

# SEXUAL AND GENDER BASED VIOLENCE (SGBV) SITUATION IN NYARUGUSU REFUGEE CAMP

31 May 2016

## CONTEXT

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### Nyarugusu Camp

Nyarugusu camp located in North West Tanzania is host to 133, 045 persons of concern to UNHCR. 65, 015 are pre-influx and the majority of whom are from Democratic Republic of Congo (DRC). Between April and October 2015, the camp also received new arrivals from Burundi. The total number of children among the newly arrived population stands at 57.4% and the total number of women and children stands at 77.9%.<sup>1</sup>

### SGBV Background

Sexual and Gender-based violence (SGBV) among persons of concern is manifested in many forms, including but not limited to, rape, sexual assault, physical assault, domestic violence, early marriage, sexual exploitation and abuse, and sexual harassment. Whereas the majority of survivors and persons at risk are women and girls, men and boys can also experience SGBV. In situations of forced displacement violence can occur in the country of origin, during flight and/or in the country of asylum.

The sexual and gender based violence (SGBV) sub working group (SWG) is the coordinating body with the objective of strengthening SGBV prevention and response in the context of the refugee response in Nyarugusu. The SWG is a sub group of the Protection Working Group (PWG) and is chaired by UNHCR and the International Rescue Committee (IRC) under the refugee coordination model led by UNHCR. Members of the SWG include government actors, international and national nongovernmental organizations and UN agencies.

The SWG facilitates multi-sectoral, inter-disciplinary Inter-Agency programming and provision of adequate services in accordance with international standards and guidelines.<sup>2</sup> It is aimed at ensuring the provision of accessible, prompt, confidential and appropriate multi-sectoral services (safety, legal, psycho-social and medical) to survivors of SGBV and reduction of risk of SGBV. The SWG focuses on ensuring these services for all persons of concern to UNHCR. Programming across all sectors remains a great challenge due to the lack of funding required to upgrade latrines and shelters to meet minimum standards in protection. Innovative community approaches have been engaged where possible but in order to improve the standards funding is required. This continues to be a source of joint advocacy between sectors. In May, the SGBV SWG also gave significant input into the new site plans for Nyarugusu to enhance the design and reduce areas of possible risk.

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<sup>1</sup> UNHCR Statistics – 1 March 2016 - [Inter-agency Information Sharing Portal - Tanzania Burundi Response](#)

<sup>2</sup> Revised IASC Guidelines for GBV Interventions in Humanitarian Settings 2015; SPHERE, Call to Action on Protection from Gender-based Violence in Emergencies.

The SWG has agreed on an Inter-Agency strategy developed in the context of the broader protection strategy for the refugee response including the Regional Refugee Response Plan<sup>3</sup> developed to respond to the Burundi crisis. In May in Nyarugusu, deeper analysis conducted into the root causes of SGBV particularly among the Burundian community raised further emphasis on the need for long-term engagement on behavioural and attitudinal change. One striking feature of research conducted by different entities in Burundi in recent years is the apparent normalization of violence, likely due to the impact of the war and the so-called degradation in values.<sup>4</sup> In addition the extremely high rates of poverty facilitated sexual exploitation and the use of negative coping mechanisms.<sup>5</sup> These are some trends which are now visible in the camps to differing extents. Discussion about sexual activity in general is taboo requiring innovative use of entry points for engagement. Not only does it remain taboo, but anyone who reports violence, particularly sexual violence is likely to face stigmatization by their partners, families and community members further entrenching the social norm.

Important factors contributing to continued SGBV incidents are related to the previous conflict, and the conflict beginning in April 2015, which include displacement, feuds between family members and neighbors and serious economic hardship experienced by many Burundians exposing them to significant risk.

## Reported SGBV Cases, Trends and Analysis

Reported SGBV incidents are recorded in the Gender-Based Violence Information Management System (GBV IMS) that ensures safe, ethical and standardized collection of SGBV data as well as effective protection of confidentiality and privacy of the survivor. Report and analysis of data are exclusively based on reported SGBV incidents only and is in no way indicative of prevalence of SGBV. The International Rescue Committee (IRC) is the lead organization providing SGBV prevention and response activities in Nyarugusu refugee camp and also manages GBV IMS.

In May 2016, there were 141 (120F 21M) newly reported incidents reflecting. As in previous months the majority of incidents were reported by females, with 85% of all reported incidents affecting women and girls. This is a slight decrease from April where it was 88% (108).

In May, physical assault and rape jointly accounted the highest number of reported incidents at 29% each (41). The increase in rape reporting is attributed to the worsening situation of firewood collection, almost 50% occurred in this context.

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<sup>3</sup> <http://data.unhcr.org/burundi/documents.php?page=1&view=grid&Org%5B%5D=1>

<sup>4</sup> Sexual Violence in Burundi: Victims, perpetrators, and the role of conflict – The Institute of Development Studies – Households in Conflict Network – 2014 (page 15)

<sup>5</sup> Sexual Violence in Burundi: Victims, perpetrators, and the role of conflict – The Institute of Development Studies – Households in Conflict Network – 2014 (page 15)

Together with sexual assault, sexual violence accounted for 34% (48) of all incidents reported in May which is significant increase from April where the overall number of reported incidents was also lower. Other contributing factors included walking in the bush and farming outside the camp. Psychological and emotional abuse accounted for 20% (28) of all incidents and denial of resources another 17% (24). Both are consistent with reporting in previous months.<sup>6</sup>

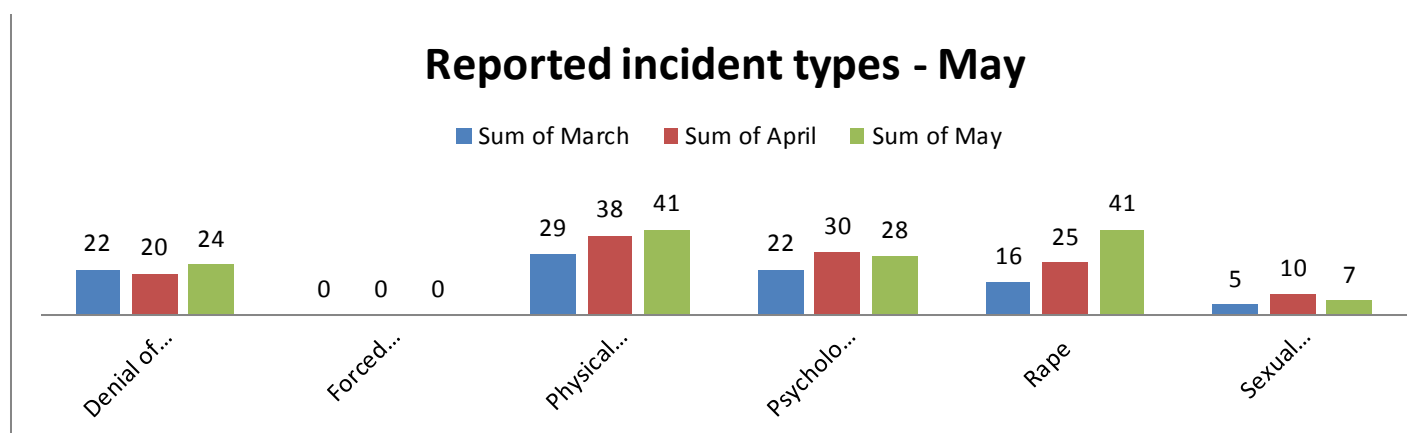


Chart 1

Reporting of intimate partner violence (IPV) case incidents accounted for 53% (75) which is an increase from the beginning of the year but consistent with reporting in April. Consistently there has been an increase in reported IPV incidents in recent months and it remains the highest case context. A total of 49% (70) of all reported incidents occurred in the evening or night time. In May, there was an increase in the number of incidents affecting children. It remains the most commonly reported case context after IPV. Increased focus on provision of support to UASC, parents and caregivers is required and proposals to increase activities such as parenting skills classes are pending additional resource allocation.

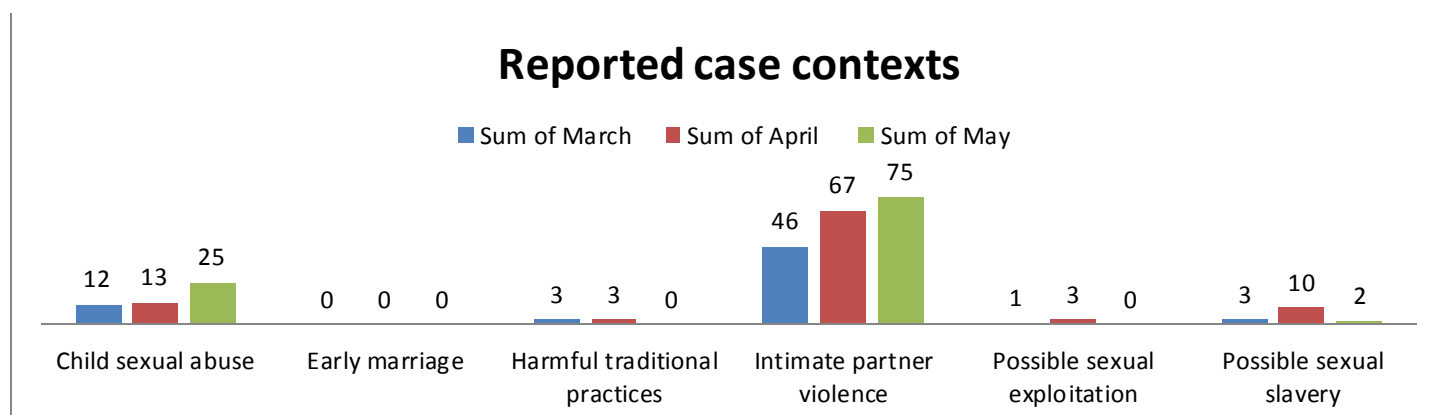
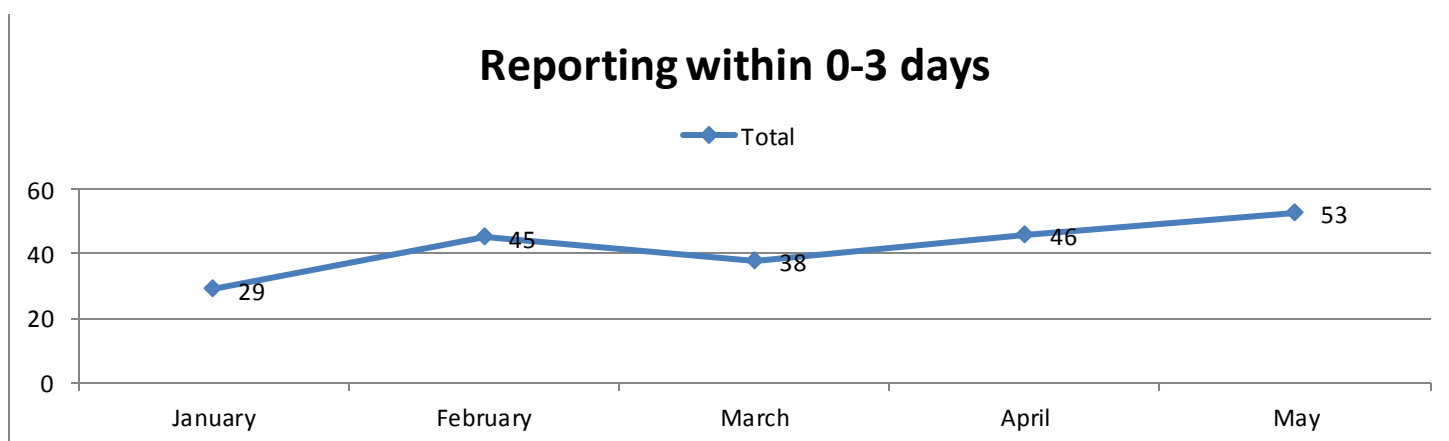


Chart 2

<sup>6</sup> **Denial of Resources, Opportunities or Services:** denial of rightful access to economic resources/assets or livelihood opportunities, education, health or other social services. Examples include a widow prevented from receiving an inheritance, earnings forcibly taken by an intimate partner or family member, a woman prevented from using contraceptives, a girl prevented from attending school, etc. Reports of general poverty are not recorded. **Psychological/Emotional Abuse:** infliction of mental or emotional pain or injury. Examples include: threats of physical or sexual violence, intimidation, humiliation, forced isolation, stalking, verbal harassment, unwanted attention, remarks, gestures or written words of a sexual and/or menacing nature, destruction of cherished things, etc. – [GBVIMS Classification Tool](#)

## MULTI-SECTORAL RESPONSE TO SGBV INCIDENTS

Multi-sectoral response services (medical, legal, safety and psychosocial) are in place and functioning. Case management services are being provided. Provision of those services is based on guiding SGBV principles, including a survivor-centered approach, non-discriminatory access to all services and respect of privacy. Material needs are also being provided for where possible on a case-by-case basis. There has been a consistent increase in reporting within 0-3 days since the beginning of 2016.



**Chart 3**

Provision of psychosocial services continues to be the main specialized service provided with 98% (139) of survivors in May receiving psychosocial support mainly in the form of case management. As of 31 May 2016, there were 574 newly reported incidents of SGBV in 2016.

In terms of service provision the Inter-Agency response requires significant resources to increase to meet some minimum requirements (e.g. to reduce the ratio of case worker to case) which currently requires a minimum 15 additional case workers. A number of contributing risk factors require complex responses and significant resources. The plan to move to transitional shelters, thereby increasing the security of the community members, is pending further resource allocation. The improvements required in water, sanitation and hygiene (WASH) are similar.

## INTER-AGENCY STRATEGIC PLANNING

The Inter-Agency strategy and action plan for preventing and responding to SGBV has been implemented since January 2016. The overarching purpose of the strategy is to prevent, reduce risks and mitigate consequences of exposure to SGBV experienced by women, men, boys and girls. It is developed in accordance with Age, Gender, Diversity principles.<sup>7</sup> Particular challenges relating to the implementation of the SGBV SWG work plan concern funding gaps and thereby a reduction in the number of activities, particularly outreach, conducted.

The key priorities of the agreed Inter-Agency work plan for 2016 include a focus on prevention, response, coordination, information dissemination and advocacy. Each quarter these priorities are updated to reflect the progress made toward achieving targets but also to reflect gaps in provision of services and programming due to resource constraints. The SWG

<sup>7</sup> <http://www.unhcr.org/4e7757449.html>

is working on implementation of the work plan for the year with focus on priorities for the second quarter including finalization of the information sharing protocol (ISP), roll out of the standard operating procedures (SOPs) and training package, implementation of the prevention from sexual exploitation and abuse (PSEA) Inter Agency Protocol and increased community prevention activities including engaging men in accountable practices (EMAP).

## INTER-AGENCY ACHIEVEMENTS

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### Coordination

Two SGBV SWG meetings were held on 12 and 26 May. Key issues advanced were the revised standard operating procedures (SOP) prevention activities. Other key issues included revising the work plan and training plans as well as prepare for the roll out of EMAP. Other issues addressed included potential improvements around food distribution to increase adherence to IASC guidelines as well as mapping of areas identified as having higher risk of GBV incidents. The PSEA TF met and revised the latest documents. UNHCR provided technical bilateral support to assist in the development of PSEA flowcharts and relevant documents with four organisations. The weekly case conference as well as peer supervision meetings between case workers took place in three of the service centers to improve on GBV response timeliness, follow-ups and quality of response.

A multi stakeholder consultation was held on 20 May at UNHCR Kasulu to provide input into the thematic working group report on the situation of refugee women and children. Stakeholders from all sectors attended. The input will be shared during the national level consultations on the development of the National Plan of Action on the Care, Support and Protection of Women and Children led by the Ministry of Health, Community Development, Gender, Elderly, and Children. A further consultation was held in Dar es Salaam on 26 May presenting the field input which was represented in a week-long consultation from 31 May – 3 June in Dar es Salaam.

A meeting was held with the District Social Welfare Officer and the District Resident Magistrate In Charge in Kasulu to discuss issues around child protection, justice and considering ways to enhance cooperation. The meeting was attended by IRC, WLAC, UNICEF and UNHCR. A working meeting was conducted with Radio Amani to coordinate the new radio series on SGBV which is expected to air from the week beginning 13 June.

Technical support was also provided to the drafting of key documents as part of the community based complaints mechanism (CBCM) pilot planned for July. The informal justice mechanisms research continued with focus group discussions and key stakeholder meetings with community members including community leaders led by UNHCR. The final document is expected to be completed in July 2016.

### Prevention and outreach

IRC initiated the roll out of the EMAP from 17 May. The roll out was marked with meetings in the community to gain community support and involvement. These roll out engagement sessions will continue. The first meeting was attended by 44 religious and community leaders, MHA and partners. Violence against women and girls is fueled by commonly held patriarchal attitudes, beliefs, and power dynamics that socialize men and boys. These beliefs – and the associated social norms, institutional structures and every day practices that result from them – are further exacerbated in times of conflict, often resulting in widespread and systematic use of violence against women and girls, as is the case in Nyarugusu. This Operation has embarked on implementing the EMAP and other initiatives such as engaging with key influencers in the community. This approach focuses on primary prevention efforts that engage men to examine and challenge destructive notions of masculinity, gender and power. However, it will require significant investment across the three camps to address attitudinal and behavioral issues as outlined above.

Mobilization meetings to foster community participation in Economic and Social Empowerment (EASE) activities continued. IRC EASE facilitators have covered 47 villages out of the planned 52 thus far to explain how it works and the intended objectives. In total, 449 Women and 59 Men attended the meetings.

The IRC conducted a total of thirty two open dialogues with both the Congolese and the Burundian communities across the camp to enhance safe identification and referrals. Other topics included risks of sexual violence, minimizing exposure to risks and understanding how and where to report and what services to expect. There was emphasis on early reporting as well as community mobilisation on prevention. A total of 2245 (985F, 704M, 323B, and 473G) community members participated in these meetings. In Nyarugusu, the SGBV SWG has engaged the Police in commitments on enhancing community outreach and participation on the new radio magazine series on GBV.

The IRC in collaboration with CEMDO, our environmental partner, completed community awareness in six zones on cooking techniques that consume less firewood and reduces exposure to risks. In the coming period, the IRC and CEMDO will make close follow-ups on initiatives that help minimize GBV risks related to cooking. IRC also discussed community escort with the community. Participants committed to engage other community members in the system.

As part of the girl's empowerment project, the IRC team also held dialogues with 398 girls in zone four on how to keep safe from forms of exploitation and abuse, where and when to report, available services to expect and consequences of late reporting, particularly of sexual violence. Another outreach was held with 17 parent secondary school committee members on the need to encourage girls to seek services if and when they experience harm and services available. The IRC GBV outreach team visited specific zones to disseminate information on where to access services, a total of 213 (118F, 97M). A review of the women's literacy classes was held with 38 volunteer teachers by IRC.

## Training

An introductory session on SGBV was delivered to the newly appointed Burundian community watch team by UNHCR.

## CHALLENGES AND RESPONSES

In May, the number of newly reported incidents related to the collection of firewood increased to on average 5 per week. This is an urgent issue and a scoping mission to initiate the briquetting project is planned as a priority. Community apathy was expressed in some zones during the outreach activities. The outreach teams will work with the newly created refugee leadership in all zones to engage community members as well as use of creative techniques. The community gets discouraged by the long queues at the GBV support centers due to few counseling rooms and limited number of case workers. There are plans to rehabilitate four service centres to create additional confidential counseling rooms and hire additional case workers to reduce waiting times and enhance timely follow-up, pending funding approvals.

*Members of the SGBV SWG in Nyarugusu: the Government of Tanzania's Ministry of Home Affairs (MHA), Babawatoto Tanzania, Community Environmental Management and Development Organisation (CEMDO), International Rescue Committee (IRC), Médecins Sans Frontières (MSF Belgium, Switzerland and Holland), Oxfam Great Britain (Oxfam GB), Save the Children, Tanzanian Red Cross and Red Crescent Society (TRCS), Tanzanian Water and Environmental Sanitation (TWESA), the United Nations Population Fund (UNFPA), the United Nations Children's Emergency Fund (UNICEF), Women's Legal Aid Centre (WLAC) and the World Food Program (WFP). UNHCR and partners are grateful to the Government and people of Tanzania for their generosity and long standing commitment to hosting refugees.*

**Everyone** has a responsibility to contribute to enhanced SGBV prevention and response and to ensure safety of women and girls, men and boys.

### **GOVERNMENT, DONORS, POLICY MAKERS and HUMANITARIAN/HUMAN RIGHTS AGENCIES:**

Provide sufficient resources to ensure effective prevention and response to SGBV.

Ensure programs protect and mitigate the risks of women, girls, men and boys to further harm.

Support the enactment and enforcement of laws and policies that protect women and girls in accordance to international standards.

### **COMMUNITY MEMBERS and HUMANITARIAN WORKERS:**

Challenge negative beliefs, attitudes and practices that perpetuate SGBV. Support men and women, and the youth who oppose SGBV.