

SGBV Protection and Social Services Programme – Community Task Forces

SGBV

The project aims to provide information, education and sensitization in the settlement regarding SGBV, and to establish contact points within the refugee community for the reporting and follow up of SGBV cases.



UNHCR

Background

The number of SGBV cases being reported in Meheba Refugee Settlement remains low. Certain cultures in Meheba tolerate and accept some forms of violence against women such as wife battery, polygamy, abduction, defilement, early marriage and marital rape. Wife battering persists in the camps in the belief that this is not a crime but an accepted means to discipline a spouse. Women often opt not to bring charges against their spouses, and refugees tend to prefer to solve such issues through community leadership structures and traditional and religious justice systems, instead of reporting cases to the police. Fear of harsh penalties (e.g. long term imprisonment) for perpetrators, who are in most cases breadwinners, contribute to this.

Location Meheba Refugee Settlement - Zambia

Time & Duration 2010 - present

Population Groups Refugees

Actors

- UNHCR
- Ministry of Community Development and Social Services
- Ministry of Health
- HIV/AIDS Department
- Ministry of Education



UNHCR
The UN Refugee Agency
www.unhcr.org

Description

Task forces are made up of minimum 20 refugees each from the relevant 'Block'. They have the responsibility for reporting and following up on cases of SGBV, which have been brought forward to them. Task forces are required to represent the diversity of community members, e.g. men and women, old and young persons. Participatory assessments used in the planning phase of the project ensure that the community is fully part of the project and the multi-sectoral response mechanisms equally facilitate their participation.

Community Task Force Members are required to:

- Attend information meetings
- Participate in training workshops e.g. on what SGBV is, causes, risks, how to report cases and the referral system.
- Act as a point of contact for their area/block for community members to report SGBV
- Identify and report SGBV incidents to service providers
- Disseminate materials and information to their 'Block'/community.

Steps to Implementation

- Design a clean plan on the groups' functions.
- Design a clear schedule of activities.
- Organize information campaigns and capacity building/training.
- Support participants in terms of logistics (e.g. provide them with bikes to go to the meetings).
- Rotate meetings and assembly points in order to enable access from different areas.

Impact and Results

- The task forces appear to have been successful, as the number of cases reported has increased. Before, SGBV cases were hidden or taken to the community traditional justice system and not reported. This has changed as cases handled by the traditional justice system are now reported as well.
- There has also been some change of attitude in the community in that survivors/victims that decide to report cases are not always disowned.
- Reported SGBV cases have been assisted. Assistance provided includes referral services and access to clinical management of rape care, STI/HIV prevention and unwanted pregnancy. Reported cases include battering, sexual exploitation, early marriages and pregnancies, marital rape, rape, defilement, sexual abuse in school, and domestic violence in general.

- Facilitators who conducted quarterly workshops or training sessions with about 60 attendees, have reported an increased level of knowledge amongst the community regarding SGBV, including how and where they can report cases.

Constraints

- Inadequate funding has been the biggest constraint, e.g. to provide logistical support for members of the task forces to attend training, meetings and perform activities.
- Vastness of the camp/settlement; disseminating information in a timely manner has been a challenge, with the task force members living within the different Blocks. UNHCR has tried to solve this problem by installing mobile monitors, but this will not be sustainable due the lack of resources.

Lessons Learned/Keys to Success

- Male involvement in the prevention of SGBV begins with the recognition that the men are part of the solution. Men in the community are decision makers and hold much of the power to change values that tolerate SGBV.
- A community-based approach is beneficial, as the community will come up with solutions and resources based on their own coping mechanisms. This makes the project sustainable and managed by the community. Even though people are displaced and vulnerable, being given an opportunity to address some of their problems on their own empowers them.
- Community leaders need to be consulted about the project and its goal; these leaders can be very useful in identifying appropriate people to work on the task forces and in supporting the activities overall.
- A clear plan about how the groups will function and a clear schedule of activities are necessary.
- Participants should be supported in terms of logistics (they are volunteers, but bicycles are provided to help them travel to meetings etc).
- Participants should be informed about the fact that they will not be paid for their involvement from the beginning.
- Ensure that the meetings/assembly are accessible for a diverse range of refugees from the settlement and that their access is supported; ensure they have leadership over the process and own it.
- Ensure that age, gender and diversity are mainstreamed in the activities.