INTER-AGENCY STRATEGY FOR THE PREVENTION OF AND RESPONSE TO SEXUAL AND GENDER BASED VIOLENCE

NYARUGUSU¹, TANZANIA

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1. INTRODUCTION

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

It facilitates multisectoral, inter-disciplinary Inter-Agency programming and provision of adequate services. It is aimed at ensuring the provision of accessible, prompt, confidential and appropriate services to survivors of SGBV and reduction of risk of SGBV.

The SWG focuses on ensuring these services for all persons of concern to UNHCR. This strategy is developed in the context of the broader protection strategy for the refugee response including the Regional Refugee Response Plan² developed to respond to the Burundi crisis.

This strategy outlines priority objectives and associated activities to ensure comprehensive SGBV programming to increase quality and programme for enhanced prevention and response activities.³

2. PURPOSE OF STRATEGY

The overarching purpose of the strategy is to 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.⁴

Gender-based violence (GBV) is an umbrella term for any harmful act that is perpetrated against a person's will and that is based on socially ascribed (i.e. gender) differences between males and females. It includes acts that inflict physical, sexual or mental harm or suffering, threats of such acts, coercion, and other deprivations of liberty. These acts can occur in public or in private.⁵ It is recognized that SGBV particularly affects women and girls due to unequal power relations. Men and boys can be subject to any form of violence.

¹ Including the boder entry points at Kigoma and Manyovu.

² <u>http://data.unhcr.org/burundi/documents.php?page=1&view=grid&Org%5B%5D=1</u>

³ GBV AoR Handbook for Coordinating Gender Based Violence in Humanitarian Settings

http://www.unicef.org/protection/files/GBV Handbook Long Version.pdf ⁴ http://www.unhcr.org/4e7757449.html

⁵ Revised IASC Guidelines for GBV Interventions in Humanitarian Settings 2015

3. NATURE AND SCOPE OF SGBV DURING EMERGENCIES

Tanzania presently has two refugee camps hosting persons of concern to UNHCR in Nyarugusu and Nduta. As of 17 January 2016 UNHCR has registered 84, 854 persons of concern fleeing the most recent situation in Burundi in Nyarugusu.⁶ There are 63,622 persons from Democratic Republic of the Congo (DRC) and 3,378 from other nationalities and previous conflict in Burundi.⁷ Approximately 80% of the newly arrived Burundian population is comprised of women and children raising significant challenges to ensuring risk reduction. Additionally, many persons of concern from DRC have been in Nyarugusu for up to 20 years and there has been little attention from donors to their situation.

The issue of SGBV around all persons of concern and especially those coming from the recent conflict in Burundi is critical. Sexual violence has been reported as a tool of the most recent conflict. GBVIMS⁸ statistics indicate that during the emergency period from 1 May to 30 September there were 350 reported incidents of sexual violence of which 77% occurred in Burundi. Forty-one percent of survivors reported violence by a stranger, and 34% reported violence by unknown perpetrators, followed by 9% other resident community members.⁹

Of the Burundian survivors reporting, 91% are female and 88% over the age of 18. Overall, the most common type of violence reported was rape at 48%, followed by 31% psychological/emotional abuse; 11% denial of resources, opportunities or services; 8% physical assault; and 2% sexual assault. Twenty-four percent of survivors reported violence by a stranger, and 24% reported violence by a family member, followed by unknown perpetrators at 20%, intimate/former partners at 20%, and other resident community members at 7%.

Of the Congolese survivors reporting, 95% are female and 63% over the age of 18. Overall, he most common type of violence reported was rape at 46%, followed by 37% psychological/emotional abuse; 9% physical assault; 7% denial of resources, opportunities or services; and 1% sexual assault. Forty-four percent of survivors reported violence by an intimate/former partner, followed by strangers at 24%, family members at 13% and primary caregivers at 5%.

In an anthropological study¹⁰ carried out in 2014 by IRC many protection concerns were identified including the fact that particularly due to cultural stigma women, men, boys and girls are often afraid to speak about their experiences and they do not seek services. Stigma and repercussions from community members have been consistently reported by those seeking to access justice and negatively influence survivors and witnesses. Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) survivors and persons with disabilities (PWD) are acutely underreporting.

Due to the sudden large influx beginning in April 2015 the Inter-Agency response struggled to meet the needs of all persons of concern and many temporary measures were initiated. The Inter-Agency response is now moving toward more protective long-lasting structures and facilities but the rate of continued new arrivals hampers progress.

⁶ UNHCR Tanzania statistics <u>http://data.unhcr.org/burundi/country.php?id=212</u>

⁷ UNHCR Tanzania statistics <u>http://data.unhcr.org/burundi/country.php?id=212</u>

⁸ GBVIMS is implemented by IRC in Tanzania

⁹ It is important to note that consolidated data in the GBVIMS relates to reported cases exclusively, and is in no way representative of the total incidence or prevalence of SGBV in one location or group of locations.

¹⁰ 18 Years Displaced – An Anthropological Study of Protection Concerns Facing Congolese Refugees in Nyarugusu refugee Camp Tanzania – IRC Tanzania.

UNHCR and partners are implementing a multi-sectoral response in alignment with international guidelines with the following identified challenges and gaps:

- Disclosure: community consultations indicate strongly that disclosure remains a challenge due to the stigma around reporting and likelihood of community backlash. As seen from the GBVIMS data many alleged perpetrators are unknown and often due to lack of sufficient evidence the police cannot bring the case forward which has been seen as an impediment to other survivors reporting. Equally if the alleged perpetrator is a family member, relative or neighbor the likelihood of facing pressure to not report is high.
- Case management: the capacity of national and international actors to provide quality case management services has been impacted by the recent influx. Additional human and financial resources are required to maintain quality in view of the increased caseloads. Revision of Inter-Agency Standard Operating Procedures (SOPs) on SGBV including case management is essential to enhance coordination, promote a survivor centred approach while providing a platform for standardization and training.
- Livelihoods: there is little to no access to livelihoods or income generating activities. There is a restriction on movement of persons of concern outside of the camp area and inside the camp opportunities are very limited. Some refugees have resorted to negative coping mechanisms including survival sex and others to selling precious commodities like firewood or personal belongings. Consultations with the authorities and significant additional funding and comprehensive programming will be required to address this further.
- Access to justice: legal representation for survivors is provided by the Public Prosecutor. The SGBV SWG plans to enhance the coordination of and access to justice through advocacy for mobile courts. Basic and advanced training will be provided to Gender and Child Desk Officers to increase their capacity to advocate on behalf of survivors. Training will also be provided to Magistrates. In both the Congolese and Burundian communities' informal dispute resolution mechanisms exist and many survivors are prevented from filing charges in favour of this mechanism. In coordination with the Protection Working Group (PWG) an assessment of such mechanisms will be undertaken and standards enhanced in appropriate mechanisms.
- Alternative sources of fuel: the lack of sustainable alternatives to firewood is a key issue in Nyarugusu camp in particular. Fuel is provided to a limited number of persons with specific needs only. The SGBV SWG will prioritise the creation of community-led prevention programmes while promotion coordination with environmental management on the identification of long-term sustainable protective strategies. Training on mud-stove techniques will be brought to a wider audience and the distribution of fuel efficient stoves will also be prioritized as immediate responses.
- Psychosocial support services (PSS) for men and male youth: while women and girls have access to a range of women's friendly spaces (WFS), child friendly spaces (CFS), screening activities at registration points there are no dedicated spaces where men and male youth can access general or specialized PSS. Service provision for men and boys remains limited, in terms of availability and competencies, on engaging them in SGBV prevention and dialogue around masculinities. This gap has been highlighted by community members in participatory assessments and it is believed that more holistic programming will increase the opportunities to engage in meaningful dialogue with the male population while also providing another entry point for disclosure.

- Education: specific attention and coordination with the education sector will be essential in addressing the specific issue of sexual exploitation (SEA) in schools. It will be essential to strengthen the reporting mechanisms and engage community involvement in preventing SEA.
- Cross sectoral programming: coordination with child protection is essential considering that 59% of the camp population comprise of children.¹¹ Additionally effective WASH and Shelter programming is essential to increase standards in line with minimum international standards. NFIs, food security, camp management will also be prioritized. It will be essential to ensure strengthened programming to enhance access to and utilization of sexual and reproductive health services across all age categories.
- Training: training on Inter-Agency SOP and referral pathways, SGBV concepts and definitions, case management, humanitarian Code of Conduct and Protection from Sexual Exploitation and Abuse (PSEA) has not yet reached all community-based service providers who are first responder to refugees. Inter-Agency complaint mechanisms are to be enhanced.
- PSEA: roll out of the PSEA policy with clear complaints processes and training plan for staff and affiliate workforce and community sensitization is initiated but not yet achieved. The action plan will include strengthened PSEA focus across education facilities as a key priority.

4. THEMATIC PRIORITIES

Using participatory assessment and analyses the SGBV SWG has identified the following key thematic priorities: domestic violence, sexual violence, masculinities and engagement of men and male youth, protection of persons with disabilities children and LGBTI persons of concern against SGBV, provide safe access and alternatives to domestic energy and addressing sexual exploitation. Additionally a priority will be achieving 100% coverage of individual solar lighting. An overarching priority is ensuring PSEA is well incorporated into all Inter-Agency programmes.

5. STRATEGIC PRORITIES

Coordination

In accordance with international guidelines¹² the SGBV SWG endeavours to provide a consistent platform for coordination of prevention and response activities. The SWG aims to improve the quality of service delivery through accessible, prompt, safe and confidential services in camp. The Group will identify possible new actors for engagement while building the capacity of national actors including that of the Police Gender and Child Desks based in camp. Dedicated monitoring and evaluation will be essential to assessing the quality of intervention provided to survivors.

The SWG will enhance comprehensive programming by ensuring regular assessment, analysis and strategic planning aimed at prevention of SGBV and mitigation of consequences. The SWG will also look to mobilise resources to effectively program for SGBV prevention and response activities.

The SWG will promote and engage in effective coordination with other sectors to enhance crosssectoral programming on SGBV. SGBV SWG members participate actively and meaningfully in the PSEA Task Force and associated networks coordinated by UNHCR.

¹¹ UNHCR Tanzania statistics October 2015.

¹² Revised IASC Guidelines for GBV Interventions in Humanitarian Settings 2015; SPHERE

The co-leads of the SWG will endeavor to ensure full and transparent communication around all activities including meeting schedules. A bi-annual review meeting will be conducted with all agencies and organsiations working as part of the refugee response.

Prevention

The SGBV SWG will coordinate Inter-Agency awareness raising campaigns using elicitive approaches and positive messaging. Dissemination plans will be developed using interactive, culture and age appropriate methodologies.

A key priority will be to operationalize SGBV prevention and response programming across all sectors promoting the implementation of minimum international standards. Community based approaches will be used to engage community leaders, religious leaders, community committees and community based organisations to mobilise and build capacity.

Response

Strengthening quality of response through capacity building will enhance access to information and services. Capacity building will centre on training on SOPs and referral pathways, PSEA, Code of Conduct and engagement with community based complaints mechanisms. Specific training will be provided to community based organsiations and groups on safe identification and referrals.

Trained community based workers will continue to be mobilized in geographical areas to assist in safe identification and referral and mobilization of the community. Continued capacity building of specialized services such as the provision of clinical management of rape (CMR) and access to justice will continue.

Advocacy

The SGBV SWG will work closely with refugee coordination structures to strengthen engagement with priority areas such as community services, child protection, WASH, protection, environmental protection, shelter, food security, health and education as well as law enforcement authorities and relevant national stakeholders.

The refugee camp leadership is in a unique position to advocate on behalf of their own community. Training will be provided to female leaders to enhance their meaningful participation, representation and engagement with the community and service-providers on programming and interventions.

6. INFORMATION DISSEMINATION

The Gender-Based Violence Information Management System (GBVIMS) is a data management system that enables those providing services to SGBV survivors to effectively and safely collect, store, analyze, and share data related to reported incidents of SGBV. The SGBV SWG will seek to update the Information Sharing Protocol (ISP) to reflect the updated situation following the Burundi crisis.

7. ACTION PLAN

The Strategy includes yearly Action Plans developed by the SGBV SWG at the beginning of each calendar year. Endorsed Action Plans are distributed. Action Plans specify timeline and actors etc.