GBV AoR HELPDESK

Gender Based Violence in Emergencies

Ukraine Refugee Response: Recommendations to Mitigate GBV Risks



Marcy Hersh | April 2022

Background

The scale of the refugee crisis generated by the war in Ukraine is massive. It is the largest refugee crisis in Europe since World War II, with millions of women and girls displaced across multiple countries. As of March 29, 2022, more than 4 million refugees have fled Ukraine and a further 6.5 million people have been displaced internally. The majority of these refugees are women and children, as men between 18 and 60 have been prohibited to leave the country. Refugees are seeking accommodation across a multitude of countries as they escape the invasion of Russia, with no central body or organization liaising this process.

The urgency of the crisis has spurred a need for alternative accommodation arrangements. This has been coordinated by individual volunteers, refugee coordination groups⁴, or government schemes across Europe, with varying levels of regulation. Governments and authorities place refugees in council and social housing, or hostels and hotels. Private individuals and families are also volunteering space in their private homes. Alternative care for unaccompanied asylum-seeking children is also provided. Each of these accommodation options range between regulated, semi-regulated or unregulated arrangements, each with associated risk factors.

Many refugee women and children experienced sexual violence inside Ukraine⁵ or while on the move⁶. Once they reach their temporary or final destinations, displaced women and girls face exacerbated risk of multiple forms of gender-based violence (GBV). Previous conflicts in Ukraine also demonstrate a history of increased GBV during displacement. A 2019 UNFPA study indicates that displaced women and girls' risk of experiencing GBV was three times higher than that for local women who were not displaced.⁷ Refugee women and girls on the move, seeking

³ CARE and UN Women, 2022. "Rapid Gender Analysis of Ukraine: Secondary Data Review." https://www.unwomen.org/sites/default/files/2022-03/RGA%20Ukraine-SDR%20Full%20Report 0.pdf

 $\underline{https://eeca.unfpa.org/en/publications/well-being-and-safety-women?}\ ga=2.8081201.220554671.1646062129-58387694.1642436549).$

¹ UNHCR, 2022. "Ukraine situation: Flash Update #6." https://data2.unhcr.org/en/documents/details/91719

² Ihid

⁴ Both new and previously existing housing coordination groups for refugees have been responding,

⁵ Note: Human rights monitoring and documentation efforts are currently underway to confirm reports of sexual violence reported in the media. Taylor, Harry. The Guardian. 27 March 2022. "Russian soldiers raping and sexually assaulting women, says Ukraine MP." https://www.theguardian.com/world/2022/mar/27/russian-soldiers-raping-and-sexually-assaulting-women-says-ukraine-mp and a OSCE et. Al (2019) study found roughly 75% of Ukrainian women reported having experienced some form of violence prior to age 15, with 30% reporting direct physical or sexual violence.

⁶ UNHCR. Statement on risks of trafficking and exploitation facing refugees from Ukraine attributed to UNHCR's Assistant High Commissioner for Protection. April 12, 2022. https://www.unhcr.org/tr/en/34695-statement-on-risks-of-trafficking-and-exploitation-facing-refugees-from-ukraine-attributed-to-unhcrs-assistant-high-commissioner-for-protection.html

⁷ UNFPA, 2019. "Internally displaced women in Ukraine face abuse and exploitation." https://www.unfpa.org/sites/default/files/resource-

accommodation, and living in any accommodation arrangement require urgent protection. All efforts must be made to mitigate risk of GBV.

Objective

The key recommendations that follow should inform coordination efforts with 1) refugee-hosting States, 2) GBV specialist refugee response agencies and organizations, and service providers, and 3) non-GBV specialists in other sectors to ensure that refugee women and girls' risk of GBV is consistently and systematically mitigated. It is expected that these recommendations will be expanded and contextualized by locally based GBV risk mitigation specialists to account for country-specific legislative and regulatory frameworks.

Limitations

Due to the urgency of the current emergency this set of recommendations was necessarily produced in a limited timeframe in early April 2022. The recommendations are based on publicly available and published data available in English.

Key Recommendations for States Hosting Refugees

Ensure the Provision of Lifesaving GBV Services

- Increase stable and predictable funding for GBV programming and support their expansion and accessibility by refugee women and girls. This will help civil society actors respond more effectively to all forms of GBV, including sexual violence, intimate partner violence, trafficking, as well as sexual exploitation and abuse.
- Support the creation of Safe Spaces, which are often the only available lifelines for women and girls to seek support and to access GBV case management, psychosocial support, and other lifesaving GBV services.
- Provide interpreters in Safe Spaces to enable refugee survivors of GBV to communicate with staff in
 Ukrainian and other relevant languages. These interpreters must also be trained on the basics of GBV,
 including the survivor-centered approach and guiding principles of safety, confidentiality, respect, and nondiscrimination.
- Ensure the availability of mental health and psychological support services in Ukrainian other languages spoken by refugees to address the mental health impacts of GBV and forced displacement.
- In health clinics and hospitals, support GBV-Sexual and Reproductive Health (SRH) integrated approaches, to avoid gaps within the clinical management of rape and ensure support to survivors of sexual violence.
- Establish referral pathways and Standard Operating Procedures to enable GBV survivors to access GBV response services.
- Use the <u>Guidelines for Integrating GBV Interventions in Humanitarian Action</u>, the <u>Interagency Minimum Standards for GBV in Emergencies Programming</u>, and the <u>Interagency Standing Committee Gender Handbook for Humanitarian Action</u> to inform service delivery and as a criteria on which the release of all humanitarian funding is based. Agencies failing to meet these minimum standards of humanitarian action should not receive funding in line with the humanitarian principle of Do No Harm.
- Recognize the economic impacts of the war in Ukraine that exacerbate GBV for refugee women and girls. Prioritize meeting their economic needs, such as by expanding humanitarian cash transfer programming, humanitarian distributions, and livelihood support, based on needs assessments which are informed by women and girls and with GBV risk mitigation measures in place for these activities.
- Ensure refugee women and girls have access to information in their language on school enrollment for girls, income generating opportunities, and vocational training opportunities for women.
- Set up and/or expand the use of emergency hotlines, staffed with Ukrainian and other relevant language speakers, who can direct refugee women and girls to GBV services and other services as required.
- Ensure all GBV services and risk mitigation efforts are equally delivered to all refugees, including Ukrainians and third-party nationals displaced from Ukraine.

Setting Up and Monitoring All Accommodation Centers⁸

- All agencies and facilities offering accommodation services must be registered by their country's social
 welfare services, and every professional involved in childcare placements must sign a code of conduct
 that defines their role and articulates behaviors that will not be accepted, including sexual exploitation
 and abuse.
- Ensure the creation and implementation of clear procedures for reporting allegations of misconduct, including instances of GBV and sexual exploitation and abuse.
- Require housing providers to implement policies and procedures, risk management, training, and publicity or awareness to mitigate GBV risks in their units or buildings.
- Ensure every accommodation center has an organizational safeguarding policy in place, outlining the rights and responsibilities of hosts and guests, including the need for both parties to be aware of the policy, as well as reporting mechanisms and procedures for any instances of abuse.
- Use and distribute the <u>GBV Pocket Guide in Ukrainian</u>, a resource designed to explain how to support a GBV survivor in a context where there is no GBV actor (including a referral pathway or GBV focal point) available.
- Provide accurate and accessible information on available GBV services and referral processes, where these exist.
- Ensure the regular presence of interpreters to facilitate communication between refugees and shelter/accommodation/service providers. These interpreters must also be trained on the basics of GBV, including the survivor-centered approach and guiding principles of safety, confidentiality, respect and non-discrimination.
- Women, girls, and other at-risk groups should be involved in the decision-making process for selecting their shelter/accommodation, with the opportunity to make choices based on their needs and safety concerns.
- Where safe and possible to do so, offer accommodation solutions that allow refugee women and children not to live in isolation, but as integrated peer groups within the host society.
- Provide separate housing for men and women, with the exception of families.
- Preserve family and community unity if not otherwise requested.
- Ensure refugee women and girl's access to basic commodities such as water, sanitary facilities, and food supplies.
- Guarantee that sanitary facilities are separated for men and women.
- Ensure refugee single women can live separately from single men and with their children if they have any.
- Transgender individuals should be allowed to choose the housing option that is safest for them, especially where shelters are sex segregated.
- Inside accommodation centers, personal accommodation for women, girls and at-risk groups should be positioned away from high-trafficked areas, such as distribution points.

Alternative care arrangements: This is any arrangement, formal or informal, temporary or permanent, for a child who is living away from his or her parents. There are many kinds of alternative care, but these are generally grouped as informal and formal care types. Informal care is where other family members or people close to the children look after them, this is sometimes referred to as kinship foster care and is common in most countries. Formal care is where the government or a recognized child-care agency places a child in the care of adults who are not family, for example a large-scale residential institution.

Foster care: A situation in which a child is cared for in a household outside her/his family. Foster care is usually understood to be a temporary arrangement, and, in most cases, the birth parents retain their parental rights and responsibilities. Foster care is a form of formal alternative care arrangement.⁸

Social Housing: Although each country defines it differently, social housing is an integral part of housing systems that are designed to fulfil a housing need for those who cannot compete in the market, afford to be homeowners or rent decent housing in the private market. There are many different types of social housing available and these can be facilitated by the government, councils or social care systems of a country, as well as the private sector.

Residential care settings: Arrangement provided in a non-family-based group setting with paid and/or unpaid staff where some people live and receive care and are placed by order of a competent authority. This can be specific according to needs, such as residential care for children, older persons, people with disabilities. Residential or institutional care should always be a last resort, appropriate only where family-based care arrangements are not possible, or it is decided that family-based care is not in the best interests of the individual.

⁸ All Accommodation Centers refers to and includes the following types of accommodation arrangements:

- Avoid overcrowded living arrangements, which can add to family stress.
- Set up mechanisms or regulations to ensure accommodation centers provide consistent and reliable support services for refugees.
- Establish clear reporting mechanisms for the community to register shelter-related issues concerning safety and GBV. These feedback systems should be made known to all members of the community, and information about these mechanisms regularly communicated.
- Make regular and transparent updates to websites where accommodation information is advertised to inform refugees on the types of living spaces available and the composition of current inhabitants (for example, single men, families with young children) so refugees can make informed decisions.
- Increase and ensure the regular payment of financial support for accommodation centers to ensure basic needs, including food and basic non-food items are consistently met.
- All accommodation centers must be safe, habitable, and aligned with national regulations.
- Support refugees' transportation from accommodation centers to health clinics, distribution points, and other services as required.
- Ensure refugees have access to information on the services available to them in the language they understand.

Special Considerations for Private Accommodation Arrangements9

- Ensure private accommodation hosts are engaged and involved in refugee response coordination at local levels: this will serve to increase access to information, strengthen integration, and ameliorate tensions.
- Evaluate private accommodation arrangements to understand their safety for refugee women, girls, and
 other at-risk groups, as well as hosts' willingness to mitigate GBV risks in their units or buildings. Best
 practice would be to institute standardized operating procedures which stipulates a referral process
 from registered caseworkers is necessary before any refugee placements are made and that hosts are
 also interviewed.
- Provide training to hosts to improve knowledge of how to adequately provide assistance to already vulnerable/at risk individuals and ensure help is provided in line with the Do No Harm principle.
- Support hosts with information and resources to help to individuals who have experienced traumatic or distressing events.
- Ensure hosts have access to referral pathways, Standard Operating Procedures, and are informed on how to support GBV survivors in accessing services.
- Use and distribute the <u>GBV Pocket Guide</u>, which is available in multiple languages, including Ukrainian. It is a resource designed to explain how to support a GBV survivor in a context where there is no GBV actor (including a referral pathway or GBV focal point) available.
- Increase and consistently offer financial support to hosts, to avoid overstretching family resources.
- Set up regular monitoring mechanisms to ensure private accommodation arrangements provide consistent and reliable support services for refugees.
- Recognize a proportion of hosts may be malevolent or disingenuous in their intentions of providing assistance and accommodation to refugee women and girls, posing a direct threat to their life and wellbeing. For example, the underlying intention is to accommodate women and girls for the purpose of abusing and exploiting them either directly (i.e., to be abused or exploited by them) or, indirectly (i.e., to be abused or exploited by others e.g., pimps, gangs, traffickers).
- Respond with appropriate support from law enforcement, social welfare groups, or international humanitarian shelter agencies if hosts are not suited to providing refugee assistance. Immediately remove refugees from all dangerous accommodations and re-accommodate them in safe

⁹ **Private hosting accommodation arrangement:** This expression refers to people accommodated in private houses or apartments by individuals, either by the host themselves or through the mediation of a civil society actor or local authority. This could include the use of a vacant property made available to refugees fleeing from conflict. The main factor is the "private" nature of the hosting arrangement and the fact that this is not regulated by a mandated public authority.

accommodation.

Key Recommendations for GBV Prevention and Response Actors in UN Agencies, International NGOs, and Frontline Responders

Ensure the Provision of Lifesaving GBV Services

- Recognize pre-existing and emerging GBV risk factors emanating from forced displacement and prioritize GBV risk mitigation across all levels of the refugee response, including in sectoral guidance and standard operating procedures (SOPs).
- Increase the number and reach of all types of GBV specialized services, including case management and psychosocial support, cash assistance, mental health, legal, and health services.
- Collaborate with and support local women's rights organizations and local specialist agencies on GBV.
- Create equitable partnerships with women's rights organizations and local specialist agencies on GBV that apply feminist principles in ways of working.
- Ensure accessibility of GBV specialized services for women and girls who face specific GBV risks and intersecting forms of marginalization and oppression through dedicated entry points and activities as well as by integrating them into existing services and Safe Spaces.
- Activate women and girls' peer support networks by involving community groups, informal and formal networks, and organizations in GBV prevention at the community level.
- Ensure that new or adapted distribution modalities safeguard the wellbeing and dignity of refugee women and girls.
- Support safe, dignified, and effective access by refugee women and girls to all humanitarian sectors and services, with a focus on survivors of GBV, widows, women and girls who have a disability, or have a diverse SOGIESC¹⁰.
- Integrate GBV indicators into existing monitoring modalities and consistently report against them.
- Strengthen sexual exploitation and abuse reporting, investigation, and accountability systems across all levels of service provision and aid distribution to ensure women and girls can use them safely, without fear of retaliation or stigmatization.
- Continue investing in the collection and analysis of age, sex, and diversity disaggregated data to improve the quality of the response.
- Prioritize girls' access to education and women's economic independence given the preventive effect this will have on both GBV and gender inequality.

Supporting Refugee Women and Girls in All Accommodation Centers

- Support the mitigation of GBV risks in refugee accommodation. This includes:
 - o Implement regular safety audits of the accommodation and its environment.
 - o Conduct focus group discussions with women and girls to understand their perception of security and protection concerns.
 - Lead community mapping exercises to assess knowledge of services available to women and girls, or the community's perception of areas that present risks to women and girls.
- Ensure private accommodation hosts are engaged and involved in refugee response coordination at local levels: this will serve to increase access to information, strengthen integration, and ameliorate tensions across communities.
- Provide training to hosts to improve knowledge of how to adequately provide assistance to already vulnerable/at risk individuals and ensure help is provided in line with the humanitarian Do No Harm principle.
- Support hosts with information and resources to help to individuals who have experienced traumatic or distressful events.

¹⁰ SOGIESC is a term meaning sexual orientation, gender identity, gender expression and sex characteristics.

- Ensure hosts have access to referral pathways, Standard Operating Procedures, and are informed on how to support GBV survivors in accessing services.
- Use and distribute the <u>GBV Pocket Guide in Ukrainian and other locally spoken languages</u>. It is a resource designed to explain how to support a GBV survivor in a context where there is no GBV actor (including a referral pathway or GBV focal point) available.
- Recognize a proportion of hosts may be malevolent or disingenuous in their intentions of providing assistance and accommodation to refugee women and girls, posing a direct threat to their life and wellbeing. For example, the underlying intention is to accommodate women and girls for the purpose of abusing and exploiting them either directly (i.e. to be abused or exploited by them) or, indirectly (i.e. to be abused or exploited by others e.g. pimps, gangs, traffickers).
- Respond if hosts are not suited to providing refugee assistance and immediately remove refugees from all dangerous accommodation and re-accommodate them in safe accommodation.

Key Recommendations for All Actors in UN Agencies, International NGOs, and Frontline Responders

Mitigate GBV Risks for Refugees Seeking Assistance

- Integrate GBV risk mitigation measures, such as those in the <u>Guidelines for Integrating GBV Interventions</u> <u>in Humanitarian Action</u>, as a core responsibility of all humanitarian actors and to improve the effectiveness of humanitarian response across all sectors.
 - o In accordance with the "Do No Harm" principle and the IASC Centrality of Protection statement, humanitarian actors in all sectors have a responsibility to design and implement their programming in a way that minimizes GBV risks and ensures accessibility for vulnerable groups.
 - When programs are safer and more accessible, more people benefit, and overall outcomes improve; on the other hand, failing to address GBV concerns compromises the effectiveness of humanitarian interventions in all sectors.
- Pre-existing gender inequality makes women and girls particularly at risk in this type of crisis, increasing
 their exposure to multiple forms of GBV, including sexual violence, domestic violence, forced marriage and
 sexual exploitation and abuse.
 - When families are unable to meet their basic needs, women and girls are forced to employ dangerous coping mechanisms, increasing their exposure to GBV.
 - When women and girls are not provided with opportunities for meaningful participation, their needs and access to services are often not reflected in the provision of humanitarian aid.
- Use and distribute the <u>GBV Pocket Guide in Ukrainian and other languages spoken in country</u>, a resource designed to explain how to support a GBV survivor in a context where there is no GBV actor (including a referral pathway or GBV focal point) available.
- Mitigate GBV risks and reduce challenges in accessing distribution points for marginalized refugee women and girls, including those with disabilities and with diverse SOGIESC.

Ensure Protection from Sexual Exploitation and Abuse

- Avoid sexual harassment, exploitation, and abuse in all distributions of relief packages, whether by refugee response staff, service providers, or other actors involved in distributions.
- Ensure a victim-centered approach to addressing sexual exploitation and abuse and sexual harassment.
- Analyze GBV and sexual exploitation and abuse risks associated with the distribution of food, non-food items, and shelter/accommodation assistance.

Address GBV Risk Factors in Water, Sanitation, and Hygiene, Shelter/Accommodations, Aid Distributions¹¹ Shelter/Accommodation, and Education

• Promote the active participation of refugee women and girls and other at-risk groups in all shelter/accommodation assessments.

¹¹ Note: Detailed guidance for GBV risk mitigation in all sectors is available in the <u>Guidelines for Integrating GBV Interventions in Humanitarian Action</u>.

- Assess regulated and unregulated/private accommodation options design and safety to identify associated risks of GBV.
- Assess whether shelter/accommodation maintains family-community links while still maintaining privacy.
- Consult with GBV specialists to identify safe, confidential and appropriate systems of care (i.e. referral pathways) for GBV survivors and ensure accommodation staff/hosts have the basic skills to provide them with information on where they can obtain support.
- Incorporate GBV messages (including where to report risk and how to access care) into community outreach and awareness-raising activities, using multiple formats to ensure accessibility.
- Prepare and provide trainings for government, staff and community groups engaged in shelter/accommodation on the safe design and implementation of aid distributions that mitigates the risk of GBV.
- Undertake coordination with relevant national authorities and institutions and sectors to address GBV risks and ensure protection for women, girls and other at-risk groups.

Water, Sanitation, and Hygiene

- Ensure safety from sexual harassment, rape, and risk of kidnapping when accessing communal washrooms and bathrooms. Ensure a sufficient number of washrooms or latrines, segregated by gender, well lit, and with locks.
- Identify and pre-position age-, gender-, and culturally appropriate supplies for WASH that can mitigate risks of GBV
- Ensure dignified access to hygiene-related materials (e.g., menstrual hygiene management supplies for women and girls of reproductive age; washing facilities that allow laundry of menstrual cloth; proper disposal of sanitary napkins; etc.).
- Undertake coordination with relevant national authorities and institutions to address GBV risks and ensure protection for women, girls, and other at-risk groups.

Aid Distributions (Including Food and Non-Food Items)

- Promote the active and inclusive participation of women, girls and other at-risk groups in the design and implementation of all aid distributions.
- Assess the physical safety risks associated with all aid distributions.
- Assess awareness of service providers on basic issues related to gender, GBV, women's/human rights, social exclusion and sexuality (including knowledge of where survivors can report risk and access care; linkages between aid distributions and GBV risk reduction; etc.).
- Prepare and provide trainings for government, staff and community groups engaged in distributions on the safe design and implementation of aid distributions that mitigates the risk of GBV.
- Design commodity- and cash-based interventions in ways that minimize the risk of GBV (e.g., transfer modalities that meet food requirement needs; food ration cards assigned without discrimination; girls and boys included in school feeding programs; etc.).
- Consult with GBV specialists to identify safe, confidential, and appropriate systems of care (i.e., referral pathways) for survivors and ensure service providers have the basic skills to provide them with information on where they can obtain support.
- Provide adequate transportation services for refugee women and girls to enable their access of all services.
- Undertake coordination with other sectors to address GBV risks and ensure protection for women, girls, and other at-risk groups.

Education

- Promote the active participation of women, girls and other at-risk groups in all education assessment processes.
- Analyze access to and physical safety of learning environments to identify risks of GBV (e.g., travel to/from learning environments; separate and safe toilets for girls and boys; adequate lighting within and around buildings; school safety patrols; accessibility features for students and teachers with disabilities; etc.).
- Assess capacity of education programs to safely and ethically respond to incidents of GBV reported by students (e.g., availability of trained caseworkers; standard reporting mechanisms and systems of care;

- confidentiality measures; students' knowledge of how and where to report GBV; procedures for investigating and taking disciplinary action for incidents of sexual exploitation and abuse by education personnel; etc.).
- Prepare and provide trainings for government, education personnel, and relevant community members on to mitigate the risk of GBV.
- Consult with GBV specialists to identify safe, confidential, and appropriate systems of care (i.e., referral pathways) for survivors, and ensure education staff have the basic skills to provide information to them on where they can obtain support.

The GBV AoR Help Desk

The GBV AoR Helpdesk is a unique research and technical advice service which aims to inspire and support humanitarian actors to help prevent, mitigate and respond to violence against women and girls in emergencies. Managed by Social Development Direct, the GBV AoR Helpdesk is staffed by a global roster of senior Gender and GBV Experts who are on standby to help guide frontline humanitarian actors on GBV prevention, risk mitigation and response measures in line with international standards, guidelines and best practice. Views or opinions expressed in GBV AoR Helpdesk Products do not necessarily reflect those of all members of the GBV AoR, nor of all the experts of SDDirect's Helpdesk roster.

The GBV AoR Helpdesk

You can contact the GBV AoR Helpdesk by emailing us at:
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The Helpdesk is available 09.00 to 17.30 GMT Monday to Friday.

Our services are free and confidential.