

## Terms of Reference for the GBV Sub-Working Group (Refugee Response Coordination Moldova)

### I. Background

#### Needs analysis (as of March 20, 2022)

A significant proportion of persons arriving are women-head of households, single women, adolescent girls, older women, who are at **heightened risk of GBV**. This includes increased risks of conflict-related sexual violence, trafficking for the purpose of sexual exploitation in the context of forced displacement in addition to potential risks for sexual exploitation and abuse by humanitarian workers, border guards and uniformed forces as well as pre-existing and increased displacement related risks of intimate partner violence. Risks of GBV are increased in the context of **informal shelter, reception and transit facilities, refugee accommodation centers, private arrangements for transportation** from the border to transit facilities and onward to other countries. Targeted information, awareness raising and counselling, safe spaces for women, girls, LGBTIQ+ persons to facilitate survivor-centred and safe disclosure, and safe access to case management and specialised services for survivors through established referral pathways, including those existing at national level are immediate key priorities. Currently available services and networks to support GBV survivors are not adequate to the needs, considering the continuing increase of arrivals. Access to specialized health care, including clinical management of rape and IPV, and psychosocial support are also lacking, including due to lack of information and counselling.

#### Response strategy and priority

There is a significant need for **live-saving specialized GBV prevention and response programming**, including clinical management of rape, referral pathways and Standard Operating Procedures (SOPs), safe entry points for disclosure, safe spaces and the provision of psychosocial support as well as community outreach and awareness raising. Effective GBV coordination and interagency planning ensuring coherent and efficient multi-sectoral interagency action will be prioritized. Conducting regular gender and trends analysis will be essential to continue to monitor and anticipate the needs. Particular attention will be paid to GBV risk mitigation across all sectors, in particular border crossings, reception centers, Refugee Accommodation Centers (RACs), transit points and transport hubs, private accommodation and transportation and cash distribution. The provision of dignity kits, as well as cash, will be important and the interagency coordination will emphasize this. Supporting existing national systems to increase capacity and available services, including through capacity development, adapting and expanding services and reducing access barriers, will be at the core of the response. Training of frontline staff and service providers on safe disclosure and referrals, as well as Code of Conduct in addition to strengthening specialized services will be essential. Working closely with local actors and in particular women-led organizations, including those led by refugee women and girls is another priority.

#### Coordination modality

The GBV Sub-Working Group is part of the Refugee Coordination Structure under the Refugee Coordination Model, which provides the overarching framework for coordination.

### II. Objective

The GBV Sub-Sector Working Group (GBV SWG) is a coordination body with the objective to strengthen GBV prevention, risk mitigation and response in emergency settings and works to facilitate multi-sectoral interagency action. It aims to ensure coherent, coordinated and effective GBV prevention, risk mitigation

and response approaches through the mobilization of relevant government agencies, international organizations, UN Agencies, national and international non-governmental organizations (NGOs), civil society networks, national refugee-led organizations, refugee women-led organizations. The GBV SS WG will deliver on the 6 core functions of GBV Coordination: support service delivery, inform high-level humanitarian decision-making, plan and implement sub-sector strategies, monitor and evaluate performance, build national capacity in preparedness and contingency planning and support robust advocacy.

The GBV SWG develops and implements the GBV strategy within the broader protection strategy and ensures integration of GBV into the Refugee Response Plan (RRP). The aim of the coordination is to identify and close gaps, increase predictability and consolidate capacities of actors. The GBV SWG ensures services are in place for multi-sectoral GBV response, GBV prevention strengthened and advocates for and supports the integration of GBV risk mitigation strategies in other sectors in line with the IASC GBV Guidelines. The GBV SWG coordinates with national coordination bodies and structures. It also ensures a coordinated approach with field level coordination mechanisms where applicable. The GBV Sub-Sector focuses on [\[enter target population and geographical area\]](#)

### III. Guiding Principles and Approaches

The members of the GBV SWG are guided by the Protection Principles.<sup>1</sup> The GBV guiding principles for GBV coordination and programming are: safety, respect, confidentiality and non-discrimination. Application of these principles at all times is mandatory. They serve as the foundation for all humanitarian actors when coordinating and implementing GBV-related programming. Programming and coordination adheres to the human rights-based and community-based approaches. Everyone directly or indirectly engaged with survivors must ensure a survivor-centred approach, and the following guiding principles<sup>2</sup>:

- Respect by treating survivors with dignity, ensuring their participation, and respecting their decisions
- Confidentiality by respecting survivors' right to privacy and ensuring that any information about them should only be shared with their informed consent, and in line with data protection principles
- Safety of the survivor and others, such as her/his children and people who have assisted her/him, being of primary concern at all times
- Non-discrimination by treating everyone based on their needs alone.

### IV. Core Functions (select all that applies and add if appropriate)<sup>3</sup>

Responsibilities of GBV Sub-Sector Working Group members include but are not limited to:

- a. [Coordination platform, Assessment, Decision and Planning processes](#)
  - Provide a platform for sharing information, coordination and support on activities, gaps and immediate needs
  - Coordinate GBV activities and act as advisory body for all newly initiated and ongoing GBV activities to ensure complementary programming and avoid duplication
  - Conduct specific GBV needs assessments and gap analysis to inform priorities and identify gaps, including in service delivery, engage in field missions and ensure inclusion of GBV considerations in planning and implementation of interagency assessments

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<sup>1</sup> Humanitarian Charter and Minimum Standards in Humanitarian Response

<sup>2</sup> GBV Minimum Standards, supra note 15, pp. xi; 2-9

<sup>3</sup> At the onset of an emergency, TORs may focus on urgent responsibilities and can be reviewed after 6 months

- Liaise with relevant working groups and other relevant bodies to ensure that GBV issues are integrated into the emergency response efforts, including refugee response plans, strategies, and appeals
- Inform higher level decision making in line with the RCM and contribute to planning processes such as the RRP
- Engage with the PSEA network to ensure PSEA is mainstreamed in during planning, policy development, and programming

#### b. Prevention and response

- Conduct and regularly update a service mapping and relevant actors engaged in GBV response
- Establish and update GBV Standard Operating Procedures and referral pathways
- Advocate for safe and ethical collection, management and dissemination of case management data according to global GBV information management standards, including establishing Information-Sharing protocols (ISPs)
- Support partners to ensure safe and ethical referral and case management systems are in place to enable survivors to access services that address their physical, emotional, psychological, social, legal and protection needs
- Strengthen the technical capacity of service providers and community-based structures in safe and ethical referral and GBV response
- Develop communication materials to facilitate access
- Coordinate awareness-raising and information sharing activities on GBV
- Promote and coordinate GBV prevention activities
- Support monitoring and evaluation frameworks for the GBV prevention and response (including 5Ws reporting)
- Work closely with the PSEA network co-chairs to ensure a harmonized approach to prevention activities and support of victims/survivors

#### c. Capacity Development and Technical Guidance

- Ensure that applicable inter-agency GBViE minimum standards are applied
- Assist in providing and creating relevant tools
- Provide technical support, guidance and training (including to national authorities, NGOs, local organizations as well as other sectors on risk mitigation)
- Coordinate and support training, capacity building, and technical support with regards to prevention and response to GBV

#### d. Advocacy

- Collect and raise GBV issues and trends regularly to inform the GBV sub-sector's advocacy strategy
- Advocate for designated funding for prevention and response to GBV.
- Develop and disseminate key advocacy messages on GBV response and risk mitigation in the refugee response crisis
- Coordinate the planning of joint advocacy activities
- Deliver systematic leadership on GBV in strategic decision-making and advocacy fora at all levels by coordinating with a wide range of partners including donors and government counterparts, to ensure that GBV services are recognized as life-saving and prioritized in funding decisions and response planning

## V. GBV Sub-Working Group Structure

### a. Leadership Arrangement

The National GBV Sub-Sector will have a co-leadership structure of [UNHCR and Government/UNFPA/NGO Women-led organizations/refugee-led group](#). UNHCR as global lead on coordination in refugee setting is responsible for supporting the GBV Sub-Sector in line with the refugee coordination model. A Co-chair will be elected from amongst members of the GBV SWG on a six months rotational basis.

The co-chairs will oversee the development, endorsement and implementation of the GBV Work Plan, ensure close and effective collaboration with other working groups and represent the group and the protection working group.

### b. Secretariat

The co-chairs will jointly serve as secretariat for the GBV SWG. The co-chairs will agree on a division of labor in providing secretarial support and in implementation of coordination work of the GBV SWG. Both UNHCR and UNFPA will appoint/designate staff to undertake or support the coordination structure. The secretariat will follow up on decisions of the GBV SWG as well as coordinate and implement and report on the Annual Work Plan.

### c. Membership

Membership is only recognized for each organization that has formally expressed interest to join the GBV SWG and follows GBV guiding principles. Membership is open to all organizations working on prevention and response to GBV. National NGOs and local organizations, including and in particular those led by women and refugees, are particularly encouraged to participate and contribute to the effective functioning of the GBV SWG. Member organizations should identify primary and alternate focal points who will regularly attend the GBV WG meetings.

## VI. Arrangements for meetings

The GBV Sub-Sector will meet every Friday at 14:00 to 15:30 with an on-line/in presence hybrid modality. "Ad hoc" meetings may be called by the Co-Chairs, or at the request of other members of the GBV SWG, when this is considered necessary to address urgent issues.

A draft agenda will be circulated to members at least one day initially before the regular meeting, giving the members the opportunity to suggest additional agenda items.

Draft minutes of meetings will be circulated within 3 days of the meeting.

## VII. Amendments

This TOR is a working document and may be altered to meet emerging needs of all members by agreement of the majority of the members. However, it is recommended to be reviewed every six months.

For further information regarding the GBV Sub-Working Group please contact:

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