SEXUAL EXPLOITATION AND ABUSE RISK ASSESSMENT REPORT 2023

TIGRAY REFUGEE RESPONSE
I. **Background**

In March 2022, the PSEA Working Group in Gedaref issued a comprehensive report on SEA assessment in the state. The assessment provided insight into complexities inherent in SEA risks, protection systems (prevention, mitigation, and response) and refugees’ access to the system. Key recommendations from the assessment included strengthening the already established mechanisms for preventing and responding to SEA were provided, ensuring compliance with SEA safeguarding standards, and improving protection systems.

The interplay of power, control, and social inequalities between refugees and potential perpetrators of SEA continues, necessitating attention to different levels of risks at the individual, household, community, and institutional levels. There is a need for continued in-depth assessment of risk patterns to enable essential contextualization of prevention, mitigation and response processes that could eventually alter the trajectory of exposure to SEA risks.

II. **Objective**

The objective is to review the relevance, effectiveness, and efficiency of the existing PSEA mechanisms in Gedaref state, considering the 2022 SEA risk assessment recommendations.

III. **Methodology**

The SEA risk assessment was conducted using a mix of qualitative methods and direct observations, With a focus on three key issues:

1. SEA risks, according to the perception of the community.
2. Mitigation measures.
3. Reporting mechanism, reporting channels, access, and barriers.

The following tools were implemented to gather data on SEA risk patterns and the existing PSEA mechanisms.

- Focus Group Discussions (FGDs) facilitate gaining greater insight and understanding among men, women, adolescent boys and girls, People Living with Disabilities (PLWDs), minority tribes, religious leaders, and the elderly regarding their perceptions of Gender-based Violence (GBV). The FDGs tools are applied to review the relevance, effectiveness, efficiency, and sustainability of the existing PSEA mechanisms.

- Key Informant Interviews (KII) were qualitative to get in-depth information from a wide range of community members on the issues of SEA.
- Data was collected by UNHCR, COR, ALIGHT, DRC, IRC and NCA using the KOBO platform. The data analysis is based on the findings from FGDs and KIIIs and a desk review of the 2022 SEA assessment.

- The SEA risk assessment was conducted in three locations (Tunaydbah, Um Rakuba and Babikri camps), with 2,557 respondents (1,381 Females, 1,176 Males). Below is the breakdown of the respondents’ percentages:
KII involved 13 individuals, including refugee and religious leaders, Commissioner for Refugees (COR) staff, Non-governmental Organizations (NGOs) volunteers, and host community leaders in all locations.

FGD totaled 94 discussions were held in the three locations with (2,544) individuals, including women, girls, men, and boys from youth groups (15-24 years), adults (25-64 years) and seniors (<65 years). Please see the breakdown of gender per location.

IV. Safety and Ethical Considerations

The following practices were followed during data collection in all three locations.

- The risk assessment team comprised of GBV, and Protection staff were trained on PSEA core principles and concepts, including safe and ethical data collection.
- Individual SEA disclosure or information on specific SEA incidents was not sought.
- The SEA risk assessment was conducted in locations where PSEA reporting mechanisms are in place.
- Facilitators were trained on the use of data collection tools as well as supporting survivor disclosure, reporting and referrals mechanisms.
- Assessment teams provided information on a wide range of available services and assistance for the refugees during the activities to be responsive to more comprehensive protection needs.
- Participants were grouped according to age, gender, and diversity to enhance a conducive open and inclusive discussion environment.
- All information was handled confidentially, and informed consent was obtained from participants before commencing discussions.
V. Key findings

Risks

- 28% of FGD participants highlighted survival sex as the most significant SEA risk due to the camps' lack of livelihood opportunities and income-generating activities (IGAs).
- 18% noted that sex in exchange for services is happening in the camps, and 33% highlighted sex in exchange for goods. Distribution criteria for shelter materials were mentioned to be unclear, given the massive need for shelter materials in the camps.
- 16% mentioned fear of retaliation from perpetrators leading to SEA impunity, and 14% mentioned negative coping mechanisms such as alcohol abuse.
- 8% noted sex in exchange for employment opportunities.
- KII participants highlighted refugees’ economic vulnerability, lack of livelihood opportunities, limited access to education, sale and exchange of sex, and alcohol consumption as SEA risk factors.
- The current conflict situation in Sudan, leading to high prices of commodities and scarcity of basic services, was noted to be a factor that will aggravate SEA risks.

Mitigation Measures

- 40% of the respondents to the assessment noted that community sensitization on PSEA and referral pathways are key to mitigating SEA risk.
- 15% mentioned a need to ban alcohol consumption in the camps. 11% highlighted transparent recruitment process for jobs in the camps is essential.
- 4% recommended humanitarian staff sensitization on PSEA, and 3% highlighted a need for clear targeting criteria when distributing goods to the targeted population.
- 6% recommended implementing measures to increase the safety and security of the camps, and 7% noted a need for strengthened protection monitoring in the camps.
- 15% mentioned other options, such as the increased presence of women police officers in the police station and the provision of income-generating activities as part of women and girls’ empowerment to reduce exposure to SEA.

Reporting channels and modalities

Reporting Channels

- 77% noted they are aware of SEA reporting channels.
- 23% are not aware of SEA reporting channels.
Reporting modalities

- 14% prefer to report the SEA cases to UNHCR, 19% to COR and 21% to local police.
- 12% prefer to report SEA to humanitarian workers, and 15% specifically health service providers.
- 16% prefer to report to the community leaders, and 2% to religious leaders.
- 90% of the interviewees prefer to report SEA cases to service providers in person.
- 7% prefer to report through complaint boxes. 1% prefer to report via hotlines.
- 2% prefer dispute resolution mechanisms.

Bars to reporting

- 21% noted a language barrier between service providers and refugees seeking services.
- 16% highlighted the fear of retaliation and safety concerns.
- 16% registered concerns about the possibility of absolute confidentiality for reported cases.
- 12% noted that service providers have failed to provide feedback on action taken against perpetrators.
- 9% noted limited assistance after reporting SEA cases.
- 9% delayed assistance after reporting SEA cases.
- 4% said they did not receive the assistance requested after reporting SEA cases.
- 6% noted that reporting mechanisms are not clear.
- 8% mentioned they could not afford to pay for the hotline, which is sometimes unavailable due to network challenges.

Mitigation measures for reporting

- 14% recommended increased police patrols in the camps, particularly at night when members of host communities come to the camps to access alcohol and commercial sex. 21% recommended increased female police officers.
- 23% recommended awareness raising to affected communities on reporting mechanisms.
- 17% recommended increasing the number of protection volunteers to facilitate reporting.
  - 26% recommended intensified community sensitization on PSEA (mainly involving the youths) on reporting mechanisms, available services in the camps, protection hotlines, suggestion boxes, referral pathways and providing community leaders contacts
Available services for SEA survivors

- 75% of the respondents are aware of available services to SEA survivors, while 25% noted they are unaware of available services.

- 31% noted the availability of psychosocial support; 24% noted safety and security support from police, COR and UNHCR. 39% noted the availability of health care to SEA survivors. 6% noted available support from community leaders and community dispute resolution mechanism.

Barriers to accessing assistance for SEA survivors

79% noted the existence of barriers in accessing assistance for SEA survivors. 21% noted there are no challenges. The following challenges are broken down as follows:

Transparency in the volunteer recruitment process

52% perceived the recruitment process of the volunteers to be fair and transparent, while 48% mentioned that the selection criteria and recruitment process of volunteers were not fair
## VI. Desk Review of 2022 SEA Assessment Recommendations

<table>
<thead>
<tr>
<th>2022 Recommendation</th>
<th>2023 Inter-agency Desk Review</th>
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<tbody>
<tr>
<td><strong>Management and Coordination</strong></td>
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<tr>
<td>Fortify inter-agency coordination through the PSEA Working Group and implement the PSEA Standard Operating Procedures and Action Plan for Gedaref state.</td>
<td>PSEA Interagency coordination is in place with an action plan for 2023 planned activities. PSEA WG is functional. PSEA SOPs in place.</td>
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<td>Expand Protection and PSEA training to local authorities, including the police, military, COR, and immigration staff, and continuous refresher training for humanitarian personnel in direct contact with refugees and the host community.</td>
<td>PSEA training for local authorities and law enforcement officials, humanitarian staff and refugees has been conducted and continues.</td>
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<td>Organisations to ensure regular safeguards are maintained during recruitment procedures at all levels, including transparent procedures, information sharing on the recruitment criteria and process, and background checks of community volunteers and incentive workers. Ensure regular information sharing on preparators and maintain a shared database of community volunteers and incentive workers that have been vetted.</td>
<td>Some organisations have employed transparent procedures in recruiting refugees- including available advertising positions widely and involving COR and refugee leaders in the recruitment process.</td>
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<td>Advocate for increasing safety and security in the camps by monitoring external stakeholders, increasing female law enforcement officers and staff, and establishing community safety networks in coordination with COR and local police.</td>
<td>Advocacy on safe procedures for handling SEA reports continues. There are no female law enforcement officers in the camps. Community watch groups involved in safety and security issues have been established.</td>
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<p>| <strong>Accountability to Affected Populations</strong> | |
| Strengthen outreach to communities and community-based feedback mechanisms to facilitate and improve SEA reporting and community engagement. Prioritize in-person reporting as a preferred modality by refugees and hotlines. | In-person reporting has been enhanced through existing reporting mechanisms- women’s desks, protection desks, reports to humanitarian staff and protection hotlines; community-based feedback mechanism SOPs have been established, including SOPs for the joint opening of suggestion boxes. |
| Increase and diversify information, education, and communications (IEC) materials and approaches on prevention of and response to SEA (including referral pathways), complaint mechanisms and process, and key messages on entitlements at key distribution sites in consultation with refugees. | IEC materials are posted in the camps. Need for more materials to cover all zones and blocks. Key messages are posted on banners in distribution sites, and key are Child-friendly materials posted. |
| Identify community based PSEA focal points, especially women community leaders and religious leaders, and engagement through alternative media channels such as radio and drama. | Focal points have been identified. However, there is a need for continued training at the focal points. |</p>
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<tr>
<th>Promote the participation of female refugees in leadership committees, particularly those dealing with the distribution of goods.</th>
<th>35% female presentation in refugee leadership committees.</th>
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<tr>
<td><strong>Prevention</strong></td>
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<td>Regular capacity-building and awareness-raising activities ensure that relevant stakeholders’ staff can identify and understand the impact of SEA and are equipped to take their role in preventing and responding to such misconduct.</td>
<td>Capacity-building and awareness-raising activities are ongoing. Detailed reports on target groups and statistics can be found in quarterly and annual reports.</td>
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<td>Mass community sensitization in Tigray on available referral pathways in all locations, addressing the Fear of Retaliation as a valid concern. Key community asks are as follows; 1) Medical assistance for survivors is available with pre-identified clinics after working hours; 2) Information on available legal assistance is disseminated, including information about the availability of free-of-charge services. Sensitize refugees and the host community on legal proceedings, ensuring they know their rights and responsibilities according to Sudanese laws.</td>
<td>Community sensitization is ongoing through various forms, including integrated community meetings, FGDs and training with target groups. Training on clinical management of rape cases has been conducted. PSEA/GBV mainstreaming was undertaken with different sectors- with an action plan and focal points identified. Legal sensitization is ongoing and legal support is provided through UNHCR’s legal partner- MUTAWINAT.</td>
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<td><strong>Response</strong></td>
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<td>Continue to enhance processes and procedures for handling SEA cases to ensure a systematic, coordinated, and victim-centred approach. Ensure the survivors are kept abreast of developments when cases are reported.</td>
<td>SEA cases are processed according to established procedures. A SEA tracker is established and regularly updated. Survivors are updated on the status of their cases.</td>
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<td>Prioritize access to safe and accessible services for SEA survivors through established gender-based violence and child protection programming, and advocate for these programs to be adequately funded. The PSEA WG should share regular guidance notes and packages to ensure all activities encompass PSEA.</td>
<td>PSEA mainstreamed in GBV activities and other sectors. Organizations provide safe and accessible services for SEA survivors through established GBV and Child Protection (CP) referral and assistance pathways. Adequate SEA funding is still a challenge.</td>
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<td>Carry out analysis of service providers’ response to SEA cases to create an evidence base for the identification of good practices as well as areas needing improvement in coordination with the SGBV WG.</td>
<td>Service providers mapping has been conducted. PSEA quarterly reports indicate good practices and areas requiring improvement. Joint sharing of risks and joint planning of prevention and response actions at PSEA WG levels is indicated as good practice.</td>
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<td>When a breach of conduct and reporting is done, ensure invest the ligation is conducted per standards and disciplinary measures applied against the perpetrator.</td>
<td>Thorough follow up of reported SEA cases undertaken. SEA tracker with the status of reported cases provides evidence of reported cases and all actions taken on each case.</td>
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VII. Analysis

The 2023 SEA risk assessment exercise is a comprehensive review of the SEA risk patterns to review the relevance, effectiveness, efficiency, and sustainability of the existing mechanisms to address SEA in Gedaref state, particularly considering the recommendations of the 2022 SEA risk assessment. The desk review noted a vigorous PSEA coordination mechanism that enabled an informed picture of relevant issues and allow stakeholders to work together on an evidence-based action plan. Strengthened coordinated approaches to identify and address SEA continues to be vital in preventing SEA.

Respondents noted existence of SEA risks related to employment, goods, and services due to limited livelihood options and poor economic status of refugees, leading to negative coping strategies including transactional and survival sex. Limited access to education, lack of awareness on available free services and alcohol consumption were highlighted as risk factors, aggravated by the current conflict situation that has seen a sharp rise in prices of essential commodities and overall scarcity of basic items. As such the mechanism to address SEA remains relevant.

While 77% indicated awareness of SEA reporting channels, 23% were not aware of such channels. The desk review confirmed existence of SEA reporting mechanisms through women desks, suggestion boxes, protection desks, reports to humanitarian staff and protection hotlines. Some 16% of the respondents registered concerns on confidentiality of the existing reporting mechanism, while 90% indicated preference for face-to-face SEA reporting, implying a considerable level of trust in the humanitarian staff involved in SEA response.

Cumulatively, 20% of respondents preferred reporting SEA through community-based mechanisms (16% community leaders, 2% religious’ leaders, 2% community dispute resolution) indicating a certain level of community leadership engagement in addressing SEA. Humanitarians could capitalize on the existing engagement to intensify awareness on SEA and forge increased community participation in SEA mitigation, prevention, and response to maximize the effectiveness of PSEA mechanism. This could also facilitate addressing impunity, reported by 15% of the respondents; and strengthening social cohesion and protection mechanism at community levels.
In terms of efficiency, the assessment noted several issues on the overall referral pathways including quality of services, community perception of services (15% noted sometimes service is delayed, 7% noted that sometimes it is unavailable), and barriers to access (25% language barriers, 6% referral system unclear, 8% cannot afford to buy credit to access protection hotlines). Managing SEA is complex due to a combination of factors at different levels: individual, household, community, and institutional. As such, services should contextualize concerns from diverse groups, including adolescents who noted their SEA concerns are not taken seriously, health care and psychosocial needs of SEA survivors, legal counselling, and specific measures to enhance survivors’ safety and security. 48% of the respondents voiced concern on the transparency and fairness of the recruitment process, calling for agencies to address this concern.

While the desk review indicates a system for tracking response to SEA has been established, 12% of the respondents’ noted feedback was not given as expected, calling for a strengthened mechanism to ensure proper feedback within confidentiality.

26% recommended intensified sensitization on SEA, a key factor in enhancing awareness of SEA key principles, reporting mechanisms and modalities to enable systematic identification and prevention of SEA risks.

The desk review noted a healthy PSEA coordination mechanism that enabled an informed picture of relevant issues and allowed stakeholders to collaborate on an evidence-based action plan. Strengthened coordinated approaches to identify and address SEA remain vital in preventing SEA.

The assessment points to a need for considering broader social welfare issues and appropriate support to survivors in SEA preventive action. This includes providing increased access to livelihood and education opportunities, implementing programs targeting the youth, and strengthening accountability to the affected populations by ensuring effective communication channels and community participation.
VIII. Recommendations

The assessment provides insight into SEA risks, protection systems (prevention, mitigation, and response), and refugee access to the system. It points out the need for specific action to strengthen the already established mechanisms for preventing and responding to SEA, to ensure compliance with SEA safeguarding standards, and improve protection systems.

<table>
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<tr>
<th>Outcomes</th>
<th>Prioritized actions</th>
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<tbody>
<tr>
<td>**Outcome 1</td>
<td>Stakeholders management**</td>
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<td>**Outcome 2</td>
<td>Safe and accessible reporting**</td>
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<td>▪ Strengthen SEA reporting and referral mechanisms.</td>
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<td>**Outcome 3</td>
<td>Survivor-Centric assistance**</td>
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<td>▪ Strengthen SEA reporting and referral mechanisms.</td>
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<td>▪ Ensure timely response and feedback to reported SEA issues, according to SEA standards.</td>
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<td>▪ Ensure adequate safeguards for survivors.</td>
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<td>▪ Strengthen linkages with CP/GBV subsectors.</td>
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<td>▪ Consider broader social welfare issues and appropriate SEA preventive action support for survivors.</td>
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<td>**Outcome 4</td>
<td>Coordination and networking**</td>
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<td>▪ Mainstream PSEA in other sector activities.</td>
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