my village of Nyamiganda, for the awareness on the use of sanitary pads and I had an enthusiasm to participate. Then the next day she came with pads and showed us how to wear them.

In my own capacity, I could not afford to buy pads on a monthly basis because I have six girls and all are experiencing menstrual periods and it's costly to buy pads given my economic status. We have been using local materials like pieces of clothes. We had a training organized by HIJRA and we were trained in November 2018 for two weeks on how to make reusable sanitary pads using a sewing machine. Currently, we are organized into different women's groups where we were supported with sewing machines and fabrics, and now we are making pads and my girls have used them and I now feel proud and happy because I no longer fear blood spots on my skirts and my girls will not miss school. I can now participate in village meetings since I can access them locally.”

42-year-old Mbiride Kyabisiku a single mother with seven children from Nyamiganda village.

EGYPT

CAIRO

WOMEN'S LEADERSHIP, EMPOWERMENT, ACCESS AND PROTECTION (LEAP)

Partners: National Council of Women, CARE international, UNHCR, community members

Context

Egypt continues to generously host Syrian refugees and refugees of other nationalities. As of 30 June 2018, Egypt hosted 129,737 Syrian refugees who mainly reside in the urban areas of Cairo Governorate, Alexandria and Damietta. Between January and June, 4,402 Syrians were newly registered with UNHCR, among them 102 unaccompanied or separated children (UASC).⁸ Community consultations carried out in 2016 and 2017 by UNHCR and partners indicated that SGBV, including sexual harassment in public places, is one of the key protection concerns raised by the community. The refugee population, especially African and Iraqi community members, increasingly report incidents of SGBV at the workplace and while using transportation, which results in self-imposed/imposed-by-the-family restrictions in the movement of women and girls. Financial assistance is generally deemed insufficient to cover basic needs, and refugee women who do not benefit from family support report resorting to risky and unsafe activities to survive. Refugee and asylum-seekers also mentioned the issue of women being prevented from working by male members of their family.

Project background and objective

In 2017, a joint initiative called LEAP: *Women's Leadership, Empowerment, Access and Protection in Crisis Response* was initiated by UN Women and the National Council for Women (NCW) in Egypt. Building on the first year of implementation by UN Women and partners, and based on extensive community consultations with both Egyptian and refugee women, UNHCR joined the LEAP project and partnered with UN Women, CARE International and the NCW to build upon existing activities in *phase two* of LEAP. The project was then extended to refugee and asylum-seeking women as well introducing a multifunctional coordination approach.

The monitoring strategy of this intervention involved the use of different quantitative and qualitative data collection techniques such as attendance sheets, pre and post testing, field visits and discussions, interviews with some of the participants. Feedback forms were used in order to track the assistance as well as the quality of the different trainings sessions.

This project included both Egyptian and refugee community members. It aimed to empower women with specific needs, especially those at-risk of SGBV, by increasing their access to diversified and safe economic opportunities, and enhancing their access to safe and effective protection services through established Government mechanisms. The overall objectives were to engage women and girls as active participants in protection from violence through group activities and to provide linkages to individual

⁸ <https://data2.unhcr.org/en/documents/download/68254>.



support services in line with SGBV standard operating procedures (SOPs) and referral pathways. The specific project objectives included:

- at-risk asylum-seeking women and female youth acquire safe income-generating and economic opportunities via cash-for-work and skills development;
- women acquire skills required for production and entering the labor market; and
- asylum-seeking and refugee women and female youth have enhanced access to effective services and protection mechanisms.

The NCW premises in Giza were providing the venue for the centre development due to the proximity of neighbourhoods where refugee communities mainly reside. It is an important community-based centre offering counselling and protection services to refugee and Egyptian women.

Community engagement in project design

During the planning and implementation phases, there was a participatory assessment and regular consultation with women participants. This contributed to developing a project aiming to overcome the cultural and personal barriers that prevent women from accessing safe livelihood opportunities.

Results

Participants' socioeconomic empowerment and community support was increased

The inclusion of participants from different nationalities and backgrounds in the life skills and vocational training sessions contributed to an increased sense of community among the participants. Together, the participants came up with more than twenty innovative business ideas including but not limited to educational centres for teaching foreign languages, birthday decorations,

home décor products, etc. Some participants decided to join forces to set up collective beauty centres.

“The training had a very positive impact on me as well as on my family.”

Participant in the training

Skills of participants were enhanced

The skills of 260 participating women were enhanced through vocational skills, marketing and business training. The women were connected with potential clients and different supply vendors for product crafting to apply their post-training skills.

An additional 207 female participants received training tailored to their skill-based jobs specific during career counselling sessions. The training also included general modules on efficient ways of budgeting, managing income, applying for grants and loans, and the basics of ideation and microbusiness management/finances—all of which are key areas for business management. Entrepreneurship and financial literacy training further allowed the participants to have more control over their assets.

SGBV awareness was increased

Four hundred and forty-seven male and female participants attended SGBV sensitization sessions on issues related to gender and SGBV, including knowledge of where survivors can report risks and safely access services. Participants reported that their knowledge on SGBV improved, including on SGBV reporting mechanisms, how to access to services, and the different types of violence that refugee women may be exposed to at the work place.

The national response to refugee SGBV survivors was enhanced

Eighteen officers in the National Council for Women’s Complaint Office (NCWCO) were trained on SGBV, which strengthened and increased collaboration on case management.

Feedback from participants form NCWCO on SGBV awareness sessions for NCW complaint officers:

“The training has increased my knowledge of the cooperation of the different actors involved in the SGBV response”.

“I have increased my knowledge on legal information regarding SGBV and refugees”.

“I feel more capable now to protect refugees from violence”.

“Now I am knowledgeable of the different organizations that provide legal and social support to refugees”.

Lessons learned and tips for replication

- Joint and comprehensive assessments that include safety and security risks, requirements and measures must be conducted and revisited at all stages of implementation.
- Working with non-humanitarian partners, such as the private sector, requires additional support and orientation.
- Working with national structures requires a well-defined implementation plan to ensure timeliness in project implementation.
- Coordination of multiple partners and stakeholders requires a clear management plan with in-built flexibility to adapt to changing scenarios, particularly for procurement.
- Setting achievable and reasonable targets is essential for maintaining motivation of all actors, especially during short implementation periods.



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Next steps

The project is sustained following the implementation of the additional core activities as part of the Operation's plan for 2019. One of the measures taken to ensure sustainability has been the utilization and mobilization of existing resources to promote the economic empowerment of the participants. The mapping and subsequent selection of existing space was made in consultation with the women participants to ensure proximity to areas of residence and suitability.

JORDAN

AMMAN

ENSURING SAFE ACCESS TO SGBV SERVICES AND MITIGATING SGBV RISKS WITHIN SECTORS USING “EMPOWER” MOBILE APP

Partners: Nour Hussein Foundation (NHF), National SGBV sub-working group Jordan, UNHCR, community members

Context

Jordan continued to host 705,800 refugees by mid-2018. As with other countries in the region, the vast majority were from Syria (667,200). Other countries of refugees' origin in Jordan were Iraq (34,400) and Sudan (2,700).⁹

Of the total registered Syrians in Jordan, 50.4 per cent are female and 49.6 per cent are male. Children represent 51 per cent of the entire refugee population. 78.7 per cent of Syrians live in urban areas across the country: Amman, Irbid, Mafraq and Zarqa governorates.

In 2017, according to the GBV Information Management System (IMS) Task Force, 94.6 per cent of SGBV survivors assisted were women and girls. Child marriage remains a major concern for refugees in Jordan. Sexual violence remains underreported due to extreme social stigma. Women and girls also often face risks of sexual harassment in most public spaces and have reported being particularly concerned by the increase of sexual harassment occurring over the phone. Lesbian, gay, bisexual, transgender and intersex persons refugees are often exposed to emotional and physical abuse. Most survivors approached SGBV service providers more than a month after the incident. This indicated an urgent need for a more efficient referral pathway for survivors and persons at-risk of SGBV, including efforts to disseminate information about SGBV services

within communities and also within non-specialized service providers.

COMMUNITY PARTICIPATION IN PROJECT DESIGN

The community was engaged from the onset of the project through consultations based on AGD approach:

Women, girls, boys and men were consulted on the design of the app and efforts were undertaken to ensure marginalized groups were actively included.

The community was consulted during the development of the standardized list of risk points to ensure it was drafted in a simple language and covered different type of risks.

To develop the mobile application, seven sessions were held between UNHCR SGBV staff and the mobile application development company, and three testing sessions were done with end users (refugees and staff).

Members of the SGBV SWG consulted more than 350 refugees and host community members on the application and they selected the name “Amaali”, which means ‘my hopes’.

⁹ <https://www.unhcr.org/5c52ea084.pdf>. P. 9

Project background and objective

Building on the practice established in Lebanon with the use of the “Respond” mobile application (App), which allows non-specialized humanitarian staff to conduct safe referrals, UNHCR Jordan aimed to implement an innovative mobile app. The app called “Amaali (my hopes)” could also be easily replicated in other operations. The objective was to enable non-specialized service providers to refer SGBV survivors through access to updated referral pathways while respecting the survivor-centred approach. The project aimed at ensuring that SGBV survivors are empowered throughout service delivery and potential SGBV risks mitigated.

The project specific objectives of the Amaali App were to:

- be easily accessible to humanitarian workers in all sectors and to contain guidance for safe referrals as well as contacts of SGBV case management service providers in each region of Jordan;
- be accessible to refugees and include hotlines for SGBV survivors to access support and services; and
- have a public interface accessible to both refugees and humanitarian aid workers with a platform to map risk points.

“When we were working on the script for the play with the group, women shared stories about sexual harassment in the camp. It helped me to better understand the numerous difficulties that women are facing in Zaatari camp and feel empathy. I realized that other refugees in the camp are not aware about services available for survivors of violence. So I was very proud to present the play in the camp and share our message with our community”.

Male Syrian refugee, member of the community group in Zaatari

“When we presented our movie and talked with the audience about sexual harassment, many shared that they were not aware sexual harassment was such a risk for women and girls in Jordan. At the end, people shared that they will not remain silent and will encourage survivors to report sexual harassment. I feel that this project really gave us the opportunity to positively impact our community

Refugee volunteer leading community group in Amman

Community engagement in project design

Women, girls, boys and men, especially including those from marginalized groups, were consulted on the design of the app. The community was also consulted during the development of the standardized list of risk points, as to ensure it was drafted in a simple language and addressed different type of risks.

Refugee and host community youth were also key participants in the development of awareness materials, which are uploaded on the app. Community members who are perceived as role model within their community were engaged and their stories/messages disseminated through the app.

Results

Effective mobilization of refugee communities to prevent, mitigate and respond to SGBV was achieved through various modalities: in Amman, one youth group of female students produced their own video aiming at reducing stigma faced by SGBV survivors in their communities. The video addressed child marriage, intimate partner violence and sexual harassment while encouraging communities to transcend the culture of silence and step up to support SGBV survivors.

In Zaatari, a silent play was designed by male and female refugees to highlight stigma faced by a girl survivor of sexual harassment trying to seek help from her parents. Positive feedback on the theatre



© NHF / Tamara Al-Dweiri. Silent theatre play Zaatari, Dec. 2018

plays indicated that youth groups were able to challenge harmful stereotypes on sexual harassment and promote a survivor centred approach.

Four SGBV prevention community groups were established (two in Amman, one in Jerash and one in Zaatari camp): thanks to leadership skills and the passion of the refugee volunteers, the groups managed to overcome cultural taboos around SGBV (especially about sexual harassment) and design their own awareness-raising project. Many female refugees had expressed that the app will be an important tool to ensure they have access to information about services. They felt strongly that the risk mapping tool will be helpful for them to avoid unsafe areas. Five awareness-raising materials were developed: three short videos on women's empowerment, an SGBV prevention cartoon produced by refugee youth, and a safe referrals video for frontline workers.

Six hundred and forty refugees were reached through dissemination sessions (Amman: 290, Zaatari: 250, Jerash/Ajloun: 100). Other groups in Amman, Zaatari and Jerash used theatre to raise awareness about risks of sexual harassment and reduce stigma for survivors.

Survivor-centred attitudes among frontline workers were enhanced: SGBV safe referral trainings helped develop frontline workers' skills when interacting with survivors. During the project, 152 staff and 56 refugee volunteers were trained on safe referrals. The project's training and awareness activities addressed the limited knowledge amongst survivors and non-specialized service providers on the availability of SGBV services. It also addressed the persistent gap in programming related to challenges around dissemination of multisectoral referral pathways.

“This project showcases how – when appropriately used – technology can be a significant enabler in strengthening SGBV programming.”

UNHCR staff member

Lessons learned and tips for replication

- Ensure on-going capacity development activities for frontline workers such as regular refresher courses on safe referrals and use mobile app to regularly coach frontline workers.
- Ensure that the app remains relevant and regularly update it with guidance and resources.
- The development of the app should be done under the umbrella of SGBV coordination forum, and Inter-Agency sector coordinators can also play a key role in disseminating the app within the wider humanitarian community.
- Engaging refugee and host community youth, and community members who are perceived as role models within their community is an effective way to disseminate stories/messages, raise awareness and developing materials which are uploaded on the app.
- Consultation with the humanitarian community, refugee and host community ensures that information on SGBV services/risk points reaches refugees who are isolated and with specific needs.



© UNHCR/Lilly Carlisle.

Next steps

In 2019, the app will be launched, the SGBV prevention community groups will be maintained and additional community groups to engage men will be established in Mafraq and Amman. The female youth group in Amman will continue to develop videos to raise awareness on various type of SGBV and reduce stigma faced by survivors in their communities. The group will also be trained on the Prevention of Sexual Exploitation and Abuse (PSEA) and encouraged to develop a video informing survivors about complaints mechanisms and encouraging them to report. Trainings for frontline workers and refugee volunteers will continue.

Story of change

Feedback from refugee communities during the launch events was key in understanding changes. In Zaatari camp, refugees in the audience shared that they were moved by the play as it is extremely close to their daily reality and highlighted that unfortunately sexual harassment is a major concern for women and girls in the camp.

Male refugees playing in the play, as well as those watching, also explained that it really helped them develop a sense of empathy for female refugees subjected to sexual harassment. Although survivors are generally blamed in the camp, the play helped bring positive change as most refugees acknowledged that girls and women should not be blamed for sexual harassment. Refugees acknowledged that families have an important role to play to support survivors.

Some also shared that they were previously not aware that SGBV service providers in the camp could assist survivors of sexual harassment and that they would encourage them to seek help. A Syrian refugee man in his forties shared that he would encourage survivors to seek help with service providers; while another man explained that if he witnesses an incident, he would offer his assistance to escort the survivor to the police.

A 65-year-old refugee father explained that the play really moved him and that he would try, as of now, not to only be a father to his daughters but also a friend to encourage them to ask for his help if they face sexual harassment. Another refugee acknowledged that in the past he actually blamed girls for sexual harassment due to the clothes they were wearing, nevertheless he explained that the play helped him understand that only perpetrators should be blamed.

THE DEMOCRATIC REPUBLIC OF THE CONGO

KITCHANGA, NORTH KIVU

HESHIMA PROJECT (MEANING RESPECT IN SWAHILI): PROMOTING HYGIENE AND SELF-RELIANCE THROUGH THE PRODUCTION OF CLOTH SANITARY PADS BY IDP WOMEN AND GIRLS IN KITCHANGA, NORTH KIVU

Partners: INTERSOS, UNHCR, Community members

Context

The Democratic Republic of Congo had the third highest IDP population (4.5 million) by mid-2018, which increased by some 191,300 compared from the beginning of the year. Similar to Syria, this increase was also a result of both new displacements (347,800) and returns (156,500). The humanitarian crisis in the DRC continued to deepen through 2018 and the civilian population continued to face various human rights violations including physical assaults, exploitation, SGBV, and forced recruitment into armed groups, resulting in new waves of displacement. The UNHCR Protection Monitoring System (PMS) recorded a total of 21,280 protection incidents in North Kivu, against both internally displaced persons (IDPs) and returned IDPs in 2018.

Project background and objective

In 2017, UNHCR organized focus groups with internally displaced girls and women from the town of Kitchanga, Masisi, and in the IDP sites of Kahe and Mungote located in the same area. Of particular concern to displaced women and girls was the lack of dignified hygiene kits to promote and safeguard their menstrual hygiene. The lack of hygiene kits has an enormous impact on women and girls' ability to undertake activities during menstruation, such as household chores, going to work and attending school. Participants presented the idea of producing their own cloth sanitary pads. They wanted to provide menstrual hygiene products for themselves

and also to reinforce their livelihoods prospects through the sale of the sanitary materials to other women and/or humanitarian organizations. They suggested and planned hygiene sensitization sessions for themselves and for the women in the community who could become potential customers.

During the start-up phase of the project in August 2018, the proposed activities were first presented to local authorities, the local community of Kitchanga, displaced persons in the sites of Kahe and Mungote, and IDPs living with host families.

Five focus groups sessions were held to collect the participants' views on the idea of building two factories, one for reusable sanitary pads and another for soap production. The participants showed great interest in the creation of the soap factory and in the manufacturing of menstrual pads.

This idea informed the development of the Heshima project, which aimed to reduce exposure to SGBV and to contribute to participation and empowerment by improving the availability of acceptable menstrual hygiene products and increasing self-reliance and economic empowerment of IDP women and girls.



📷 UNHCR and partner staff from INTERSOS brainstorm with internally displaced persons and members of the local community on marketing ideas for the sale of soaps and sanitary pads produced in the factory. © UNHCR/ Natalia Micevic

The project required the construction of two factories, one focusing on the production of sanitary pads, “HESHIMA”, and another one focusing on soap production named “Tuungane Pamoja”. The project involved 69 participants (F=49 and M=18), with 90 per cent of participants being internally displaced persons and 10 per cent members of the host community.

The project-specific objectives were:

- to improve the broad availability of acceptable menstrual hygiene kits for displaced women and girls;
- to promote self-reliance through production of menstrual hygiene kits;
- to establish a safe livelihood programme, enabling women to generate income and learn a new skill; and
- to ensure respect for the environment and foster peaceful coexistence and use locally available materials.

Community engagement in project design

To increase opportunity for engagement and social cohesion with host community neighbours, the project design also included host community members (10 per cent). The project was also guided by protection principles in its design, such as the reduction of risk and the promotion of resilience. The participants were engaged in the planning design and development processes of the activities from the beginning, by identifying their needs and capacities, contributing ideas and expectations and providing recommendations at all stages.

Results

Women and girls' access to dignified and quality hygiene products was increased: acceptance of the product in the community, in particular its design, is a key success of the project. The design was adapted to a context where women do not necessarily always have access to underwear. Under these circumstances, the HESHIMA sanitary pad was well received as it adapts to the needs and context.

Capacity was developed and self-reliance was enhanced: 67 participants (F=49, M= 18) received training on producing the sanitary pads and soap (27 in the sanitary pad factory and 40 in the soap factory). The 49 women who were trained in this alternative income generating activity felt they were provided an alternative to collecting firewood and going to work in agricultural fields in remote locations, thereby reducing their risk of exposure to SGBV for them and their family members, who undertake these activities. The women decided that men could be included in the project as they had the necessary skills for soap making in particular and that it would be valuable.

HESHIMA gave a sense of emancipation and increase the self-esteem of the women who participated in the project. The pride and sense of dignity of having an employment was very visible in their statements.

Social cohesion and positive relations with host community was enhanced: the project has demonstrated a positive impact in terms of peaceful coexistence and community cohesion, providing a space where displaced persons and the host community work together and socialize. As one participant stated: *"We are all brothers and sisters and we are all equal."*¹⁰

¹⁰ <https://bit.ly/2Y7m6nW>.

"The newly built factory is aptly named "Tuungane Pamoja" which in Swahili means "working together." Elisa, 49, lives in Kahe site in Kitchanga, DRC with her husband and their 7 children. Having been displaced multiple times, she is glad to work here: "Learning to make soap has given me hope because it will soon give us an income and we can become self-reliant," she explains. "I have these skills forever and if the war ends and I go home, I can continue making soap."

Treasurer of the factory

Engagement of the community in information and awareness was conducted: 10 awareness-raising sessions on menstrual and general hygiene were held at Mungote and Kahe IDP sites, in the Kitshanga host community, as well as in schools and local churches. Methods for awareness-raising included radio sketches, flyer promotions and a megaphone campaign. The campaign also included messaging on SGBV prevention and response. These activities reached 5,287 people - M=693, F=2,375, 293 boys and 1,926 PoCs.

Lessons learned and tips for replication

- The legal processes for establishing a start-up must be researched during the inception phase and before the design and development.
- The design and creation of the sanitary pads locally requires planning, research and availability of raw materials, and an environmental and health analysis.
- It is important to conduct a market analysis prior to project planning.
- Implementing the project through an organization that has expertise in income-generating projects, start-ups and business modelling, and/or projects focused on economic development, resilience and self-reliance, ensures more effective implementation. The expertise of the partner also enables adequate monitoring guidance from UNHCR.
- The governance structure for the factory workers needs to be reinforced and supported.



📷 Project participants in the sanitary materials factory, DRC. © UNHCR/Natalia Micevic/2018

As a promising practice, each factory works as a collective and has a committee consisting of a president, a secretary, two treasurers and four advisors. All the decisions are made by the committee together with the factory participants.

Next steps

Supporting the participants' marketing and business skills development, supporting them to establish a sales strategy and an internal business structure. The process of obtaining the necessary administrative authorizations for the factories will be pursued and completed in 2019. The construction of a child-friendly space next to the factories was also planned to allow the participants' children to be looked after while their parents are working.

The project's main objective by the end of 2019 is for the participants to achieve self-management of the factories, which will include being able to independently handle all the stages of the project from the purchasing of materials to the production of kits, sales and income management.

Story of change

Clémence, 20, who works at the factory sewing sanitary kits. After fleeing violence in Masisi territory 10 years ago, she settled in Kitchanga with her family. She spent a year in Goma, North Kivu's provincial capital, learning to sew but couldn't find work when she returned to Kitchanga. "I love sewing as it's so wonderful to see the fruits of your work right away," she says. "I'm so happy I don't have to stay home with nothing to do anymore as I have a job to go to."

.safe from the **start** →



UNHCR
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