

GBV SWG Meeting Minutes 18 March 2022

Online

Chairs: UNHCR & UNFPA

Partners present: 23 partners (from LCA, La Strada, National Coalition “Life without Violence”, IRC, OHCHR, OSCE, UNICEF, UN Women, WHO, IOM, UNDP)

Agenda:

1. Introduction
2. Tour de table
3. Update from last SWG
4. Updates on trends
5. GBV SWG ToRs
6. Presentation on Referral Pathways, protocols and services (TBC)
7. Priority actions for the SWG
 - a. 5W mapping – individual agency
 - b. Referral pathways
 - c. Coordination on assessments and safety audits
8. RRP indicators
9. Contact List
10. AOB

Agenda items	Discussion	Action points
Introduction	<ul style="list-style-type: none"> • Re-emphasized focus on purpose orientation and partnership 	
Tour de table	<ul style="list-style-type: none"> • Introductions 	
Updates from last SWG	<ul style="list-style-type: none"> • Minutes of every SWG’s meeting are available here. UNHCR overview on RRP process • Submissions on specialized GBV programming 6 (UNFPA, UNHCR, UN Women, UNDP, La Strada, Casa Marioarei) • 2 submissions specific on supporting integration of GBV risk mitigation components (IOM, DRC) • Gap: WGSS • Submission deadline passed, revision of RRP will take place in mid-term • Attempts to capture local actors as much as possible in the beginning of the emergency phase, process will evolve • Priority to agree on GBV inter-agency indicators and work collectively on the key gaps and division of work 	

	<ul style="list-style-type: none"> UNFPA: including NGOs in response and finding solutions to include everyone. We had to be quick and stretched to absorb everything, but we will accommodate. 	
Updates on trends	<ul style="list-style-type: none"> Presentation by UNHCR, see here: 2022.3.18 UNHCR figures Moldova.pptx In <u>second wave of refugees</u>, people are “extremely traumatized” and with much less or no financial resources, some stayed more than a week in basements under shelling, different than during wave 1, many arrive without a plan Higher proportion of specific needs (incl. PwD with accessibility needs) Several partners confirmed and highlighted the <u>high risks of trafficking</u> high (transport and accommodation, border and social media) Traffickers are well organized (false IDs, engage women, circumvent triggers, female etc.) Recommendations: <ul style="list-style-type: none"> service providers and volunteers to be trained on trafficking reinforce security. monitoring at hot spots border, RACs and in informal transport and accommodation Information sharing and awareness raising Availability of trafficking hotline managed by the MoLSA Availability of accessible, timely and inclusive information is key. IOM <u>trafficking materials</u> developed in partnership between IOM Ukraine and Romania (including La Strada hotlines), prevention activities, support on investigation for border police, consolidation of national referral pathway UNHCR social media analysis and campaign – need to coordinate information vis-a-vis communities and other protection groups Partners request joint and <u>coordinated approach to communication materials (including on trafficking)</u> <ul style="list-style-type: none"> Organize joint meeting on communication with communities materials UNHCR, LCA security at Palanca improved, more buses, but still risks (in particular re informal transport at border) Need to coordinate information in all sites and awareness raising Support requests by refugees from national GBV partners on psychological and medical support, <u>gaps identified in CMR and how to access it</u>, need to strengthen coordination between health and social services (MoH and MoLSA) <ul style="list-style-type: none"> Follow up with health WG and UNFPA – on gaps in CMR, contraceptives, PEP Require involvement of MoLSA and closer coordination with MoH and MoLSA 	<p>Initial meeting to coordinate activities and needs on trafficking under the Refugee Response (UN Women, UNHCR, IOM, La Strada, ILO) - <i>initiated</i></p> <p>To join dedicated meeting on trafficking, contact Constanze Quosh: quosh@unhcr.org</p> <p>UNHCR, IOM, La Strada (potentially with volunteers) coordination on info materials</p> <p>UNHCR follow up with Health WG (WHO) on CMR needs (on agenda of last Health WG and flagged during RRP review) and coordination with MoH – <i>initiated</i></p>

	<ul style="list-style-type: none"> • Need for <u>site / area specific service mappings and RPs</u> • There are still areas and services not covered • Review 5 W, identify gaps, reorient organizations under RRP and otherwise (UNHCR / co-chairs) <ul style="list-style-type: none"> • Growing <u>fatigue among volunteers</u> • <u>Volunteers and non-volunteers</u> cannot always be differentiated • Systemic registration and visibility of volunteers <ul style="list-style-type: none"> • Movement to Transnistria (assess GBV services in that area as well) <p>Key materials:</p> <ul style="list-style-type: none"> • CMR Protocol for Moldova <ul style="list-style-type: none"> • GBV pocket guide for non-GBV specialists should be translated and disseminated asap. In the meantime: Russian version 	<p>UNFPA (UNHCR) to follow up with counterparts on concrete information and focal points for CMR Referral pathway</p> <p>UNHCR to reach out through the Refugee Coordination Forum to discuss MoLSA role in coordination</p> <p>All members: Coordinate site-specific safety audits.</p>
GBV SWG ToRs	<ul style="list-style-type: none"> • To allow new members to review the SWG ToRs, <u>deadline is extended to Wed. 23 March.</u> 	<p>All members: Review before the deadline next Wednesday</p>
Priority actions for the SWG	<ul style="list-style-type: none"> • 5W mapping – to be filled in by individual agency (one line per activity, one line per location) • <u>Referral pathways</u>: high priority is site-specific referral pathways linked to services available. Referral pathways to build upon existing system referral cards (e.g., with Women Law Center and National Coalition Life without Violence) • <u>Comment on existing GBV referrals</u>: draft mechanisms in Russian and Romanian still under approval with the government, include multi-disciplinary teams to act as referral teams, several information and registration points, etc. All GBV survivors can access these services (depending location refugee centres, etc.). Need to discuss needs of the government (at the inter-ministerial Council), coordination, raise awareness. Sectoral protocols were developed to inform on how to react in case of GBV and promote cooperation between local public authorities and ministries. <p>All GBV related assessments (incl. safety audits) need to be announced ahead of time to co-chairs to coordinate and avoid duplication.</p> <ul style="list-style-type: none"> • <u>Coordination on assessments and safety audits</u>: different organizations interested in safety audits in different locations. We need to harmonize this while identifying site-specific issues and formulate specific recommendations, e.g., in terms of access, accommodation and security. We need to be specific in our security requests to authorities. 	<p>All members -let us know if you want to join dedicated, time bound task force on referral pathways - contact the co-chairs by Thur COB March 24 kinderbaeva@unfpa.org, dakkak@unfpa.org, quosh@unhcr.org</p> <p>All members: Share if any planning of assessment to ensure coordination / avoid duplication</p> <p>All members: Register planned, ongoing, finalized assessment in the interagency assessment registry https://enketo.unhcr.org/x/xC1FWVfM</p> <p>UN Women to share draft table (still under approval decision of 4 ministries parts of the response (<i>including MoH, MoI, MoLSP</i>))</p>

	<p>⇒ agree to use the interagency tool and inform co-chairs to coordinate who does what where since at least for border and RACs safety auditing is already implemented, need to avoid duplication</p>	<p>UNHCR to share draft safety audit / site level protection monitoring tool for comments (see email) Dummy version here https://enketo.unhcr.org/x/gtlqYPqD For comments, contact Yasemin Sener senery@unhcr.org, Constanze Quosh quosh@unhcr.org by COB Friday March 25</p>
RRP indicators	<ul style="list-style-type: none"> • Indicators will be shared tonight (Friday 19 March). • Need to select 2 indicators to measure progress of our GBV SWG intervention/actions. • Indicators are (at least) age and gender disaggregated. 	<p>Review indicators and provide feedback until Monday 21 March</p>
Contact list	<ul style="list-style-type: none"> • Contact list is on Share point– no objection to share info received 	
AOB	<ul style="list-style-type: none"> • Clarify terminology GBV, PSEA, CRSV, trafficking • Interagency Share point shared SWG folder created • Weekly GBV SWG reporting for the interagency weekly updates. Each lead provides inputs. • Translation will be available next week, if needed, please indicate to co-chairs 	<p>All members: provide input to weekly updates.</p> <p>All members: Please inform co-chairs if interpretation is needed for the SWG meeting</p>

Next Meeting: 25 March 2022, 14:00