





Why gender-based violence in emergencies matters

Gender-based violence (GBV) is a pervasive public health issue and global human rights violation that transcends cultural and economic boundaries. The World Health Organisation reports that one in three women worldwide experience physical and/or sexual violence in their lifetime.¹ One in ten girls under 18 (approximately 120 million) worldwide have experienced sexual assault or other unwanted sexual acts.² Humanitarian emergencies exacerbate pre-existing violence and, in some cases, present new forms of GBV. For example, in a recent study in South Sudan, 65% of women and girls reported experiencing physical and/or sexual violence.³ Gender-based violence not only impacts the physical and

Addressing gender-based violence contributes to achieving the Sustainable Development Goals:


-  **Goal 5:** Achieve gender equality and empower all women and girls
-  **Goal 16:** Promote peaceful and inclusive societies for sustainable development

psychosocial well-being of those directly experiencing violence, it also harms others, including survivors' children, and can have wider-reaching harmful effects on the social fabric of communities.



1 in 3 women
will experience physical and/or sexual violence in her lifetime.

Threat of GBV
increases in emergencies



76% of adolescent girls in DRC

65% women/girls in South Sudan



children
are directly and indirectly affected by GBV.

UNICEF's commitment on GBViE

UNICEF is a leading humanitarian and development partner with global reach and specialised expertise in GBViE programming. UNICEF's commitment to addressing gender-based violence in emergencies lies at the heart of the agency's mandate to protect the safety, health, and well-being of children and women and is

further solidified in the *Core Commitments for Children in Humanitarian Action (CCCs)*, the 2018-2021 Strategic Plan and the 2018-2021 Gender Action Plan. Addressing GBV in emergencies has been a critical area of programming for UNICEF for more than a decade.

UNICEF's approach to GBViE programming

As GBV is both a consequence of and contributor to gender inequality, addressing this issue is central to UNICEF's broader agenda to promote gender equality. Because UNICEF recognizes the many common risk factors and compounding consequences of GBV and violence against children (VAC),⁴ its GBViE programming is closely coordinated with, and complementary to, its work on VAC.

UNICEF employs a three-pillar approach to gender-based violence in emergencies programming, in line with IASC Guidelines, the Call to Action for Prevention of Gender-Based Violence, and the forthcoming GBV Minimum Standards:

- Supporting women and children who experience GBV with access to comprehensive response services, including:
 - ✓ Psychosocial support and individual case management
 - ✓ Clinical health services
 - ✓ Safety options for survivors
- **Mitigating the risk** of GBV across other humanitarian sectors (WASH, Nutrition, etc.) and promoting women and girls' access to information, and resilience and empowerment opportunities through activities such as:
 - ✓ Women and girls' safe spaces
 - ✓ Distribution of dignity kits
 - ✓ Community safety audits and safety planning
- **Preventing GBV** by addressing its underlining conditions and drivers:
 - ✓ Community-based interventions to address the harmful social norms that perpetuate GBV
 - ✓ Promoting the social and economic empowerment of women and girls

These activities are supported by **coordination** with governments, civil society, and other UN partners, contributing to the GBV Area of Responsibility results, as well as investment in **strengthening systems** for addressing GBV. UNICEF proactively designs and adapts its interventions – including through innovative programming modalities – to meet the needs of the most vulnerable women and children.

"All humanitarian actors must be aware of the risks of GBV and – acting collectively to ensure comprehensive response – prevent and mitigate these risks as quickly as possible within their areas of operation...Failure to take action against GBV represents a failure by humanitarian actors to meet their most basic responsibilities for promoting and protecting the rights of affected populations."
(Interagency Standing Committee, 2015).

UNICEF's technical expertise and unique added value

UNICEF's mandate, technical expertise, and operational reach bring added value to global, regional, and country-level GBViE programming, including:

- Ensuring quality **GBV response services are available, appropriate and accessible** for women and children who experience GBV, including by promoting **innovative solutions to GBV service delivery**;
- Setting an example for the rest of the humanitarian system by **proactively minimizing GBV risks across all UNICEF-led clusters and programmes**;
- **Utilising high-profile platforms**, such as Executive Director Fore's role as IASC Champion on Protection against Sexual Exploitation and Abuse (PSEA), to advocate for quality GBV response services and accountability mechanisms.
- Addressing the needs of **adolescent girls**, who represent one of the highest-risk groups for GBV and are often overlooked in many sectors of humanitarian response;

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Key results

SELECT GLOBAL-LEVEL RESULTS

- ✓ UNICEF reached more than **1.3 million women, girls and boys** with GBViE interventions in 2018.
- ✓ Launched a GBViE capacity building initiative in two regions; **1500+ UNICEF staff** and implementing partners trained on GBViE since 2017.
- ✓ Global rollout of IASC GBV Guidelines: **2500+ humanitarian practitioners** trained on GBV risk mitigation since 2016.

SELECT COUNTRY-LEVEL RESULTS

- ✓ **Iraq:** More than **107,000 individuals** reached with GBV-specialised programming; **987 service providers** trained on survivor-centred GBV services and referrals.
- ✓ **South Sudan:** **100% of surveyed women and girls** in the Malakal Protection of Civilians site reported feeling safer as a result of GBV risk mitigation measures in WASH.
- ✓ **Somalia:** **22% reduction** in community members who say that survivors should avoid reporting an incident of sexual violence in order to protect family honor.

Programmatic Highlights

Below are a few examples that highlight the diverse and comprehensive nature of UNICEF's GBV in emergencies programming.



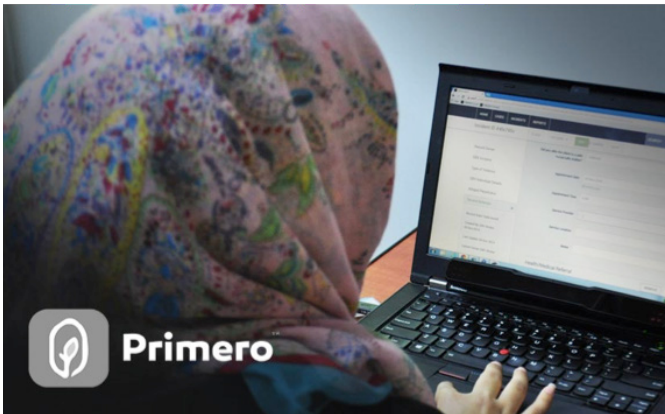
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UNICEF/SOUTH SUDAN/2016/HAWER

COMMUNITIES CARE Even in emergency settings, UNICEF is working to tackle the root causes of GBV. The *Communities Care* model combines structured community dialogue with capacity strengthening for GBV response services in order to promote positive change in social norms that can contribute to gender equality and reduce gender-based violence. A 2018 evaluation of *Communities Care* found a 22% reduction in the belief that women and girls should avoid reporting rape in order to protect family honour and 14% reduction in the belief that it is appropriate for a husband to discipline his wife using violence. Thus far, *Communities Care* has been rolled out in South Sudan and Somalia. UNICEF is looking to expand the programme to other emergency-affected contexts.

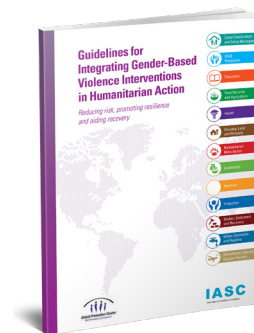
SAFE SPACES UNICEF utilises safe spaces as a programming model to improve the safety and resilience of women and girls. These spaces serve multiple functions, including but not limited to acting as a non-stigmatizing entry point for survivors to connect with specialised GBV response services. In addition to traditional, static safe spaces and mobile models, UNICEF is currently developing an online platform for *virtual safe spaces* to facilitate access information and services in a way that is safe, culturally appropriate and accessible to particularly marginalised women and girls, such as those with disabilities and married adolescent girls. The design and implementation of the virtual safe spaces project has involved extensive consultation with women, adolescents, and families in affected communities as well as staff working in existing safe spaces.



PRIMERO/GBVIMS+ The Gender-based Violence Information Management System (GBVIMS) is the only globally recognized interagency system for safe and ethical management of GBV incident data in emergencies. UNICEF’s Primero/GBVIMS+ system – an enhancement to the original GBVIMS – includes a mobile application that supports GBV case management in emergency settings. It also allows for trend analysis of the cases reported to service providers as well as remote supervision of GBV case workers, thereby increasing coverage of GBV services to locations with limited access and strengthening overall quality of GBV service provision.

GBV IN EMERGENCIES HELPDESK In late 2018, UNICEF expanded its internal GBViE helpdesk to serve as a resource for the entire GBV in emergencies community.

The Helpdesk is staffed by a global roster of GBV experts ready to provide rapid, tailored support in response to queries about GBViE programming and coordination.



IASC GBV GUIDELINES

Since its release in late-2015, UNICEF – in collaboration with a 15-member reference group comprised of UN agencies and NGOs – has led the interagency rollout of the IASC GBV Guidelines, a resource that provides concrete, sector-specific guidance for reducing GBV risks across all humanitarian sectors. This includes immediate measures, such as building safer latrines, as well as more structural changes, such as ensuring needs assessments systematically engage women and girls to inform programme design and integrating consultations with women and girls as a standard component of programme monitoring across all sectors of humanitarian response.

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Roadmap to accelerate results on GBViE programming

With the launch of its Gender-based Violence in Emergencies Operational Guide, UNICEF is embarking on a three-year vision for scaling up its GBV in emergencies programming, with an overall goal of expanding coverage and quality of services. This plan includes strengthening all three pillars of GBViE programming:

- **SERVICES:** expanding GBV-specialized programming and expertise to 20 humanitarian contexts;
- **RISK MITIGATION:** institutionalizing GBV risk mitigation in all UNICEF country operations that issue a Humanitarian Appeal for Children (HAC);
- **PREVENTION:** adapting and expanding *Communities Care* to at least three new emergency-affected contexts.



ENDNOTES:

- 1 WHO, London School of Hygiene & Tropical Medicine, the South African Medical Research Council (2013) 'Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence' Geneva: World Health Organization.
- 2 UNICEF (2014). Hidden in plain sight: a statistical analysis of violence against children. New York: UNICEF.
- 3 What Works (2017) *No Safe Place: A Lifetime of Conflict Affected Women and Girls in South Sudan*, London: DFID's What Works to Prevent VAWG in Conflict and Humanitarian Crisis
- 4 Alessandra Guedes, Sarah Bott, Claudia Garcia-Moreno & Manuela Colombini (2016) Bridging the gaps: a global review of intersections of violence against women and violence against children, *Global Health Action*, 9:1, DOI: 10.3402/gha.v9.31516