



REPORT

Member Satisfaction Survey

GBV AoR Community of Practice

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Summary

A voluntary and anonymous satisfaction survey was conducted among members of the GBV AoR's GBV Community of Practice in November-December, 2019. At the commencement of the survey, the CoP had been in existence for 18 months and there were 430 members. The survey's purpose was to gather member feedback about their satisfaction with the CoP, its usefulness in their work, and how much and why they engage (or do not engage) in discussions. There were eight questions on those topics most of which included an "other" choice which allowed for free text to explain further. An additional question sought information about members' work focus to validate membership composition. There was also a final open-ended question in which members could offer any additional comments or suggestions. The survey was initiated, designed, overseen, and results reviewed and analyzed by the two co-moderators of the CoP, Sarah Martin and Beth Vann, authors of this report.

One third of all CoP members participated in the survey (33.3%, 143 respondents). Overall, feedback was very positive throughout the survey. Respondents are very satisfied (64%) with the CoP and 81% find the discussions useful and helpful in their work and/or for professional development. For nearly $\frac{3}{4}$ of respondents, the CoP meets their needs very well or extremely well. When asked to score on a scale of 1-10 how likely it is they would recommend the CoP to a colleague or a friend, 61% gave a high score of 9 or 10.

Some areas require further probing and discussion with members in the coming months. While the vast majority of members gave extremely positive feedback, there were a small number of members noting some suggestions for improvements or changes. These will be further examined and addressed as appropriate.

Background

The GBV Community of Practice (CoP) was initiated in May 2018 as a new program of the GBV Area of Responsibility. The online CoP aims to build community and facilitate continued learning and sharing among specialists working on GBV in emergencies. The CoP offers a structured space for ongoing, field-centered, experiential learning, and a platform to discuss challenges, troubleshoot solutions, and celebrate successes. Discussions range from informal requests for suggestions and resources to webinars and other thematic events led by experienced GBV specialists to advance learning, motivate new thinking, and promote discussions on critical issues that many of us face in our day to day work.

The CoP is a central component of Phase III of the multi-phased Managing GBV in Emergencies (MGBViE) learning program. Phase III aims to strengthen capacity, provide support, and offer continued learning for GBV specialists of all levels of expertise who are leading emergency programs.

Members

CoP members share a common sense of purpose in this work and want to learn and share together to deepen their understanding, strengthen their abilities, and broaden their networks with the shared aim of increasing the overall effectiveness of prevention and response to GBV in emergencies. - from the CoP Member Profile (Annex 1).

To achieve these aims, the CoP needs a diverse membership that represents a mix of emerging and experienced GBV practitioners from a range of professional backgrounds; different levels of supervisory and leadership responsibility; different types of GBV specialist roles (clinicians, managers, trainers, advisors, coordinators, etc.); a wide range of geographic locations; a mix of field-based and headquarters-based members; and diversity of nationality, culture, and age.

As of December 31, 2019, there were 468 members working in regions across the globe. CoP members work in many different types of organizations including national and international NGOs, UN agencies, academic institutions, international organizations, government, and freelance professionals. Annex 2 contains charts showing membership growth over time, members' geographic deployments by region, and organizational representation.

A diverse membership is vital yet it can present a challenge for ensuring that enough of the content and discussions are relevant for the wide range of members' interests, abilities, and motivations. The common sense of purpose, described above, is what binds this group together. One of the survey questions tried to highlight that commonality by asking about respondents' work focus. Respondents self-identified their focus and sharing that information with the entire membership can underline a sense of community and common purpose.

Platform

The GBV Community of Practice (CoP) is a virtual community on the Internet using the groups.io platform. It is a members-only website where all activity is posted. Members can participate in discussions on the website and/or by sending and receiving messages via email.

When the CoP started up, it was on the Yahoo Groups platform. There were a number of limitations, over time it became less workable, and ultimately Yahoo shut down its groups late in 2019. The CoP migrated to groups.io mid-November 2019, in the middle of the survey. There is some feedback in the survey results talking about the poor platform, which is referring to the Yahoo Groups. The groups.io site is a much-improved platform for the CoP with new functions being rolled out by the moderators each month.

Survey

The CoP member satisfaction survey took place over two months, November through December, 2019. The survey was initiated 18 months after the CoP start-up, with membership at 430

individuals. It was initiated, designed, overseen, and results reviewed and analyzed by the two co-moderators of the CoP, Sarah Martin and Beth Vann, authors of this report. The survey was voluntary and anonymous, completed by members online via Survey Monkey. Results were tabulated automatically by the Survey Monkey application.

The purpose of the survey was to gather member feedback about satisfaction with the CoP, its usefulness in their work, and how much and why they engage (or do not engage) in discussions.

There was a total of 10 questions. Eight questions asked about satisfaction and engagement with the CoP, most of which included an “other” choice which allowed for free text to explain further. There was one question asking respondents to self-identify their primary work focus. A final open-ended question invited respondents to offer any additional comments or suggestions they wished to provide.

Key Findings and Next Steps

One third of all CoP members participated in the survey (33.3%, 143 respondents of 430 members), which is a large enough sample size to be able to draw some conclusions from the data.

The compiled survey responses are easily readable, speak for themselves, and are provided in full in the following section. First, there are a few key findings to note and next steps are identified here:

Responses to every question scored extremely positive feedback for all aspects of the CoP that were questioned in the survey.

- 95% indicated they are very satisfied (64%) or somewhat satisfied (31%) with the CoP
- 81% find the discussions useful and helpful in their work and/or for professional development
- Approximately 75% stated the CoP meets their needs very well or extremely well.
- When asked to score on a scale of 1-10 how likely it is they would recommend the CoP to a colleague or a friend, 61% gave a high score of 9 or 10.

The survey asked respondents to explain why they did – and why they did not or might not – actively participate in online discussions. Moderators have noted that there are many quiet members and that often, discussion threads are very short with only a few responses. The hope is that over time, discussions will become more robust and in depth with more members participating. The aim of these questions was to begin to understand why members might or might not participate and to inform moderators’ actions to influence and facilitate more discussion participation. Many respondents took the time to answer these questions and there is essential information in the results for further investigation and action. This is relevant to the

common purpose of the community of practice (discussed above under Members) and is an area that will be discussed in the coming months with the membership via discussion threads led by moderators.

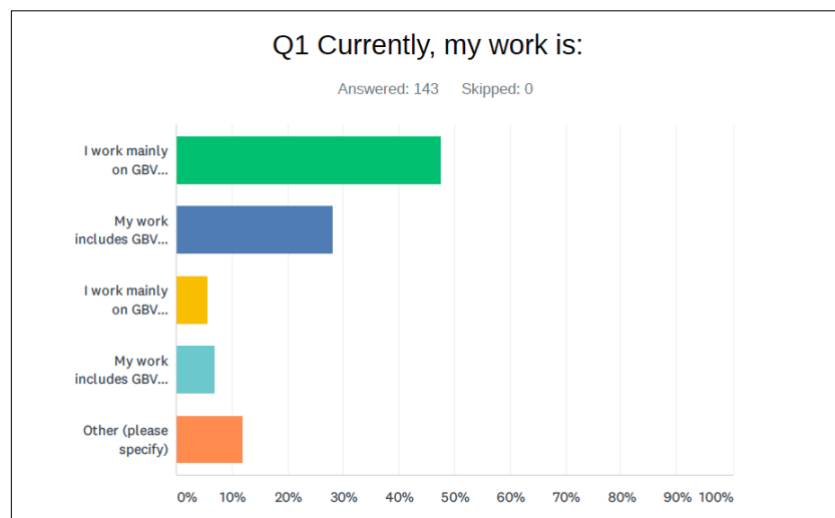
Approximately half of respondents participated in webinars. The comments provided indicate that respondents view the webinars positively. The survey did not specifically ask why respondents did not participate, but there have been some informal discussions about the challenges of different time zones. This deserves further discussion and investigation to ensure that webinars and other similar activities are accessible to all members even if they cannot attend at the designated time.

There are some suggestions for changes and improvements from a few members noted in the comments below several of the survey questions. These will require some further probing and discussion with members in the coming months. These will be examined, one by one, and addressed as appropriate.

One of these issues is the question of relevance of discussions to the wide range of levels of experience among the members. This echoes a concern shared with the moderators (prior to this survey) by one or two experienced GBV specialists – who were not members and had not seen discussions - that some of the CoP discussions may not be advanced enough to meet their needs or interests. This concern has not played out, however, as discussions in the CoP range widely from basic support and guidance to more nuanced and advanced GBV programming challenges. Nevertheless, the diversity of professional development needs among the membership is real and warrants further discussion.

Survey Questions and Answers

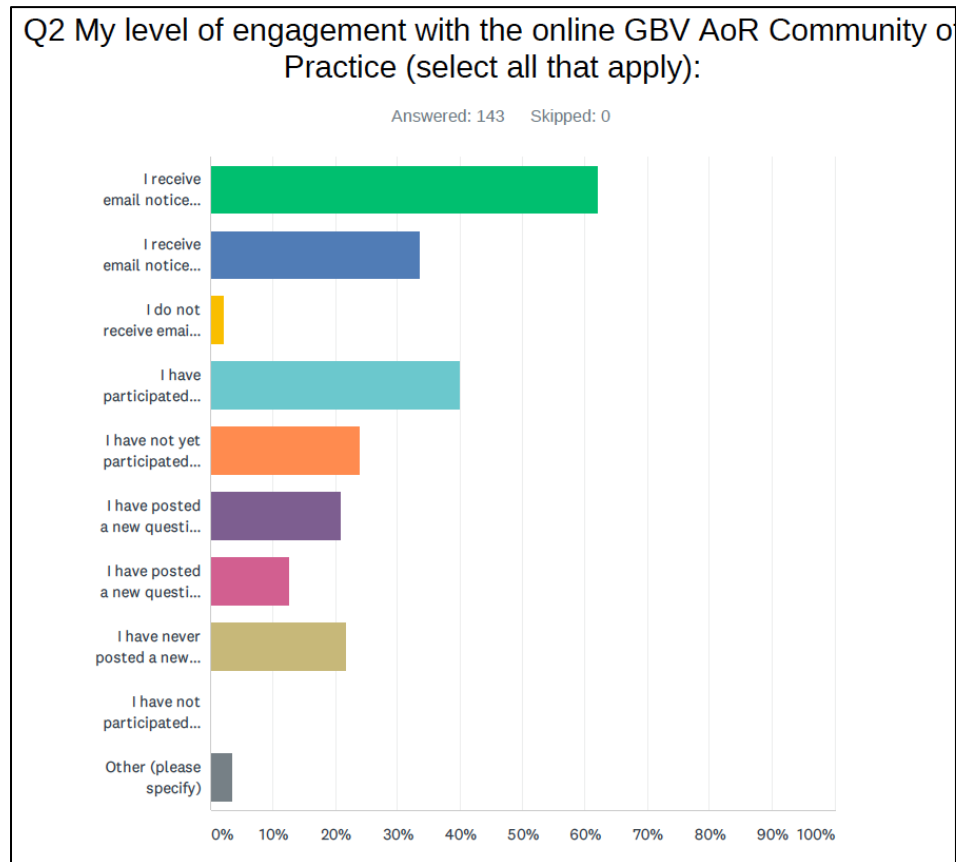
1. Members' primary type of work



ANSWER CHOICES	RESPONSES	
I work mainly on GBV prevention and response in humanitarian emergencies	47.55%	68
My work includes GBV prevention and response in humanitarian settings, but that is not my primary area of focus	27.97%	40
I work mainly on GBV prevention and response in NON-humanitarian emergencies	5.59%	8
My work includes GBV prevention and response in NON-humanitarian settings, but that is not my primary area of focus	6.99%	10
Other (please specify)	11.89%	17
TOTAL		143

#	OTHER (PLEASE SPECIFY)
1	I'm a clinical psychologist that works on and off on humanitarian settings in MHPSS and GBV.
2	My work does not include GBV prevention and response.
3	My last role was GBV prevention and response in hum emergencies but currently on mat leave
4	Mainstreaming GBV into our projects like WASH,FSL,EDUCATION,S/NFI
5	Safeguarding but returning to GBV work
6	I'm double hatted for the response in emergencies and in non-humanitarian context
7	GBV Coordinator for Learning and Advocacy
8	Studying
9	policy/emergency management with an intersectional focus
10	I work on gender in emergencies, but also GBV risk mitigation across sectors
11	I work on GBV and SEA prevention and response in both development and humanitarian settings
12	Head office as GBV focal
13	I work on GBV prevention and response in humanitarian settings and development settings
14	My work includes GBV prevention and response in humanitarian setting and is my primary area of focus.
15	Research
16	My work includes GBV prevention and response both in humanitarian and non-humanitarian settings. It also includes GBV coordination work.
17	I work on Ebola Response without GBV link

2. Members' level of engagement

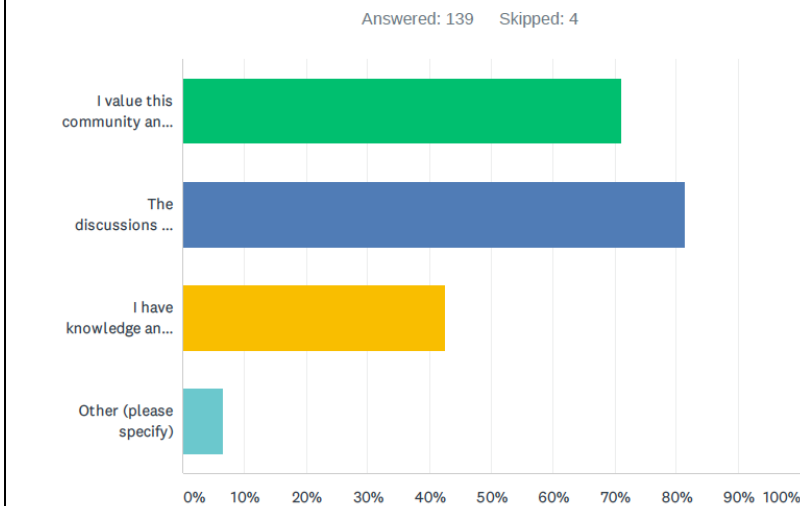


ANSWER CHOICES	RESPONSES	
I receive email notices and read MOST new posts	62.24%	89
I receive email notices and read SOME new posts	33.57%	48
I do not receive email notices but I visit the CoP on the Internet	2.10%	3
I have participated at least once in a discussion by responding to a post	39.86%	57
I have not yet participated in any discussions (have not posted anything)	23.78%	34
I have posted a new question or a request at least once	20.98%	30
I have posted a new question or a request more than once	12.59%	18
I have never posted a new question or request	21.68%	31
I have not participated and do not read the posts.	0.00%	0
Other (please specify)	3.50%	5
Total Respondents: 143		

#	OTHER (PLEASE SPECIFY)
1	I have been disconnected from the AOR and my community of practice since a change in jobs and now as an independent consultant, I would like to re-engage.
2	I noted the contacts of some people to have bilateral interactions related to my work
3	I have also published job openings
4	I have participated in offline discussions prompted by the CoP (e.g. in person through the GBV AoR))
5	I have provided information requested replying by email to the person who posted in the CoP.

3. Why members engage in discussions

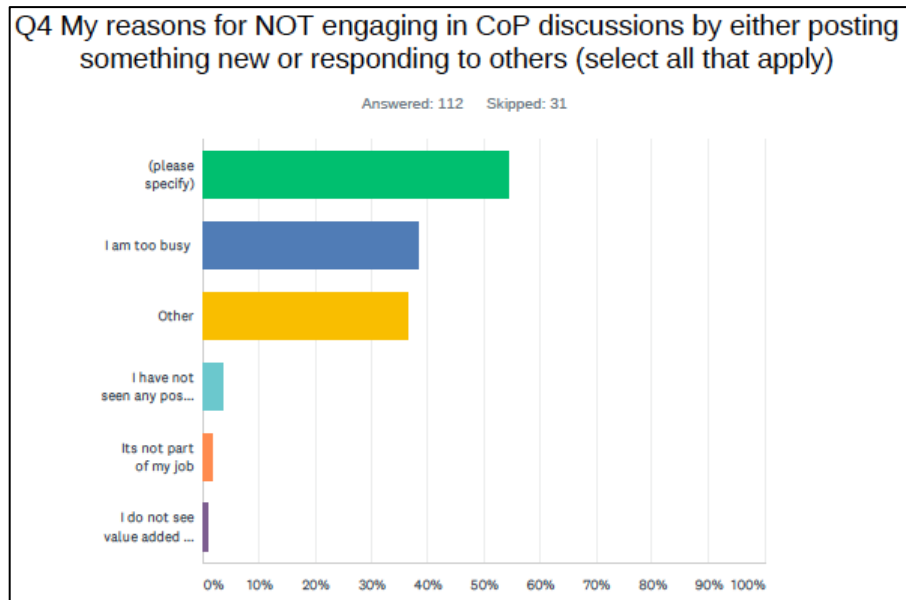
Q3 My reasons for engaging in CoP discussions by either posting something new or responding to others (select all that apply)



ANSWER CHOICES	RESPONSES	
I value this community and want to support it	71.22%	99
The discussions and information are helpful for me in my work and/or my professional development	81.29%	113
I have knowledge and skills and want to share those with others	42.45%	59
Other (please specify)	6.47%	9
Total Respondents: 139		

#	OTHER (PLEASE SPECIFY)
1	I have not posted something new or responded to others
2	Job and training opportunities/Possibility of bilateral discussions with members
3	The CoP allows me to stay up to date on prevention approaches and respond to GBV; to be aware of global challenges
4	I have not really engaged
5	Just to note that I haven't actually posted yet but want to - and these are the reasons why
6	the CoP is my first reference to verify information
7	I am interested to exchange knowledge with peers but so far the content has not been useful for my work
8	Haven't actively engaged yet because I haven't had the need to or the response to others' requests, but I do read and value all contributions
9	It is hard to find other GBV actors in my area and this makes me feel less alone.

4. Why members do not engage in discussions

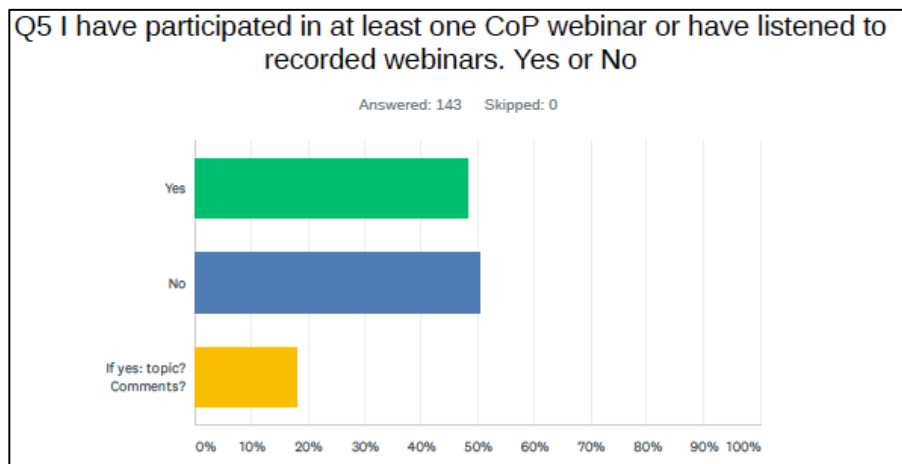


ANSWER CHOICES	RESPONSES	
(please specify)	54.46%	61
I am too busy	38.39%	43
Other	36.61%	41
I have not seen any posts of interest to me	3.57%	4
Its not part of my job	1.79%	2
I do not see value added to my work/my career by engaging in the discussions I have seen. (Explain below)	0.89%	1
Total Respondents: 112		

#	(PLEASE SPECIFY)
1	Still learning how to navigate and what is acceptable to ask.
2	I go through the posts reading and searching for any new information even though its a bit limited due to workload and pressure. I have missed many emails cause of technical issues. would like to get the support to receive all emails on my personal email.
3	I am a new user, there will be occasion to post soon
4	N/A
5	None of the above since I find this community to be very very informative
6	I haven't had anything of value to contribute that hasn't already been added by someone else / don't know how relevant people will find policy stuff
7	Did not know how to engage after moving from formal employment with an INGO to independent consulting
8	Have not seen posts that connect with my specialisation.
9	I never engage in big communities (Facebook group, etc.) because I don't know who are part of it but I do engage bilaterally.
10	I have a lot to learn still and love being a part of CoP but I tend to ask questions to colleagues offline. I have also participated / interacted in webinars Advertised on the CoP. I hope to engage more in the future
11	Individual preference for closed group discussions. Given large size of the COP, feel less compelled to respond partially because assume someone else might be better placed to answer
12	I struggle to follow up
13	I will occasionally participate in CoP discussions but because my work very rarely, if ever, involves GBV-related work I do not engage as often as I would like.
14	There is no reason for not participating
15	Currently I have engaged less since I have gone on mat leave.
16	Others will have responded already
17	Only once there was a post in which I could actually provide inputs, not being a humanitarian emergency, but I was overwhelmed by work and could not respond ontime to the colleague
18	I do engage
19	I participate when I have something to share or say
20	Sometimes if I don't engage in CoP discussions is due to limited access to internet in the field - remote areas
21	I have not much to share but I am learning from other CoP members by reading their posts.
22	I'm not too engaged because I'm busy.
23	Have not had the chance to get involved in GBV directly whilst focusing on safeguarding though there is overlap. Starting a new role in January which will allow me to focus on GBV
24	I'm not comfortable enough with the e-platform CoP is based on
25	I don't have specific requests myself but I like to learn from the requests for others. I don't respond because I feel like others have more expertise than me.
26	I am not a technical specialist (more a generalist with GBV focus) and sometimes don't feel I can contribute, or think that the specialists in the group will respond anyway with a better response.
27	Not applicable
28	N/a
29	Often responses are already provided by the time I read the email alerting me to a post on the CoP.
30	at times i see post late of which response have been provided
31	I have been able to access the necessary support with own networks and the context I work in does not relate much to the posts shared (I work in non-conflict, natural disaster settings)
32	I don't always feel that I have the knowledge or skill sets to respond. When I did post, it wasn't received well so I prefer to learn from others.
33	Not always confident the type of questions/posts which are 'worthy' or unsure how much non-traditional GBV program implementers should engage
34	None of the above
35	language; I'm not good at English.
36	There are too many emails coming from the COP and it's difficult to keep up.
37	As my work in non-humanitarian situations I tend to feel I am more of an observer than contributor. Also as a gender specialist, GBV work can focus on different dimensions (this was brought up in a very interesting discussion on the CoP, which I read it much later) and so sometimes there is a bit of parallel streams rather than cross-over taking place amongst those working on GBV issues.
38	some questions keep come back and i don't know the role of GBV advisers in various organisation.
39	n/a
40	Just to note that this isn't a good enough reason (too busy) and I would like to make more time for this
41	N/A
42	Sometimes if someone already responded, then i dont see the need to repeat
43	I am not currently working directly on GBV so I do not have the need to post and ask questions, and I do not have the most up-to-date knowledge so I do not feel informed enough to respond

44	I work for a Consortium which includes 14 Members. In other words, I do not do programming myself and I am not based in a development or humanitarian network. But it is helpful to be part of the CoP to stay up to date with best practice and to be able to forward on information to any of our Member organisations who may be looking for support/information.
45	Sometimes my level of internet access does not allow me to engage.
46	N/A
47	The CoP discussions for me is very helpful
48	I don't feel that I can bring an added value
49	I am fairly new in the Field, but I do read the responses that other people post.
50	People tend to respond with adequate information by the time I have read the post.
51	I find the format and set up a bit confusing.
52	I don't check the website, I rely on the email listserv as it is easy to use and dynamic
53	There are so many posts and responses everyday so difficult to response.
54	Many of the posts I've seen are more informational and are for entry level professionals. Some are more like research requests which would be better directed to the Help Desk or people have not done prior research. It seems to be more like a Quora at times rather than a thoughtful peer exchange on thematic topics. The webinars have been excellent and sometimes the responses to the questions are helpful and interesting but if the questions being posed could be more provocative and higher level I would be more engaged.
55	Fear of the judgement / backlash if you have different opinion.
56	Na
57	I have been on a break from work for the last 6 months, and so far I have not found any unanswered questions where I could jump. I mostly appreciate the sharing of new resources and tools that I find useful
58	See above (no need, or no direct response to questions I have seen)
59	It is sometimes too many posts to follow.
60	At times I do not have time but I see value in the CoP
61	Others have more expertise to answer certain questions asked in the CoP.

5. Participation in webinars



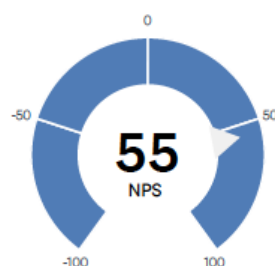
ANSWER CHOICES	RESPONSES	
Yes	48.25%	69
No	50.35%	72
If yes: topic? Comments?	18.18%	26
Total Respondents: 143		

#	IF YES: TOPIC? COMMENTS?
1	Webinars re Women Humanitarians (15th & 20th August around World Humanitarian Day)
2	WGSS tool
3	Very engaging!
4	I will attend tomorrow the one on GBV and technology
5	MHPSS
6	Women and girls safe spaces
7	Launch of WGSS toolkit
8	Last one was the new tools on WGSS. Was awesome.
9	I appreciate very much the opportunity to participate to webinars and to have the possibility to access them also when recorded. This has helped me to return several times to some of them and to improve my knowledge and access to other tools and information. I don't remember exactly the names, but one on Gvb on sexual and gender minorities and another on cash based interventions and access to technology by women
10	Webinar on GBV AoR and Humanitarian Needs Overview and Introduction of Training Manual: Mental Health and Gender-Based Violence: Helping survivors of sexual violence in conflict" HHRI
11	how MHPSS relates to GBV, update on the new IASC guidelines
12	CASI phase 1 and HNO/HRP
13	LGBTI and loved it
14	Launch of Women and Girl Safe Spaces (WGSS) Toolkit
15	Cannot remember, but has also miss some interesting ones because of time changes
16	Timing of webinars are impossible then don't get around to downloading
17	But it is just due to competing time constraints that I haven't listened to the recordings. I have a list of webinars to review.
18	Clinical Management of Rape
19	CASI and GBV AoR localization Task team Webinar
20	New CMR WHO guidance - Elizabeth Roesch. This was really helpful and exactly the kind of thing where the CoP can add value and reach a wide, relevant audience of GBV practitioners with guidance, standards and conversations about our practice
21	I don't recall, but it's not because it was not meaningful!
22	Some time i was on the field, or another time internet was not goog
23	It was on LGBTI in Humanitarian settings and programming
24	Social audit, importance of men engagement
25	Anti-trafficking in Humanitarian Action. Thanks to this webinar I understood the causal-effect link between GBV and TIP and vice versa. It was very helpfu for me.
26	I participated in the one on Sexual Orientation and Gender Identity. It really was very helpful.

6. Would you recommend the CoP to friend or colleague?

Q6 How likely is it that you would recommend the Community of Practice to a friend or colleague?

Answered: 141 Skipped: 2



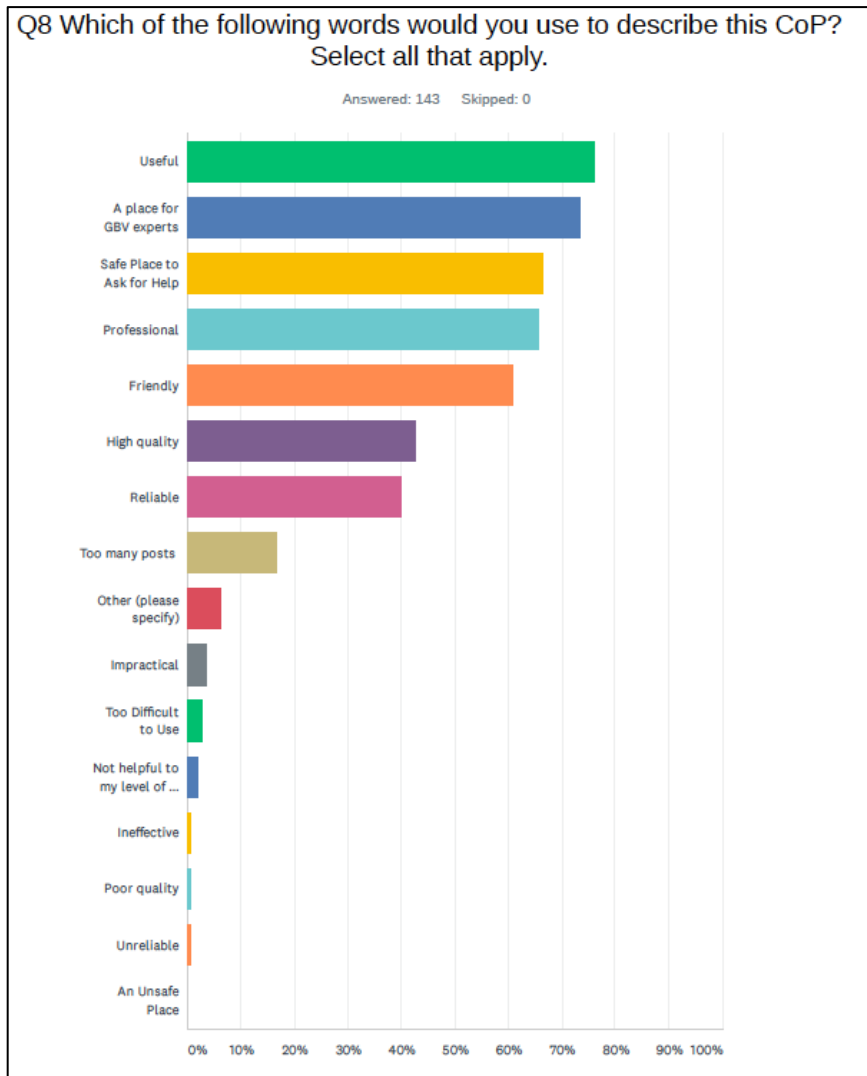
DETRACTORS (0-6)	PASSIVES (7-8)	PROMOTERS (9-10)	NET PROMOTER® SCORE
6% 9	33% 46	61% 86	55

7. Level of satisfaction with the CoP



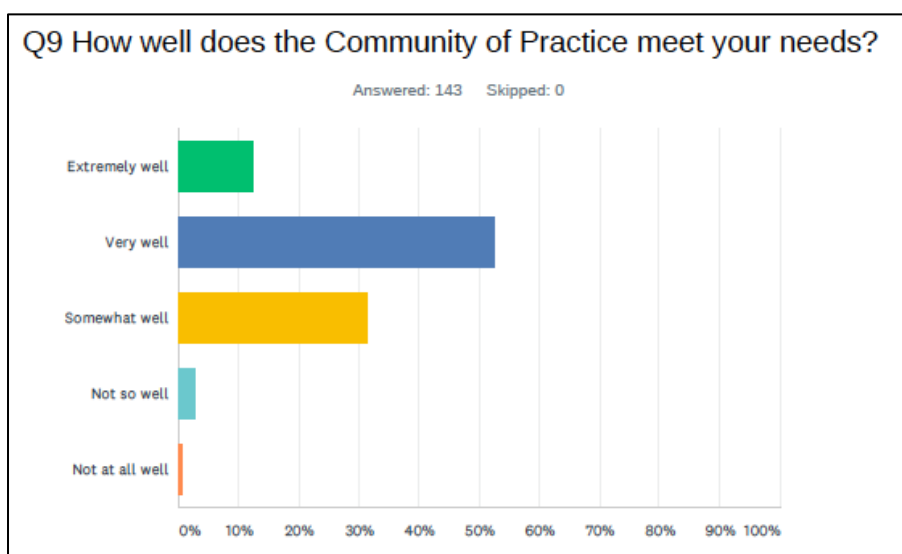
ANSWER CHOICES	RESPONSES	
Very satisfied	64.34%	92
Somewhat satisfied	31.47%	45
Neither satisfied nor dissatisfied	3.50%	5
Somewhat dissatisfied	0.70%	1
Very dissatisfied	0.00%	0
TOTAL		143

8. Describe the CoP



#	OTHER (PLEASE SPECIFY)
1	Can't opine at this time m.
2	I still find the yahoo format not user friendly
3	Sometimes people ask questions where you can see they know very little about GBV and humanitarian work and it is very worrying they have been recruited to such roles.
4	Multidisciplinary approaches/ Very practical place
5	I'm not comfortable enough with the e-platform CoP is based on
6	Interesting. Good for updates
7	A bit less relevant for GBV risk mitigation. More focused on GBV actors and service delivery
8	too many thank you emails
9	Practical

9. How well the CoP meets your needs



ANSWER CHOICES	RESPONSES	
Extremely well	12.59%	18
Very well	52.45%	75
Somewhat well	31.47%	45
Not so well	2.80%	4
Not at all well	0.70%	1
TOTAL		143

10. Any other thoughts or comments

Q10 Do you have any thoughts or comments you would like to share to improve the Community of Practice?

Answered: 65 Skipped: 78

#	RESPONSES
1	To host webinar on case management among child survivors.
2	nothing so far! but will suggest to have regular surveys .
3	It is indeed a very useful community however the posts are too many and hence I will choose to stop receiving email notifications and I hope I find time to visit the CoP. Thanks for all the efforts!
4	Move from yahoo to google or slack or a tool that allows you to easily go back to posts and chat regarding specific posts.
5	develop a website that fits all
6	none
7	I would like to build linkages between the PARG and CoP
8	Look for formal ways to invite members of the GBV community who are no longer full time employed with agencies/INGOs
9	None
10	Thank you very much for all the great work that goes behind this!
11	N/A
12	If I have anything to share I'll post and this is really good to know the new developments in GBV
13	I remember joining the COP right after the Mentoring Workshop in Sweden and I'm so impressed with the way the community has grown. I read every e-mail that comes through the COP and I've learnt so much. It's part of my daily routine now and I usually make myself a cup of tea before I start scrolling/reading/bookmarking :). Thank you so much Sarah and Beth for your tireless commitment to growing and strengthening this COP - I see you! All the best, Divya.
14	Keep the great work of knowledge sharing and skills building
15	thank you and I am happy to be a part of this COP
16	Thank you for this platform, it's very helpful
17	No comment keep up the good work!
18	Congratulations to the moderators !
19	Maybe the possibility to have some tags to search and post in order to be of easy consultation afterwards
20	No. Am happy with the content
21	We need more discussions and involvement of other colleagues who are not GBV coordinators via the webinars.
22	I would suggest the community to have some specific persons as coordinators for CP, GBV and Protection general to respond to questions or request posts in case questions/requests are not answered or responded to by community members. I real appreciate the community so much for their kindheartedly sharing of knowledge and skills for others to learn.I learnt a lot of new things through this great community.
23	The practice of sharing tools is welcome and extremely helpful. I find the community quite helpful
24	Please continue sharing posts. I am learning a lot from the information shared here. When i have something relevant to share, surely i will post it here.
25	The facilitation team is doing a great job to engage everybody and make sure every concerns are addressed.
26	I like the new tagging system. However with the new CoP I am again receiving emails everyday instead of a weekly digest, this is a bit too much. Keep up the good work!
27	Keep up your extremely important work with the CoP! The community is very helpful in my job and great for my professional development!
28	I understand that all posts are moderator accepted, however there are often emails very late at night and on the weekend, which can deliver to people's phones and disturb work life balance. I understand that it is not possible to control when replies to messages come in, but it could be good to have the original emails only be sent mid week. Thanks!

29	There is still a challenge: how to ensure that the answers given to users' questions have provided solutions to their problems? We do not often have feedback from beneficiaries. At times we wonder whether or not they have received the answers to their requests.
30	recorded webinars should always be posted within the shortest time possible
31	Should arrange trainings and in-person camps where members can meet and share their learnings, once or twice a year
32	No
33	I will be very satisfied when the French language will be used in different webinars because I am not good at English.
34	It is an excellent source of information and sense of peer connection is evident. Many thanks for all of your hard work!!
35	make available some slides for presentation on some of the topics.
36	I have found the experience of engaging with the community very useful to my needs. I got new resources, I got direct help from colleagues around the world and when I am looking for GBV resources it's my first go to place for it. So thank you very much for this. I think one thing which would be amazing if this community could facilitate is sth along the lines of a mentoring scheme. Finally, I look forward to the live events.
37	An amazing community and thank you to everyone who uses it and organises it :-)
38	-
39	No, I am fully satisfied with current form.
40	Thank you for this platform. I greatly value the discussions and resources shared - congratulations on a great CoP!
41	Thanks for availing all the resources to support GBV work globally.
42	A different platform where it is easier to search for information on particular topics. In stead of receiving many emails, develop weekly or monthly newsletters to highlight new tools, upcoming webinars etc. Share an event calendar.
43	I really appreciate COP platform as it space where by members can have access to resources and tools , technical support and guidance vis a vis GBV programming. it helps the group members to grow professionally and be able to provide support for others.
44	There is need to conduct more webinars and include more GBV colleagues who can benefit from these wonderful brains.
45	Thank you!
46	For awhile the "thank you" response posts had stopped, but now they have started up again, a bit. Is it possible to reduce those again, under this new system? <3
47	Apart from questions and discussions raised everyday, it is also useful to have focused discussions on topics related to GBVIE for some time (like a week or even a month) so that everyone can share different resources related to the topic, their experiences, their thoughts and just discuss it in the group. I remember once in the summer this happened with the Self Care topic, and it was really informative and useful.
48	encourage people to share information, not only to come in CoP to ask information or help. Sharing experience can be helpful for all the practitioners
49	N A
50	Keep up the good work!
51	Keep up the good work, it is really useful, and needed!!
52	All good.
53	I am not an IT expert, but I wonder if there is a different format that may be more user-friendly, accessible and easy to navigate? I value participating, but find it a bit complicated and hard to keep track and find things.
54	I think it is the best part of the AoR. It could be used more by practitioners, especially those more senior to share knowledge. It could be used for informal mentoring if a system was set up to match people
55	Mentor should give proper time . Some online training should be introduced for gbv .
56	Discussion around GBV professional development pathway would be very useful. I have been trained in GBVIE but I have never got a job in the area. I used to asking myself what other skills I need or what is missing?
57	The COP is useful to see what topics are on people's minds - to get a sense of trends/ interests in the field. Then, perhaps the Help Desk could link to it to give more in depth information. It is also confusing how it connects to the GBV Coordinator Skype group. I use the GBV Coordinator group. more because it is more directed to. my needs. Perhaps if it was clearer who should. use what between the COP, HelpDesk and Skype group we could utilize them better.

58	I appreciate that the moderators started to filter more emails recently so the discussions became more focused. Sometimes i feel that many topics do not answer my level of expertise, however i have found many of the tools or resources shared very useful. I wish this CoP existed when i was an emerging GBV expert and I am sure many junior GBV professionals are highly benefiting from this group. Even though I haven't posted any question or topic yet, I feel safe to know that I have a space to do so should I need to. Well done for the moderators and keep up the good work
59	Having read of the recent demise of the GvCop member and her daughter, I think it's extremely important to do a introspection internally, as there may be other members who do not feel free to speak out. This may save a life
60	Moving the CoP to a more open, interactive platform would be useful (email channels and notifications not the most practical to engage in a group conversation or just "drop" thoughts, inputs and insights - or questions.
61	It would be good to better oversee and arrange postings by relevance for the CoP. Another option could be to create sub groups that people could sign up for and/or arrange posting by level of experience or exposure to the field
62	I think when posting some important documents should be at least in English for all members to benefit from it.
63	Being a young professional in GBV, the CoP subjects and discussions are very useful place for me to hear from experienced international professionals, even when it comes to subjects or areas that are not currently part of my focus
64	Clearer flagging of post type in heading (for example Request or New Resource or Introduction) will help me prioritize
65	Thanks for doing this!

Annex 1. CoP Member Profile

GBV Community of Practice Member Profile

Gender-based Violence Area of Responsibility



The online GBV AoR Community of Practice aims to build community and facilitate continued learning and sharing among specialists working on GBV in emergencies. The CoP offers a structured space for ongoing, field-centered, experiential learning, and a platform to discuss challenges, troubleshoot solutions, and celebrate successes. Discussions range from informal requests for suggestions and resources to thematic events led by experienced GBV specialists to advance learning, motivate new thinking, and promote discussions on critical issues that many of us face in our day to day work.

Members of the Community of Practice are GBV specialists in humanitarian emergency settings who share a common sense of purpose in this work and want to learn and share together to deepen their understanding, strengthen their abilities, and broaden their networks with the shared aim of increasing the overall effectiveness of prevention and response to GBV in emergencies.

CoP members represent a mix of emerging and experienced GBV practitioners from a range of professional backgrounds; different levels of supervisory and leadership responsibility; different types of GBV specialist roles (clinicians, managers, trainers, advisors, coordinators, etc.); a wide range of geographic locations; a mix of field-based and headquarters-based members; and diversity of nationality, culture, and age.

Members may work for local, national or international organizations, non-governmental or government organizations, multilateral organizations, research or educational institutions; they may be self-employed; they may be between jobs. Student members are typically graduate level students who have worked as GBV specialists in emergencies before starting their graduate studies and plan to return after completing their education. Some student members may be graduate students who have completed field work specialized in GBV in emergencies and whose educational focus is GBV in emergencies.

Members participate in the GBV AoR Community of Practice to:

- Learn about others' perspectives and experiences, and share their own experiences
- Gain new knowledge
- Strengthen their abilities to deal with the challenges and complexities of this work
- Gain deeper insight and understanding
- Challenge their own and others' assumptions
- Learn about new and emerging good practices, standards, and tools
- Broaden their networks beyond the current deployment and organization

The GBV AoR CoP is a component of Phase III of the Managing GBV in Emergencies (MGBViE), a multi-phased learning program to strengthen the number, capacity, and support of GBV specialists leading emergency GBV programs. Phase I is a self-guided e-learning introductory course; Phase II is a face-to-face training workshop; and Phase III includes continued supported learning through mentorship, this community of practice, and other capacity development and support activities at local and regional levels. With support from the U.S. Department of State, Bureau of Population, Refugees, and Migration, International Medical Corps is leading the MGBViE learning program on behalf of the GBV Area of Responsibility.

January 2020

Annex 2. Membership

Initiated in May, 2018, membership in the Community of Practice grew to 468 members as of December 31, 2019.

