

Chapter 3: Identification, Prevention and Response to Risks Faced by Women and Girls

Overview

Introduction

ExCom has acknowledged that, “while forcibly displaced men and boys also face protection problems, women and girls can be exposed to particular protection problems related to their gender, their cultural and socio-economic position, and their legal status, which mean that they may be less likely than men and boys to be able to exercise their rights”. ExCom has also recognized therefore that “specific action in favour of women and girls may be necessary to ensure they can enjoy protection and assistance on an equal basis with men and boys”.¹

Identifying risks to enhance protection

Greater awareness of the particular protection risks to which displaced, returnee, (re)integrating or stateless women and girls are exposed means UNHCR is working to move away from a perception of women and girls as being inherently vulnerable. Rather, the Office advocates an approach which identifies risk factors present in the wider protection environment and/or resulting from individual circumstances.

By identifying and assessing these different and often multiple risks early and on a continuing basis, we can identify women and girls at heightened risk, strengthen prevention, response and solutions strategies to tackle these risks, and thereby enhance the protection of women and girls of concern both individually and more generally.

Purpose

The purpose of this chapter is to show how to

- identify risks faced by women and girls, whether these be in the wider protection environment or individual risks;
- tackle risks in the wider protection environment and respond to individual risks arising and secure solutions; and
- establish individual case management systems to monitor and follow-up on interventions to protect women and girls at heightened risk.

Note: Chapter 4 describes UNHCR's protection response. Chapter 5 outlines specific rights and how to respond to violations of these rights.

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¹ ExCom Conclusion, No. 105 (LVII), 2006, pre-ambular para. 3, at <http://www.unhcr.org/cgi-bin/texis/vtx/refworld/rwmain?page=printdoc&docid=45339d922>. For more background information see also, UNHCR, “Proposed Executive Committee Conclusion on Women at Risk, Follow-up Paper”, 4 May 2006, at <http://www.unhcr.org/excom/EXCOM/45082362c.pdf>.

3.1 Risk factors faced by women and girls

“The identification of women and girls at risk is problematic and labor intensive. It requires a thorough knowledge of both the community and an assessment of protection risks and gaps. If not undertaken appropriately, the identification process can also exacerbate the situation for women and girls due to lack of confidentiality, suspicion and time lags between assessment and intervention – issues that can give rise to greater abuse, marginalization and trauma. All displaced women and girls may be at risk of gender-based violence and exploitation and, hence, it is not easy to delineate those at higher risk who require specific follow-up and urgent protection interventions.”

Women’s Commission for Refugee Women and Children, *Displaced Women and Girls at Risk*²

Introduction

In the past, the concept of “women at risk” was primarily seen in UNHCR practice as a resettlement criterion to be used to protect individual refugee women and girls. It has now been recognized that the concept has potential as a protection tool in a wider range of situations where forced displacement exposes women and girls to a range of factors which may put them at risk of violations of their rights.³

UNHCR has therefore built on work undertaken by partners and developed a framework to identify and respond to the situation of women and girls of concern who are at heightened risk.⁴

This approach is set out in ExCom Conclusion No. 105 (LVII) of 2006 on women and girls at risk and informs the ExCom Conclusion No. 107 (LVIII) of 2007 on children at risk. It is described in greater detail below.

Purpose

Identification and assessment of the presence and severity of the risk factors, to which women and girls of concern may be exposed, help determine who is at heightened risk. This then enables targeted responses to be devised and implemented. This process is critical if we are to respond effectively, to avoid (further) violations of women’s and girls’ rights and to fulfil our mandate to secure their protection.

Summary of risk factors

Identifying women and girls at risk in a given situation requires us to identify the “risk factors” that threaten their rights. Some of the risk factors that can arise as a result of, and after, women and girls flee their homes include:

Risk factors in the wider protection environment resulting from

- security problems threatening or exposing them to sexual and gender-based violence (SGBV) or other forms of violence;
 - problems accessing and enjoying assistance and services;
 - position of women and girls in society leading to inequalities;
 - legal systems which do not adequately respect, protect and fulfil their rights;
 - protection mechanisms which do not adequately respect, protect and fulfil their rights; and
 - absence of solutions.
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² Women’s Commission for Refugee Women and Children, *Displaced Women and Girls at Risk: Risk Factors, Protection Solutions and Resource Tools*, February 2006, p. 19, at <http://www.womenscommission.org/pdf/WomRisk.pdf>.

³ See generally, UNHCR, *Sexual and Gender-based Violence against Refugees, Returnees, and Internally Displaced Persons: Guidelines for Prevention and Response*, May 2003, at <http://www.unhcr.org/protect/PROTECTION/3f696bcc4.pdf>, pp. 22 and 71.

⁴ See, UNHCR, “Proposed Executive Committee Conclusion on Women at Risk, Follow-up Paper”, 4 May 2006, and also, for example, the research by the Women at Risk Programme of the Centre for Refugee Research, University of New South Wales, Australia, at <http://www.crr.unsw.edu.au/> and by the Women’s Commission for Refugee Women and Children cited at the start of this section.

3.1 Risk factors faced by women and girls, continued

Summary of risk factors (continued)

Individual risk factors resulting from

- civil status or situation in society;
- previous exposure, or risk of exposure, to SGBV and other forms of violence; and
- need for specific health care or other support.

Risk factors in the wider protection environment

Risk factors in the wider protection environment that can arise include but are not limited to those listed in the table below.

Risk factor	Resulting from...
Security problems threatening or exposing them to SGBV	<ul style="list-style-type: none"> • inadequate housing • the need to collect fuel and water and to tend to crops/animals in unsafe locations • isolation in urban settings, as well as risks resulting from problems with housing/landlords and/or with harassment/arrest by the authorities • children being displaced, especially where they are unaccompanied or separated and/or are forced to live on the streets or in unsafe institutions • intolerance and xenophobia
Problems accessing and enjoying assistance and services	<ul style="list-style-type: none"> • inadequate food and/or material assistance • inadequate health care, especially given women's and girls' sexual and reproductive roles and disproportionate vulnerability to HIV/AIDS • lack of access to education; unsafe or poor educational opportunities • child labour • abuse by those in positions of authority controlling access to assistance and services • poverty and lack of livelihood or income-generating opportunities, leading, for instance, to exposure to survival sex
Position of women and girls in society	<ul style="list-style-type: none"> • discrimination and marginalization • community and leadership structures, including camp management, which do not include them in a meaningful manner • unequal gender and power relations • changes in gender roles • prevalence of traditional practices harmful to women and girls • breakdown of family, community support structures and values
Legal systems which do not adequately uphold their rights	<ul style="list-style-type: none"> • justice systems that do not fully address harmful practices or domestic violence or restrict women's rights to marriage, divorce, child custody, housing, land, property and inheritance • traditional justice systems that do not respect international norms • national registration systems that do not provide refugee or asylum-seeking women with individual documentation • legal systems which discriminate against non-nationals, including asylum-seekers, refugees and stateless persons • asylum systems which are not sensitive to the situation and claims of female asylum-seekers, including girls
Protection systems which do not adequately uphold their rights	<ul style="list-style-type: none"> • failure to register asylum-seeking and refugee women and girls individually and/or the specific needs of women and girls with disabilities or older women • lack of disaggregated data on women and girls of concern • lack of awareness about women's and girls' rights • lack of confidence in community complaints mechanisms

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3.1 Risk factors faced by women and girls, continued

Risk factors in the wider protection environment (continued)

Risk factor	Resulting from...
Protection systems which do not adequately uphold their rights, contd.	<ul style="list-style-type: none"> • weak or unclear reporting systems with inadequate resources to monitor and follow-up on cases involving, for instance, unaccompanied and separated girls and other women with specific needs • systems to identify, monitor and support women and girls at risk which do not respond adequately or promptly • lack of standard operating procedures to report on, and respond to, SGBV • lack of confidential, individual case management systems/committees • lack of best interests assessments and determinations for girls • weak or unsatisfactory relations between staff and displaced communities • insufficient presence of female and international staff or female law enforcement or security officers • lack of sustainable durable solutions, particularly in protracted situations

Individual risk factors

These more general risk factors may be combined with risk factors which put individual women and girls at risk. These can be grouped non-exhaustively as in the table below.

Risk factor	Resulting from ...
Civil status or situation in society	<p>Their status or situation in society because they are</p> <ul style="list-style-type: none"> • alone or unaccompanied, including women and girls with disabilities • single heads-of-household including grandmothers • in mixed and/or polygamous marriages • without documentation • older women, including widows, without family or community support • stateless • girls, including adolescents, who are unaccompanied or separated, heads of household, mothers, or out of school • women and girls who oppose social norms, which violate their individual rights, including in relation to their sexual orientation, their opposition to female genital mutilation (FGM), under age or forced marriage, polygamy etc. • indigenous or have a particular religious or other minority status • unable to access assistance or asylum procedures, including child-friendly procedures, and/or are in detention
Exposure or risk of exposure to SGBV or other violence	<p>Their exposure, or risk of exposure, to</p> <ul style="list-style-type: none"> • rape, torture, domestic violence or other serious physical harm • detention • abduction • trafficking • female genital mutilation • early or forced marriage • forced contraception, abortion or sterilization • maltreatment by foster families, relatives, or caregivers in institutions • forced recruitment by armed factions, whether as combatants or sex and labour slaves • sexual exploitation or abuse, for instance, by individuals in positions of authority, including humanitarian workers and peacekeepers

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3.1 Risk factors faced by women and girls, continued

Individual risk factors (continued)

Risk factor	Resulting from ...
Specific support needs	<p>Specific support needs, including as a result of</p> <ul style="list-style-type: none"> • youth or old age • physical or mental disability • trauma • pregnancy and motherhood, including as teenage mothers • lack of access to safe reproductive health care, including in cases of sexual assault, rape, and incest • being affected by HIV/AIDS, whether because they are HIV positive or because other family members are or have died as a result of AIDS • other medical conditions particular to their sex or gender

More on individual risk factors

Many of these individual risk factors are referred to at relevant points throughout this Handbook. Three cross-cutting individual risk factors are in addition mentioned here and relate to women and girls:

- with disabilities,⁵
- who are older, and
- who oppose social norms which violate their individual rights.

Individual risk factor: Disability

Disability is part of human life. People with disabilities can be found in every society, culture and community. Attitudes towards them vary in different cultures, as does the notion of what is a disability. These determine the level to which people with disabilities are included or excluded from society.

Women and girls with disabilities may suffer multiple discrimination on account of their sex, age and gender, as well as their disability. Girls with a disability may be less likely to have their birth registered (see chapter 4, section 2.2). Women and girls with disabilities are more likely to be excluded from shelter, education, and opportunities such as skills training. They may be neglected, isolated, exploited, abandoned, or physically or sexually abused. This puts them at greater risk of HIV/AIDS infection.⁶

Examples: Disability, conflict and flight

If women and girls with disabilities are also caught up in conflict and/or forced to flee, their situation becomes much harder. As the Committee on the Rights of the Child has noted: "Refugee and internally displaced children with disabilities are vulnerable to multiple forms of discrimination, particularly refugee and internally displaced girls with disabilities, who are more often than boys subject to abuse, including sexual abuse, neglect and exploitation."⁷ They may need help seeking safety, while the disruption of support networks may lead to increased isolation and neglect. Even if they can flee, reduced mobility may limit their access to services.⁸

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⁵ See generally, UNHCR, "The Protection of Older Persons and Persons with Disabilities", EC/58/SC/CRP.14, 6 June 2007, at <http://www.unhcr.org/excom/EXCOM/4666d9602.pdf>.

⁶ Drawn from Report of the Expert Group Meeting, "Elimination of All Forms of Discrimination and Violence against the Girl Child", 25–28 September 2006, at http://www.un.org/womenwatch/daw/egm/elim-disc-viol-girlchild/EGM%20Report_FINAL.pdf, paras. 98–10.

⁷ Committee on the Rights of the Child, General Comment No. 9 (2006), the rights of children with disabilities, September 2006, para. 79.

⁸ "Report of the Secretary-General on the Protection of Civilians in Armed Conflict", S/2007/643, 28 October 2007, para. 27.

3.1 Risk factors faced by women and girls, continued

**Examples:
Disability, conflict
and flight
(continued)**

The 1996 Machel Study on the impact of armed conflict on children has also reported that armed conflict in the previous decade had caused over a million deaths of children in poor countries. For each dead child, it found that three more had been injured or physically disabled, for instance, by stepping on landmines, while many more had been psychologically damaged.⁹ Exposure to SGBV can also result in disability, including, for instance, where mutilation is used as a weapon of war.

**Individual risk
factor: Older
women**

On average, women live longer than men. Older women of concern can face particular protection problems when:

- they are widows, on their own or otherwise isolated or marginalized;
 - social support networks have disintegrated as a result of conflict and/or flight;
 - they are left behind, as younger, fitter members of the community integrate into the society around them or return home;
 - they become chronically dependent upon assistance; and
 - these challenges are compounded by a lifetime of disadvantage and discrimination because of their gender, which means for instance, that they may not be literate.¹⁰
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**Examples: Older
women**

Older women who are frail may have difficulties moving around, communicating, concentrating, or understanding and may therefore be unable to flee or access essential protection services. Accommodation may not be designed with their specific needs in mind. Food and non-food items may be inadequate and/or inappropriate and distribution points may be located far from their homes. They may be forced to exchange or sell their rations to pay for someone to help them collect assistance, including water and fuel.

Older women may suffer from chronically debilitating and untreated health conditions. Yet they may not be able to access health services or these may be inadequate, for instance, because treatments for physical and mental disabilities and/or female-to-female medical services are lacking.

Sometimes, the community may see older members as a community or family resource, as people who can provide child care or traditional birth services, mediate in conflicts and continue culture and wisdom. In other situations, however, they may be seen as a burden, thereby increasing a sense of stigma and isolation, especially if there are no social services to provide support. Older women may have to care for their adult children who have AIDS and/or may become single heads of household caring for their grandchildren if their own children die.

Where older people are ostracized or marginalized by their families and communities, this can exacerbate protection problems and result in depression, alcoholism, isolation and failure to attend to their specific needs.

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⁹ See generally, Action for the Rights of Children (ARC), "Critical Issues: Disability", 2001.

¹⁰ See generally, UNHCR, "The Protection of Older Persons and Persons with Disabilities", EC/58/SC/14, 6 June 2007.

3.1 Risk factors faced by women and girls, continued

Individual risk factor: Opposing social norms

Women and girls may oppose social norms which violate their rights in numerous ways depending on the society in which they live. They may, for instance, wish

- to continue their education;
- not to marry, including not wishing to enter into a polygamous marriage;
- to divorce or leave their husband;
- not to conform to traditional dress codes;
- not to submit to traditional practices, such as female genital mutilation or early or forced marriage;
- to prevent their daughters from being subjected to violations of their rights; or
- to have a relationship with someone of the same sex.

Adopting such positions and taking such action can call into question stereotypes about gender roles in a particular society. As a result women and girls asserting their right to make such choices may face discrimination, ostracism, persecution, including exposure to SGBV, and even death.

Examples: Opposing social norms

This is true, for instance, for a woman exposed to domestic violence, who seeks to separate from or divorce her violent husband. In doing so, she may challenge prevailing social customs or she may be forced to remain in this violent situation.

Similarly, if a woman or girl does not wish to enter a polygamous marriage or to enter into a forced or under-age marriage, her position in the society in which she lives may mean this raises serious protection concerns. She may feel she has no choice but to do so, if a single woman in her society has no protection. Alternatively, if she refuses, she may be ostracized and rejected by her family and/or society and face further protection problems as a result. (See also chapter 5, section 2.2 for more on marriage, civil status and family relations.)

Lesbian women and girls may also be exposed to serious violations of their rights, particularly in societies where homosexuality is a punishable offence, where legislation discriminates against them, and/or where homosexuality is not accepted by certain or many sections of society. Lesbians may therefore be exposed to multiple forms of discrimination on account of both their gender and their sexual orientation, which may, in some cases, result in persecution, rape, and threats and attacks on their life.

Legal standards and guidelines

Legal standards and guidelines relating to these cross-cutting individual risk factors are outlined below. International and regional legal standards and guidelines regarding specific rights are outlined in greater detail in chapter 5, while the international and regional legal framework is outlined in chapter 6.

Legal standards and guidelines: Disability

With regard to disability, the 2006 Convention on the Protection and Promotion of the Rights and Dignity of Persons with Disabilities recognizes that women and girls with disabilities are often at greater risk, both within and outside the home, of violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation and that they are subject to multiple

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3.1 Risk factors faced by women and girls, continued

Legal standards and guidelines: Disability
(continued)

discrimination. It also emphasizes the need to incorporate a gender perspective in all efforts promote the full enjoyment of human rights and fundamental freedoms by everyone with disabilities.¹¹ At the regional level, the Inter-American Convention on the Elimination of All Forms of Discrimination Against Persons with Disabilities of 1999 came into force in 2001.¹²

States are required to take measures to ensure the full and equal enjoyment by women and girls with disabilities of all human rights and fundamental freedoms and to combat stereotypes, prejudices and harmful practices relating to persons with disabilities, including those based on sex and age, in all areas of life.¹³

The Committee on the Rights of the Child has strongly emphasized “that refugee and internally displaced children with disabilities should be given high priority for special assistance, including preventative assistance, access to adequate health and social services, including psychosocial recovery and social reintegration”.¹⁴

Further guidance can be found in the OHCHR, Inter-Parliamentary Union and United Nations Department for Economic and Social Affairs (UNDESA) *Handbook on the Convention on the Rights of Persons with Disabilities and its Optional Protocol* of October 2007.

Legal standards and guidelines: Older women

With regard to older women, the 1991 UN Principles for Older Persons¹⁵ establish five principles for incorporation of the rights of older persons into programmes: independence, participation, care, self-fulfilment and dignity. UNHCR has incorporated these into its “Policy on Older Refugees” endorsed by the Standing Committee in March 2000.

Legal standards and guidelines: Sexual orientation

With regard to sexual orientation, the 2007 Yogyakarta Principles on the Application of International Human Rights Law in relation to Sexual Orientation and Gender Identity affirm the binding international legal standards on this issue as derived from key fundamental human rights instruments.¹⁶

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¹¹ See preamble and Article 6. As of September 2007, over 100 States had signed the Convention. See also Committee on Economic, Social and Cultural Rights, General Comment No. 5 (1994) on persons with disabilities; OHCHR, IPU and UNDESA, *Handbook on the Convention on the Rights of Persons with Disabilities and its Optional Protocol*, at <http://www.ohchr.org/english/about/publications/docs/ExclusionEqualityDisabilities.pdf>.

¹² Relevant provisions in other regional instruments include African Charter of Human and Peoples' Rights, Article 18(4); Protocol to the African Charter on the Rights of Women in Africa, Article 23; African Charter on the Rights and Welfare of the Child, Article 13; African Youth Charter, Article 24; Protocol of San Salvador, Articles 6 and 9; European Social Charter (revised), Article 15; Andean Charter for the Promotion and Protection of Human Rights, Articles 48 and 49; and 2005 Organization of Islamic States Covenant on the Rights of the Child in Islam, Article 16.

¹³ See Convention on the Protection and Promotion of the Rights and Dignity of Persons with Disabilities, Articles 6–8; CRC Committee, General Comment No. 9 (2006) on the rights of children with disabilities, September 2006, especially paras. 78–80.

¹⁴ See CRC, Article 23, and Committee on the Rights of the Child, General Comment No. 9 (2006), the rights of children with disabilities, para. 79.

¹⁵ These were adopted by the General Assembly in A/RES/46/91, December 1991. Provisions in regional instruments relevant to the protection of older persons include African Charter on Human and Peoples' Rights, Article 18(4); Protocol to the African Charter on the Rights of Women in Africa, Articles 20 and 21; Additional Protocol to the American Convention on Human Rights in the Area of Economic, Social and Cultural Rights (Protocol of San Salvador), Article 17; European Social Charter (revised), Article 23; Charter on Fundamental Rights of the European Union, Article 25.

¹⁶ These principles were drafted by eminent human rights experts and approved in Yogyakarta, Indonesia, in 2007. They reflect binding legal standards with which all States must comply and are at <http://www.yogyakartaprinciples.org/>. At the regional level, see also 2002 Andean Charter for the Promotion and Protection of Human Rights, Articles 52 and 53.

3.1 Risk factors faced by women and girls, continued

How risk factors may combine

The existence of one of the various risk factors outlined above, whether in the wider protection environment or at an individual level, does not automatically place someone at heightened risk. They may, however, combine in the following ways depending on the circumstances:¹⁷

- the presence of one risk factor alone may be sufficient to require an urgent protection intervention, including in response to SGBV;
 - the presence of a combination of individual and wider-environment factors can be expected to result in heightened protection risks;
 - women and girls may have been subjected to SGBV in the place of origin or during flight, which may place them at heightened risk in the area of displacement or return; or
 - threat levels may change and may thereby expose women and girls to heightened (or reduced) risk, for example, during the crisis or emergency phase, if the situation stabilizes or if it becomes protracted.
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Distinguishing risk and heightened risk

The distinction between risk and heightened risk is important, especially since not all members of groups with specific needs are at heightened risk and vice versa.¹⁸

For instance, a young woman with a disability in a supportive family set up will not necessarily be at heightened risk, although she may become so if she is later displaced and separated from her family. By contrast, a married woman or girl subject to domestic violence is likely to be at heightened risk, depending on what protection mechanisms may be available in her family, community or from government authorities.

¹⁷ ExCom Conclusion No. 105 (LVII), 2006, para. (d).

¹⁸ UNHCR, "The Protection of Older Persons and Persons with Disabilities", EC/58/SC/CRP.14, 7 June 2007, at <http://www.unhcr.org/excom/EXCOM/4666d9602.pdf>, para. 23; UNHCR, "Note on International Protection", A/AC.96/1038, 29 June 2007, para. 65.

3.2 Prevention and response to risks in the wider protection environment

“Responding more effectively to protection problems faced by women and girls at risk requires a holistic approach that combines preventive strategies and individual responses and solutions. It involves collaboration between, and the involvement of, all relevant actors, including men and boys, to enhance understanding and promote respect for women’s and girls’ rights.”

UNHCR Executive Committee, Conclusion No. 105 (LVII), 2006, women and girls at risk, para. (g)

Introduction

The previous section outlines how risk factors present in the wider protection environment and individual risk factors may combine to place women and girls of concern at heightened risk of violations of their rights.

This section sets out a framework for tackling risks arising in the wider protection environment. Section 3 of this chapter outlines how individual confidential case management systems and committees should be established and implemented to ensure a holistic response to protection risks faced by women and girls.

Purpose

The purpose of this section is to:

- set out the international legal standards and responsibilities, which underpin States’ and our response to risks in the wider protection environment; and
- describe briefly how to respond to these risks through measures to identify, assess and monitor risks, establish and strengthen secure environments, and empower women and girls.

There is also a field practice example for Afghanistan, showing how UNHCR has worked with partners to set up a national strategy to identify and respond to protection risks faced by women and girls of concern.

International legal standards and guidelines

Everyone is entitled to enjoy their human rights and fundamental freedoms without distinction or discrimination, including as regards age, sex or gender.¹⁹

ExCom Conclusions No. 105 (LVII), 2006, on women and girls at risk and No. 107 (LVIII), 2007, on children at risk provide guidance on how to establish and implement mechanisms to respond to the situation of women and girls at risk. They are reproduced in Annexes 1 and 2 of this Handbook.

Responsibility: States

The protection of women and girls is primarily the responsibility of States. They have an obligation to:

- respect women’s and girls’ rights and refrain from discriminatory actions which directly or indirectly deny their rights;
 - protect their rights, including by taking steps to eliminate prejudices, customary and other practices that perpetuate the notion of the inferiority or superiority of either sex and stereotyped roles for men and women; and
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¹⁹ UDHR, Articles 1 and 2; ICCPR, Article 2; ICESCR, Article 2; CEDAW Article 3; CRC, Article 2; 1951 Refugee Convention, Article 3. International and regional legal standards and guidelines regarding specific rights are outlined in greater detail in chapter 5. The international and regional legal framework is outlined in chapter 6.

3.2 Prevention and response to risks in the wider protection environment, Continued

Responsibility:
States (continued)

- fulfil their rights by taking steps to ensure that in practice, these rights are respected, including through ensuring access to national legal systems so that these rights can be enforced.²⁰

States are responsible not only for acts by their authorities but also for private acts if they fail to act with due diligence to prevent violations of rights or to investigate and punish acts of violence. They are also responsible for providing compensation.²¹

Responsibility:
UNHCR

If UNHCR is to fulfil its mandate to protect women and girls of concern and secure durable solutions for them, it has a responsibility both to support States build their capacities to fulfil their responsibilities to protect women and girls and to ensure that the Office's own initiatives prevent and respond effectively to risks in the wider protection environment.

How to respond

Responding more effectively to the protection risks faced by women and girls requires a holistic approach that combines preventive strategies, individual responses and solutions. It involves collaboration among, and the involvement of, all relevant actors, and should include working with men and boys to understand and promote respect for the rights of women and girls.

A framework for identifying, assessing, responding to and preventing these risks is set out in ExCom Conclusion No. 105 (LVII), 2006, on women and girls at risk.

This Conclusion outlines actions to be undertaken by States, UNHCR, other relevant agencies and partners. The more specific actions listed there are placed in their relevant location in the Handbook, so that only a summarized listing relating to risks in the wider protection environment is given below.

Note: Section 3 of this chapter which follows explains how individual case management systems should be established to respond to the situation of individual women, girls, boys and men at heightened risk.

How to respond:
Risks in the wider protection environment

As outlined in ExCom Conclusion No. 105, strategies to tackle protection risks in the wider protection environment should include each of the following non-exhaustively listed steps and actions to

Step	Action
1	Identify, assess and monitor risks faced by women and girls in the wider protection environment;
2	Establish and strengthen secure environments; and
3	Support the empowerment of women and girls of concern.

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²⁰ See Committee on Economic, Social and Cultural Rights, General Comment No. 16 (2005) on the equal right of men and women to the enjoyment of all economic, social and cultural rights, specially paras. 18–21; Human Rights Committee, General Comment No. 28 (2000), equality of rights between men and women.

²¹ Committee for the Elimination of Discrimination Against Women, General Recommendation No. 19 (1992), violence against women, para. 9.

3.2 Prevention and response to risks in the wider protection environment, continued

1. Identifying, assessing and monitoring

Effective identification of these risks involves gathering information, including through participatory assessments, on

- legislation which is discriminatory or persecutory either in its substance or in the manner in which it is implemented;
- abusers/perpetrators who may place women and girls at risk, which can be done by analysing the institutions and people committing abuses, sources of power and influence, dissecting their chains of command, motivations, objectives and the interests driving their decisions;²²
- circumstances, such as armed conflict, which place women and girls at risk, either generally or specifically, for instance, if they are of a particular ethnic background or religion; and
- prevailing norms and practices, which may discriminate against certain individuals and which the State is either unwilling or unable to control.

The process can be strengthened by incorporating gender issues into early warning mechanisms, alerts and contingency plans, conducting a rapid situation analysis at the start of a new emergency and integrating gender-based risk analysis into inter-agency assessments.²³

Ongoing assessment and monitoring of protection risks, including with women, men, girls and boys in the community, is essential to review risk levels and how these elements may combine and affect each other.

Note: For more on participatory assessment, see chapter 2, section 3. For more on situational analysis and the Strengthening Protection Capacity Project (SPCP) framework, see chapter 4, section 1.2. Each represents an important basis for identifying, assessing and monitoring protection risks. For information regarding identification of individual cases, see section 3 of this chapter which follows, under “identify women and girls at risk”.

2. Establishing and strengthening secure environments

Secure environments should be established and strengthened, including by

- partnerships and actions to prevent and respond to SGBV (for more on which see chapter 5, sections 3.1.1 and 3.1.2);
- maintaining the civilian and humanitarian character of asylum (see below “protection interventions to ensure physical safety”);
- enhancing timely registration and documentation (see chapter 4, section 2.1);
- ensuring adequate design of accommodation in camps, reception centres etc. (see below “protection interventions to secure physical security”);
- monitoring access to, distribution and control of assistance;
- establishing confidential community complaints mechanisms;
- strengthening dispute resolution and justice systems (see chapter 5, section 4);
- ensuring access to safe learning environments (see chapter 5, section 6.1);

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²² Centre for Humanitarian Dialogue, “Proactive Presence: Field Strategies for Civilian Protection”, Summary, 2006, at <http://www.hdcentre.org/Proactive+Presence>, p. 3.

²³ ExCom Conclusion No. 105 (LVII), 2006, para. (i)(ii).

3.2 Prevention and response to risks in the wider protection environment, continued

2. Establishing and strengthening secure environments (continued)

- ensuring all staff are presented and introduced to the community and use identity cards;
 - raising community awareness of their rights, UNHCR's mandate, policies, codes of conduct and the Secretary-General's Bulletin; and
 - establishing and/or implementing codes of conduct, including on the elimination of sexual exploitation and abuse (see chapter 5, section 3.1.2).
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Interventions to strengthen secure environments in camps

Ensuring physical security and safety in camps involves maintaining the civilian and humanitarian character of camps and settlements. Our advocacy work on this with governments is critical, since States have primary responsibility for maintaining the civilian and humanitarian character of asylum.²⁴ In some situations where States may be unable or unwilling to address this issue, dialogue with non-state armed groups who may have influence in refugee camps may also be necessary.

In camp settings, UNHCR support to States can include:

- deploying camp security personnel, including to escort women and girls collecting firewood outside camps;
 - providing alternative fuel sources where firewood collection may lead to tensions and violations of rights;
 - ensuring camp layout and design take account of women's and girls' concerns regarding the safe and accessible placement of water and distribution points and provide separate latrines for males and females;
 - ensuring camps are well lit to enhance protection after dark;
 - establishing safe houses for women and children only, so that women and girls who are survivors of domestic violence or at risk of abduction can find immediate security in the short term;²⁵ and
 - establishing "child friendly spaces" in emergencies which can go on to become a school or play area where educational, health and social support can be provided.²⁶
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Interventions to strengthen secure environments in non-camp settings

In non-camp settings, promoting physical security for women and girls can involve ensuring that reception centres for asylum-seekers provide separate well lit accommodation for single females, which they can lock. It can include lobbying to ensure asylum procedures provide for the appointment of a female guardian for unaccompanied and separated girls to accompany them through the procedure and assure their well being and safety.

3. Supporting empowerment

The empowerment of women and girls of concern should be supported and enhanced including by partnerships and actions to strengthen and build on women's and girl's leadership and capacities. Awareness raising on gender roles and women's rights is crucial to their empowerment and its part of our protection work. (For further details, see chapter 2, sections 4, 5 and 6.)

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²⁴ ExCom Conclusion No. 94 (LIII) of 2004, para. (a). See also UNHCR, *Operational Guidelines on Maintaining the Civilian Character of Asylum* September 2006, at <http://www.unhcr.org/cgi-bin/texis/vtx/refworld/rwmain/opendocpdf.pdf?docid=452b9bca2>.

²⁵ For further details on these issues see also chapter 5, sections 3 on personal liberty and security and 8 on housing, land and property, as well as Women's Commission for Refugee Women and Children, *Displaced Women and Girls at Risk: Risk Factors, Protection Solutions and Resource Tools*, February 2006, p. 22.

²⁶ These have been promoted by UNICEF and are also supported by ExCom in Conclusion No. 107 (LVIII), 2007, para. (h)(viii).

3.2 Prevention and response to risks in the wider protection environment, continued

Individual response and wider prevention

In carrying out our work to protect women and girls, our choice of activities needs both to respond to individual violations and to tackle risks present in the wider protection environment.

We may focus on responding to particular problems or rights violations, such as an individual case of SGBV or ensuring that a returnee woman can access her property, as is also outlined at relevant points elsewhere in the Handbook.

We also need to spend time on prevention and working to change the wider protection environment itself, so that some of the underlying causes of protection risks for women and girls can be reduced. Changing the wider protection environment is often a more complex and difficult task. It involves working to change attitudes, laws, structures, and institutions within communities and countries.

Yet the protection of women and girls cannot be achieved unless we look at the factors in the wider environment that contribute to discrimination and inequalities against women and girls, as well as responding to the protection risks faced by individual women and girls.

Field practice: Afghan protection strategy for women and girls at risk

Introduction

The UNHCR Office in Kabul has worked in recent years to establish an integrated strategy for Afghanistan to respond to the situation of women and girls at risk.²⁷ This work is set against a general situation for women and girls which “remains dramatic” and where “severe violence against them is all-pervasive”.²⁸ In addition, government capacity concretely to tackle violence against women is very limited.

At first, the initiative supported safe houses to protect unaccompanied women returning to Afghanistan who were at risk. Since then, the Office has worked with UNIFEM, government and other partners to establish a practical, functioning protection mechanism to respond to the situation of women and girls at risk.

Rights promoted

Among the rights promoted by this initiative are the right to:

- personal integrity;
 - freedom from torture, cruel, inhuman or degrading treatment or punishment;
 - return in safety and dignity;
 - highest attainable standard of health, including reproductive health; and
 - education and information (as a part of empowerment).
-

Steps to implementation

UNHCR’s involvement with women and girls at risk in Afghanistan originated from a need to provide immediate protection responses to the situation of unaccompanied women returning to Afghanistan from countries of asylum. The initial focus was thus primarily on supporting safe houses, established and managed by Afghan women’s NGOs in Kabul and Herat.

This has expanded to include a number of interlinked components to strengthen the response and management capacity of national institutions and of civil society, and the accountability of local authorities to work towards solutions for individual women and girls.

Activities supported and (partially or fully) funded by UNHCR and UNIFEM over the last three years have focused on Kabul, Herat and Mazar-i-Sharif. They have aimed to

- provide immediate protection and solutions through women’s resource centres and, as a last resort, safe houses/shelters;
 - develop and strengthen local and national capacity to address violence against women, including through Coordination and Cooperation Commissions (initiated by the Ministry of Women’s Affairs (MoWA) to set up a regulatory framework for managing and monitoring safe houses and ensure coordination of referrals and solutions) and a Network of Women’s Rights Defenders (to exchange experiences, discuss and develop immediate protection responses and longer-term capacity building priorities); and
 - create awareness, sensitization and action to address violence against women and girls in the institutions and society at large.
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²⁷ UNIFEM and UNHCR, “Progress Note on Protection Responses to Women-at-risk: ‘Moving Towards an Integrated Strategy for Afghanistan’”, August 2006.

²⁸ Report of the Special Rapporteur on Violence against Women, its Causes and Consequences, Yakin Ertürk, “Mission to Afghanistan (9 to 19 July 2005)”, E/CN.4/2006/61/Add.5, 15 February 2006, para. 74.

Field practice: Afghan protection strategy for women and girls at risk, continued

Steps to implementation (continued)

At the same time, UNHCR and UNIFEM have worked with national and international civil society organizations, particularly those providing protection and assistance to women at risk or victims of violence, to establish and secure funding for a Trust Fund for the elimination of violence against women. This Fund has sought funding for an initial period of three years and aims to:

- allow the expansion and continuation of direct services to women and girls at risk of violence or who are victims of violence,
- provide a flexible, predictable, coordinated and participatory funding mechanism for organizations/institutions involved in protecting such women and girls; and
- contribute to developing a national and multi-sectoral approach to the elimination of violence against women in Afghanistan, by promoting networks and linkages and documenting best practices/lessons learned.

As such, the initiative seeks to move beyond a focus on sensitization and overall national planning initiatives to offer more concrete protection responses to women in need. The Trust Fund seeks to bridge this gap by bringing together all relevant actors to ensure not only the sustainability of funds allocated to women at risk activities, but also to provide more coherence at the national level in the types of interventions carried out.

It is now well under way. An Advisory Board met for the first time in mid-2007 and the initiative has received the support of all relevant actors. It is hoped the Trust Fund can be fully up and running by the end of 2007.

AGDM and empowerment

Efforts to sensitize Afghan institutions and society at large about the rights of women and girls and raise awareness that violence against women and girls is a human rights violation form an essential element of UNHCR's AGDM strategy in Afghanistan.

Afghan women's involvement in the provision of advice and assistance to women and girls who are victims/survivors of violence contributes to their empowerment, as does the provision of advice and support to victims/survivors of such violence.

Community involvement

The actual work with women and girls at risk has been, and can only be undertaken, by Afghan women and women's NGOs. They manage the safe houses and resource centres providing advice, counselling and mediation, peer support, legal and health services, and undertake outreach work.

Partners involved

UNIFEM has been a key partner. All activities have been carried out with the collaboration and support of MoWA and its provincial departments. UNHCR's international NGO partner, Medica Mondiale, provides support and expertise in psychosocial, legal and management matters. Afghan women and women's NGOs are critical partners, as mentioned above.

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Field practice: Afghan protection strategy for women and girls at risk, continued

Constraints

Constraints have included the complexity of discussions on a policy and regulatory framework under MoWA's auspices, given the sensitivity of the issue in Afghanistan and lack of capacity across the board. There is a lack of awareness or acceptance that violence against women and girls is a public health and human rights issue.

Impact

As a result of these initiatives, 213 women were able to seek refuge and assistance in safe houses funded by UNHCR in 2006.

MoWA and the NGOs running safe houses in Afghanistan signed a protocol in May 2007, as UNHCR and others have advocated for some time. This establishes an initial regulatory framework for the management of the safe houses and a framework for accountability of all parties concerned. It also sets out terms of reference for the Cooperation and Coordination Commissions (CCC) of the safe houses in Kabul, Herat and Mazar-i-Sharif, for MoWA and for its provincial departments, as well as a framework for coordination among participants and other relevant actors at national and provincial level.

Lessons learned

The focus of efforts to tackle violence against women has been on sensitization and overall national planning initiatives. Much more needs to be done to offer concrete protection responses to women in need.

It is important to work to ensure the financial sustainability of initiatives, increase the quality and effectiveness of ongoing projects (including for instance relating to psychosocial support), strengthen overall coordination and devise long term sustainable strategies.

3.3 Individual case management systems for protection and response

“States should promote the establishment and implementation of child protection systems, in accordance with international obligations of States concerned, and to which children under their jurisdiction should have non-discriminatory access. The support provided by UNHCR and other relevant agencies and partners in helping States fulfil their obligations should supplement and strengthen the national child protection system in areas where gaps exist, and be delivered in a spirit of partnership by building on each actor’s comparative advantages to reinforce the beneficial impact on the protection of children.”

UNHCR Executive Committee, Conclusion No. 107 (LVIII), 2007, children at risk, paras. (b)(ii) and (iii)

“UNHCR offices must ensure confidential individual case management systems and committees are established with partners to provide a system to follow up, monitor and find solutions for those individual persons who are at heightened risk. The system needs to be coordinated with the community. Any individuals at heightened risk should be regularly visited by UNHCR and partner staff, with due consideration to confidentiality and the potential for placing such persons at greater risk.”

UNHCR, *A Community-based Approach in UNHCR Operations*, 2008, section 3.2.7

Introduction

Section 1 of this chapter outlines how risk factors present in the wider protection environment and individual risk factors may combine to place women and girls of concern at heightened risk of violations of their rights. Section 2 summarizes strategies for prevention and response to risks in the wider protection environment.

This section builds on ExCom’s recognition that States should promote the establishment and implementation of child protection systems. It outlines briefly how confidential individual case management systems and committees should be established in each operation to coordinate and monitor the response to the situation of **all** women, girls, men and boys of concern who are at heightened risk, and to support solutions for them.

The establishment of a confidential individual case management committee, involving government, UNHCR, partners and, where appropriate, the community, is integral to achieving a holistic response.

The goal is to capacitate States to assume their responsibilities and empower individuals at risk to protect themselves as much as possible.

Purpose

This section:

- sets out the applicable international and regional legal standards, guidelines and responsibilities, which underpin States’ and our response to individual risk factors;
- describes briefly how to respond to individual protection risks through prevention and response measures in the immediate, medium and longer term; and
- provides field practice examples for Romania and India, showing how confidential individual case management mechanisms have been set up to identify and respond to protection risks faced by women and girls.

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3.3 Individual case management systems for protection and response, continued

International legal standards and guidelines

Everyone is entitled to enjoy their human rights and fundamental freedoms without distinction or discrimination, including as regards age, sex or gender.²⁹

ExCom Conclusions No. 105 (LVII), 2006, on women and girls at risk and No. 107 (LVIII), 2007, on children at risk provide guidance on how to establish and implement mechanisms to respond to the situation of women and girls at risk. They are reproduced in Annexes 1 and 2 to this Handbook.

Responsibility

Section 2 of this chapter above affirms the responsibilities of States and UNHCR for the protection of women and girls. Other responsibilities related to specific rights are set out at relevant points elsewhere in the Handbook.

If States and UNHCR are to fulfil these responsibilities, they have a responsibility to work together and with relevant agencies and partners to establish protection individual case management systems to:

- identify women and girls at risk and assess their situation;
- agree and coordinate immediate responses by relevant actors;
- agree and coordinate medium-term responses by relevant actors;
- agree and coordinate longer-term responses to achieve solutions; and
- monitor action taken throughout, adapting responses as required.

With regard to children at risk, for instance, ExCom has called on States, UNHCR and other relevant agencies and partners to collaborate closely to establish comprehensive child protection systems.³⁰ This Conclusion sets out the different components that may form part of such a system to identify children at risk and implement prevention, response and solutions measures to secure their protection.

Confidentiality

At all times, it is vital that we and our partners respect the right to privacy of individuals at heightened risk and their families and the confidential nature of personal data and information.³¹ Failure to do so, for instance regarding someone's health status, including HIV status, may expose them to even greater risk. Respecting confidentiality means we must:

- only share information with actors involved in providing assistance, where this has been requested and agreed with the individual at risk concerned;
 - only share information about individuals at risk with third parties after seeking and obtaining their explicit consent in writing (or that of their parents in the case of young children);
 - respect the confidentiality of any perpetrator;
 - maintain all written information in secure, locked files;
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²⁹ UDHR, Articles 1 and 2; ICCPR, Article 2; ICESCR, Article 2; CEDAW Article 3; CRC, Article 2; 1951 Refugee Convention, Article 3. International and regional legal standards and guidelines regarding specific rights are outlined in greater detail in chapter 5. The international and regional legal framework is outlined in chapter 6.

³⁰ ExCom Conclusion No. 107 (LVIII), 2007, on children at risk.

³¹ This section draws on UNHCR, *Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons: Guidelines for Prevention and Response*, May 2003, p. 29. For further guidance, see UNHCR, "Confidentiality Guidelines", UNHCR/IOM/71/2001, UNHCR/FOM/68/2001, 24 August 2001; UNHCR, "Note on HIV/AIDS and the Protection of Refugees, IDPs and Other Persons of Concern", 5 April 2006, especially paras. 31–36.

3.3 Individual case management systems for protection and response, continued

Confidentiality (continued)

- ensure that, if any reports or statistics are to be made public,
 - only one officer in the organization has the authority to release the information;
 - she or he only discloses general information about individuals at risk,
 - any identifying information, such as name or address, should be removed; and
 - ensure staff and partners on individual case management committees sign UNHCR's *Code of Conduct*.³²
-

Individual case management system

ExCom “recommends that States, UNHCR and other relevant agencies and partners work in close collaboration to ... establish confidential, accessible and child- and gender-friendly complaints and referral systems, in coordination with national authorities when necessary, with clear roles for receiving, referring and addressing complaints from or about a child while ensuring the safety of the child, and for managing case files.”³³ While this Conclusion relates specifically to children, the establishment of a confidential individual case management system in each setting is also relevant to women and men.

The system needs to be clear and accessible, so that those at heightened risk know where to go to receive protection assistance and this can be provided promptly. All relevant actors, including the community, should be involved in its development, so that it is familiar to all members of the community and other actors involved.

Specific outreach may be required to ensure women and girls are aware of the referral system. Reporting and referral procedures should be translated into appropriate local languages and presented in ways that are accessible to all members of the community of different ages and backgrounds.³⁴

Individual case management committee

As a central element in this system, UNHCR should ensure the establishment and proper functioning of a confidential individual case management committee.

This should include UNHCR, government, other relevant partners and, where appropriate, the community. To ensure confidentiality, membership of the committee should be kept to a minimum. It may not be appropriate, in some circumstances, for communities to participate.

Functions of the committee

The regular and ongoing functions of the committee should in all heightened risk cases be to:

- initiate and document responses and action;
 - monitor, review and assess their impact;
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³² UNHCR, *Code of Conduct and Explanatory Notes*, June 2004. See also chapter 2, section 3 and chapter 5, section 3.1.2.

³³ ExCom Conclusion No. 107 (LVIII), 2007, para. (g)(iv).

³⁴ See also, in relation to SGBV, UNHCR, *Sexual and Gender-based Violence against Refugees, Returnees and Internally displaced Persons: Guidelines for Prevention and Response*, May 2003, pp. 56–67.

3.3 Individual case management systems for protection and response, continued

Functions of the committee (continued)

- adapt actions to address any shortcomings through timely remedial action to provide ongoing security;
 - prevent different response mechanisms from operating in isolation;
 - ensure they are linked and form part of a holistic protection strategy;
 - coordinate responses to all needs identified; and
 - work with the individual to identify and implement solutions.
-

Ensuring a holistic protection response

Depending on the circumstances (for instance relating to the size and profile of those at risk, the size of the UNHCR operation or, in situations of internal displacement, which agency has the relevant cluster lead), it may be that

- multi-functional teams (see chapter 2, section 3) can provide the appropriate framework for individual case management;
- the committee can be tasked, for instance, with undertaking both best interest assessments and determinations and responses to sexual and gender-based violence to avoid parallel systems; or
- the committee can oversee actions undertaken by separate committees involving different sets of actors and focusing on specific types of cases.

If separate committees are established, they should cooperate closely to:

- avoid duplication of effort or gaps in the protection response;
 - coordinate responses as part of a holistic protection strategy;
 - ensure there is a response to all heightened risks identified; and
 - monitor the situation of everyone at heightened risk closely.
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How to respond: Individual risks

Strategies to respond to the situation of individual women and girls at risk include each of the following steps and actions to

Step	Action
1	Identify women and girls at risk and assess their situation
2	Agree and initiate immediate responses by relevant actors
3	Agree and coordinate medium-term responses by relevant actors
4	Agree and coordinate longer-term responses to achieve solutions

Throughout, the confidential individual case management committee should review, monitor, evaluate and, as necessary, adapt actions taken in all heightened risk cases.

Note: More specific suggestions for actions, at each of these stages, to respond to individual risks and ensure respect for corresponding rights are outlined in relevant sections of chapter 5.

1. Identifying women and girls at risk

Ensuring early identification of women and girls at risk involves working in partnership with States, NGOs, community-based organizations, and other actors to establish mechanisms, based on an analysis of the risk factors outlined in the previous section, to identify individual women and girls at heightened risk of violations of their rights and to determine and implement appropriate immediate responses and subsequent solutions.

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3.3 Individual case management systems for protection and response, continued

1. Identifying women and girls at risk (continued)

Identification of individual women and girls who are at heightened risk often presents challenges, as such individuals may be less visible to us and less ready to come forward, particularly if they have disabilities and/or are older. Mechanisms include:

- border monitoring in partnership with civil society and NGOs;
- registration systems, especially proGres, which identify groups with specific protection and assistance needs and can highlight individuals at heightened risk;
- participatory assessments with women and girls, as well as with men and boys (see chapter 2, section 3);
- identification of those at heightened risk by field staff using the UNHCR heightened risk identification tool (see below);
- community mapping, including through refugee volunteer and community-based home visit systems;
- monitoring visits to host or foster families;
- establishing and/or expanding camp or neighbourhood information centres to provide legal and social advice; and
- self identification by the woman or girl concerned or her family who approach UNHCR or partners;
- best interests assessment and determination systems for refugee children (see chapter 4, section 2.5);
- refugee status determination procedures (see chapter 4, section 2.6); and
- reporting and referral systems established under SGBV standard operating procedures (see chapter 5, section 3.1.2).

UNHCR risk identification tool

Building on ExCom Conclusion No. 105 of 2006, UNHCR and partners are testing an individual Heightened Risk Identification Tool for identifying persons at heightened risk, taking into account age, gender, disability and other factors.³⁵ This tool provides a framework to identify those whose circumstances place them at heightened risk. When combined with individual registration systems, it can facilitate effective monitoring, follow-up and identification of solutions for individuals at heightened risk.

Other tools for response

Tools especially relevant for responding to the situation of women and girls at heightened risk are discussed in chapter 4, sections 2 and 3. These include registration and identity documentation; birth registration and certification; family tracing and reunification; best interests assessments and determinations; refugee status determination; and resettlement.

In order to address incidents of SGBV, it is essential to establish standard operating procedures to prevent and respond to SGBV.³⁶

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³⁵ See, UNHCR, "Heightened Risk Identification Tool", version of 20 June 2007, at <http://www.unhcr.org/cgi-bin/texis/vtx/refworld/rwmain/opendocpdf.pdf?docid=46f7c0cd2> and the Victorian Foundation for Survivors of Torture, University of New South Wales, UNHCR, *Refugee Consultations, Bangladesh*, March 2007, at <http://www.unhcr.org/cgi-bin/texis/vtx/refworld/rwmain/opendocpdf.pdf?docid=46f0ec002>.

³⁶ See UNHCR, "Standard Operating Procedures for Prevention of and Response to SGBV", IOM/62/2006, FOM/62/2006, 28 July 2006 and chapter 5, section 3.1.2.

3.3 Individual case management systems for protection and response, continued

**Examples:
Identifying women
and girls at risk**

Examples showing how UNHCR has worked with partners to secure access to and identify women and girls who are at heightened risk, are contained elsewhere in the Handbook in the field examples regarding:

- involvement of government authorities in determining the best interests of the children in a family suffering domestic violence, as a first step towards their regular involvement in such cases, in chapter 4, section 2.5;
 - Ecuador and Kenya in relation to resettlement in chapter 4, section 3.4; and
 - Slovenia and Albania in relation to trafficking and separated and unaccompanied children, in chapter 5, section 3.2.
-

2. Immediate responses

In order to ensure immediate responses for women and girls at risk the individual case management committee should coordinate the provision of “information, counselling, medical and psychosocial care, as well as access to safe houses if they face domestic violence and abuse or attack by other members of the community, especially where there are no mechanisms to remove perpetrators; provid[ing] emergency voluntary relocation, e.g. to another town or camp, or emergency resettlement”.³⁷

These different responses are discussed in greater detail in relevant sections of the Handbook, especially in chapter 5 on exercising rights and ensuring protection.

3. Medium-term responses

In order to develop medium-term responses for women and girls at risk, action by the committee should include:³⁸

- monitoring initiatives implemented to ensure needs are met and accountability is strengthened;
 - helping secure the access of women and girls at risk to justice and reducing impunity (see chapter 5, section 4);
 - strengthening identified individuals’ access to education and livelihood initiatives (see chapter 5, sections 6 and 7);
 - providing skills training and support for women’s income generation projects (see chapter 5, section 7.1); and
 - intervening to secure women’s access to and enjoyment of their right to housing, land and property (see chapter 5, section 8).
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4. Longer-term responses and solutions

Longer-term responses and solutions³⁹ for women and girls at risk which the committee may examine, initiate and monitor include:

- focusing on women’s and girls’ empowerment through livelihood and leadership strategies to increase their capacity to protect themselves;
 - promoting women’s and girls’ equal rights to make a free and informed choice to return voluntarily and to reclaim their housing, land and property;
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³⁷ ExCom Conclusion No. 105 (LVII), 2006, para. (n)(ii).

³⁸ See ExCom Conclusion No. 105 (LVII), 2006, para. (o).

³⁹ See ExCom Conclusion No. 105 (LVII), 2006, para. (p).

3.3 Individual case management systems for protection and response, continued

4. Longer-term responses and solutions (continued)

- strengthening the use of resettlement as a protection tool for women and girls at risk;
 - considering using special evacuation programmes for internally displaced women and girls at risk, if necessary, given that resettlement is very rarely available to them; and
 - establishing mechanisms, where voluntary repatriation for individual refugee women and girls at risk is not a safe option and resettlement is not available, to enable them to integrate locally and safely in the country of asylum, including by examining possibilities for voluntary relocation elsewhere in the country and by ensuring ongoing support for them; for internally displaced women and girls at risk, examining possibilities for allowing them to relocate elsewhere in their own country if they wish and if their safety cannot be ensured where they are.
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Field practice examples

The following field practice examples show how:

- a Task Force to coordinate prevention and response to protection risks faced by unaccompanied and separated children of concern in Romania was expanded to include all persons of concern with specific needs, including women and girls at risk; and
 - the establishment of a Women's Protection Clinic in New Delhi, India, formed part of a wider strategy to improve access to women and girls of concern and establish a more effective individual protection system.
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Field practice: Romania

In Romania, a Task Force for persons of concern with specific needs was established in December 2004 to coordinate prevention and response activities in relation to all asylum-seeking and refugee groups at risk. The Task Force thus assumed expanded functions as compared with an earlier one which focused on the situation of separated girls and boys, so that responses to the situation of women and men at heightened risk were also covered.

The Task Force continues to monitor closely the situation of unaccompanied and separated children seeking asylum in Romania and to seek practical solutions which comply with national legislation and international standards. It has also become the framework for the more effective use of resources and expertise in addressing the situation of people with disabilities, victims/survivors of torture and victims/survivors of sexual and gender-based violence.

Its members comprise UNHCR, the National Refugee Office (the central authority responsible for implementation of asylum policies in Romania), asylum judges, the national Authority for Child Protection and Adoptions, the Aliens' Authority, border police, four partner NGOs, and the International Organization for Migration (IOM). The National Refugee Office now chairs the Task Force, as part of a process of taking over its responsibilities for asylum-seekers and refugees from UNHCR.

Field practice: Women's Protection Clinic, India

Introduction

A Women's Protection Clinic was opened in late 2005 in New Delhi, India. It is a place where urban refugee women and girls from Myanmar living in New Delhi can approach UNHCR confidentially with specific problems and for UNHCR to conduct profiling interviews with all refugee women and girls, the findings of which are referred directly to a Protection Panel for assessment and action.

The Clinic thus provides not only a meeting and listening space for women. It also ensures UNHCR does much more, as it enables UNHCR to identify issues and needs and match these needs proactively to short and longer-term solutions. The initiative has helped broaden approaches to protection challenges generally, particularly given the hard urban realities faced, increasing resource constraints, and phasing out of subsistence allowances.⁴⁰

Rights promoted

Among the rights promoted by this initiative are the right to:

- personal integrity;
 - freedom from torture, cruel, inhuman or degrading treatment or punishment;
 - highest attainable standard of health, including reproductive health;
 - work and an adequate standard of living;
 - education;
 - an identity (in addition to refugee certificate/registration with UNHCR);
 - family unity (through follow-up measures); and
 - information (as a part of empowerment – previously information shared through other channels was not always conveyed within the community to women and girls).
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Steps to implementation

The following steps were taken to identify and respond to protection needs:

- Before the Clinic was opened, a community-wide survey highlighted general protection challenges faced by the Myanmar refugee community in New Delhi and the need for more specific measures for women and girls. "Protection community days" were introduced to complement existing mechanisms for liaising with refugees. "Drop-ins" by protection staff also helped identify additional protection concerns, particularly of those who might be marginalized within the community itself, and improve understanding within the community of the nature of protection problems and the need for inclusive approaches.
 - The Clinic opening provided a specialized venue for general discussion between staff and women, as well as for profiling interviews in a safe and confidential environment with all women and girls from the refugee community to help identify the interlinked problems faced by them and/or their families, including domestic and communal SGBV.
 - The individual profiling or structured interview exercise was initiated with all the women and girls and completed over the course of one year. Many wept during the interviews, as it was the first time they had had the chance to tell their full story, not only of initial flight, but also of the problems faced over years in exile. The opportunity to be heard was deeply appreciated by, and cathartic for, the women and girls, who finally felt safe enough to share these problems. The exercise helped identify and prioritize needs and necessary responses to be implemented by refugees, partners and UNHCR.
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⁴⁰ See generally, UNHCR, "New Lease of Life for Refugee Women's Protection Clinic in India", 23 March 2006, at <http://www.unhcr.org/cgi-bin/textis/vtx/print?tbl=NEWS&id=442280914>.

Field practice: Women's Protection Clinic, India continued

Steps to implementation (continued)

- A Protection Panel comprising senior staff was created to review protection risks faced by individuals identified in the exercise and address their immediate needs while steps were underway to secure durable solutions. The Panel includes protection and programme staff, as well as community services and others as needed, which helps assure a comprehensive, decisive, and focused response by UNHCR. Women and girls now seek out profiling interviews, trust UNHCR to protect their privacy while responding to their needs, and see the benefits of measures taken. They proactively bring to UNHCR's attention emerging problems and advocate closer cooperation between their community and UNHCR.
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AGDM and empowerment

Rolling out AGDM in 2004 and increased training, monitoring and prevention efforts to combat SGBV, identified protection problems including increased levels of school dropouts combined with early pregnancies, some domestic violence, increased instances of local harassment and SGBV, and declining standards of health.

The Clinic is designed specifically for women. It helps empower them within their community. Previously, their interaction with UNHCR was largely absorbed in the platform of refugee men and, to some extent, refugee women with specific political agendas. It also increased trust and participation by men who see responses are holistic and help families and communities, as well as women.

Community involvement in implementation

At an early stage, direct consultations with the refugees highlighted the emergence of interlinked protection problems. Meetings and personal visits by UNHCR staff played a key role in garnering support for a broad spectrum of follow-up mechanisms, including both short and long-term initiatives to enhance the protection environment. The introduction of regular bi-weekly "protection community days" increased entry points into the community and enabled the Office to identify early warning signs for individuals and the community.

Partners and their involvement

Implementing partners and NGOs involved were consulted as part of the process of identifying the nature and extent of refugees' problems. All partners – embassies of potential resettlement countries, the Indian government, NGOs, and others – were included in the consultative process and in proposed mechanisms to address protection problems identified. Dissemination efforts included all partners to ensure consistency of information, enhancing the openness and engagement of partners in solutions. The Governments of the United States and of Australia provided funding for the Clinic.

Constraints

Initially, some members of the refugee community were distrustful of the profiling process but were consulted and encouraged to participate. There was some disagreement as to what a Clinic might do in the long term and who in particular would have "control". These problems have dissolved through enhanced engagement and protection responses.

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Field practice: Women's Protection Clinic, India continued

Constraints continued

Women could have been at risk of being stigmatized as "SGBV cases" by virtue of visiting the Clinic had this been the only focus. This problem was avoided from the start by holding different types of meetings at the Clinic in a variety of settings, by using a profiling exercise which addressed many issues including SGBV, and by inviting all women and girls for a profiling interview, rather than only those who had SGBV-related problems. Locating the clinic next to the crèche made it easily accessible to mothers.

Impact

Emerging protection concerns were identified by engaging the refugee community, specifically women and girls, in the consultative process. Short and long-term solutions built on the input received from refugees. Combined with UNHCR's active response measures to assist, the process established a platform of trust with the refugee women and community overall.

It is hoped the Clinic can, with continued funding, become a broader base for activities including income generation based on traditional skills, provision of meals for community members, meeting and training. Partners can relate to the Clinic as a concept and can see concrete results, helping garner interest and engage partners, such as resettlement countries, in participating in providing long-term solutions.

Lessons learned

Many of the problems faced by the refugees are linked. Identifying and recognizing these links is critical to ensuring effective follow-up action.

Concrete steps are needed to identify all protection problems, their inter-linkages, and the best holistic solutions in the individual circumstances. The most crucial step is implementation of the response.

Once an individual has opened up to UNHCR with the full spectrum of their problems, it is essential to introduce immediate, medium- and long-term steps to reassure refugees that it is worth approaching UNHCR, that together the situation can be improved, and to demonstrate real options for solutions.

For every problem identified, some response is required. Even if it cannot always be the response the refugee had hoped for, the sincerity of UNHCR's efforts helps refugees focus on realistic and concrete opportunities to improve the situation.



Pakistan / A woman, who has survived the earthquake near Balakot, in northwest Pakistan, and moved to a camp explains her plight to a UNHCR community services worker / Participatory consultations with women and girls of concern are essential to the effective identification of, and response to, protection challenges they may face / UNHCR / V. Tan / 2006



Czech Republic / A girl asylum-seeker from Afghanistan talks to a UNHCR officer at the reception centre in Brno, which was set up by a local NGO / NGO partners play a vital role in the protection of women and girls / UNHCR / L. Taylor / 2001