



GBV SWG Meeting Minutes 28 April 2022
Online

Chair: UNHCR & UNFPA

Partners present: ActionAid, IRC, UNHCR, UNFPA, Memoria/PEG, OHCHR, UN Women, Coalition Life without violence, IFRC, HIAS, Voice Amplified

Agenda:

1. Introduction
2. Safety Audit assessment plan (UNHCR, UNFPA)
3. Presentation from the Collation Life without Violence
4. Referral pathways update (UNFPA)
 - Orientation sessions
 - Joint community information and awareness materials review
5. AOB

Agenda items	Discussion	Action points
1. Safety Audit Assessment plan (UNHCR, UNFPA)	<ul style="list-style-type: none"> - UNHCR and UNFPA will conduct a GBV safety audit in Moldova - A Safety audit toolkit was presented a month ago at the GBV SWG by the global UNHCR Expert <p>Recap on Safety Audit (SA) and what we are planning to do:</p> <ul style="list-style-type: none"> - Adapting a toolkit for GBV SA to the refugee response context in Moldova; - Tool includes guidance on how to conduct individual assessments; individual data collection tools and data analysis tool. - This is a joint initiative between UNFPA and UNHCR which will be coordinate through the GBV SWG; - Adapt the approach to the local context here and approach is engaging other humanitarian sectors as we are looking at 3 main goals under the safety audit: <ul style="list-style-type: none"> - Identify GBV risks among the refugees in different settings; - Understand response needs what are the access services, barriers challenges; - Share the adapted tools so that they can be used by others - We are looking at the following locations: RACs, 2 host community locations, 2 	<ul style="list-style-type: none"> • UNHCR and UNFPA will share all the information and are open to any suggestions and engagement in facilitation, and or/data collection.

	<p>transit locations and looking at how to adapt the methodology for all these three locations such as: observational of the site walk; focus group discussions;</p> <ul style="list-style-type: none"> - We will work on the analysis of risks and concerns related to GBV among refugees and give some recommendations not only for GBV actors but for humanitarian actors from other sectors; - We will share with you the information and are open to any suggestions and your engagement in facilitation, and or/data collection; anyone reviews the tool, - Hope the results will inform the wider work we are doing; - Timeframe: data collection and analysis in May; review and share the results with a report in June; - 2 main workshops to be conducted: with the data collection team on how to conduct a safety audit; and a workshop on sharing the results one in person and one online. 	
<p>2. Presentation from the Collation Life without Violence</p>	<ul style="list-style-type: none"> - Presented the work of the Coalition during the Pandemic period. - Now almost two months and a few weeks into the refugee response - Have some findings and conclusions on how we managed in the crisis and which was a new experience for us; - What we did as a Coalition: - Established an emergency fund with criteria of being flexible, fast with minimum bureaucratic and technical conditions; focusing on local organizations and their needs; adjusting funds to changing realities; - Fundraising for Coalition as a network, advocacy and donor relationships; - Sub-granting and /or direct transfer to the local NGOs; support in grant proposal and application to the donors; - Set up a crisis unit with management and secretariat teams; there is a clear division of labor among the members of this crisis unit; - doing a continuous needs assessments of refugees to collect data from the ground; - Close partnership with other organizations working on refugees women and children issues; - Internal assessment to evaluate what we need in different stages, what to include in the applications; - Resilience building on specific subjects: received sessions on how to work with traumatized children, how to collect data, how to support well-being/self care that was delivered by our partners from Romania. 	<ul style="list-style-type: none"> • GBV SWG in coordination with Coalition will organize a separate discussion related to the assessment results and needs of the national NGOs.

- Selfcare is an important but neglected issue, so we strategized a self-care program as the workload increased three times.
- We have emergency funds: for 15 member NGOs, and helped other NGOs which are outside of coalition as well.
- **Directions:** humanitarian support, procurement, distribution and this includes support from the diaspora. (special food needs, diet food, heating equipment, special medicine, services, covered services, essential services: shelter, transport, catering. Specialized services for children and teenagers, daily centers from municipality. Individual and group counselling). We covered the most urgent needs of refugees
- Financial assistance for families: developed methodology on how to calculate the multi-needs compensation, developed surveys for collecting needs, several sessions on working on financial assistance, respected confidentiality and data protection. 25 families and 250 persons received financial assistance. 7,000 women were assisted and supported during this period.
- 100.000 usd, 80% utilized. Next week will have spent all. Planned for a longer period however funds will be finished in May.
- Will deliver a summary of the activities by the Coalition and share next week.

Questions:

- **OHCHR:**
- Does this Emergency Fund include such organizations that represent as well the Romani people or people with disabilities?
- **Coalition:** Yes, they are represented as well the people with disabilities, for example "Fiecare contribuie pentru schimbare", location in Criuleni, where refugees are accommodated. We did not work with the organizations with the Romani women, but we have worked with big groups of Romani people. We have accommodated them at Vatra, Ghidighici and Ialoveni. The first group that we had was a group of 20 Romani people, we have paid for them, for one week, for food, accommodation, transport, everything for children, because at that time two new babies were born. Our main principal is to work with all women, Romani, Ukrainian, Russian, women with disabilities etc.
- Regarding the medicine, so the answer is Yes, we have paid for medicines. Because everything that is from the Emergency Fund, we are doing things in two ways, which is direct transfer based on invoice or the second way is sub granting

the organization. There is one organization which works directly and is offering medical assistance here in Chisinau. This organization is offering services at national level and we have paid for simple medical investigations, not the complex ones. In this sense, it appeared a question how to deal with these services in the context of medical insurance, because these expenses are nominal and cannot be planned on the long term as a budget. As well we have worked with a coordinating group with MOH, when we had cases with cancer, so they were transferred to Romania and Austria.

- Regarding the LGBTBI community, on 28th of February we had accommodated in protection and assistance centers for refugees in Chisinau lesbian women, as well we had others accommodated in shelters and as well in the North. We are partners with the Gender DOC organization, the only organization working with the LGBTBI community.
- **UNFPA:** What support do you need? What international community and humanitarian community can do to help national organization, in terms of positioning, and in terms of supporting them to continue with their work and support in responding to the emergency including the capacity development.
- **Coalition:** The situation is changing and we hoped the war would have ended sooner. We have to think for six months ahead.
- We had small support from the national donor community, support from UNW and UNFPA, from implementing partners. We thought we would cover all needs for a more extended period; however the dynamic are different and the process is fast and demand is growing.
- One important thing is that it is quite challenging to work with small grants/small amounts of money. Having two, three, or four thousands euro is good to cover the essential needs, and this is a lot of work. I mean, either 2,000 euro or 20,000 euro are the same work with the conditions of a very bureaucratic system. There are many reporting requirements to the donor and this isn't easy.
- What we need from the very beginning and still need to have a flexible system for doing our work. To provide services, organize services for children, deliver services for women, do vocational training for women, and have stability. This is

	<p>not only related to financial stability but also emotional stability. To do our work as professionals and the majority of people working are high-level professionals. We have low paid jobs, for example 150 euro for the work of social assistance. 300 euro is paid per month for psychologists. We need to be emotionally safe and to be heard. There are lots of meetings organized by different agencies and we need to be heard if we do not participate then it means we should be heard. Well-being and self-care are critical for us. We are traumatized if we do not see any result from the work we are doing.</p> <ul style="list-style-type: none">- Humanitarian work requires to do a lot of procurement and this is in the context of high bureaucracy. Then you have to organize and deliver services, social services, and financial support; all these require lots of work.- We need learning or capacity sharing from women feminists that work with women refugees on trauma, sexual violence, and other types of trauma experienced by women.- We need to concentrate on peacebuilding and community mobilization; otherwise, the GBV will be a consequence. Tension between different people in the community if the state has no control. There is a threat and risk to cause violence if refugees will raise or speak out, so they keep a low profile in the host communities.- UNFPA: you highlighted the issue of expertise for co-creation and partnership. This is not one size fits all, by listening to you very carefully and thinking about what type of expertise is needed. From the side of UNFPA we will be as supportive as needed and we are aware that there is capacity in this country.- Coalition: Yes, and No. We do have the expertise and work in the field, and they do need funds to do the work.- UNFPA: Please let us know if you have identified this expertise and we can bring them on board to support your needs. It can be done quickly, and we can do it within the organization.- GBV SWG - UNFPA: The Coalition mentioned a very important point about the peacebuilding initiatives. Perhaps we should start exploring some funding opportunities in this regard.- GBV SWG - UNFPA: let's be mindful of the terminology around peacebuilding and social cohesion. What the Coalition describes is more about social cohesion between communities living together as tension can arise. Peacebuilding can	
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	<p>also refer to a stabilization phase within Ukraine and intervention in a post-conflict situation, based on future assessment of the security context. This would be a wider discussion. We as humanitarians, should be mindful that what we are doing is not increasing tension in the host community. Cash assistance in the community should not cause any tension. But definitely, building cohesion in the community is an important point.</p> <ul style="list-style-type: none"> - Coalition: I did not much focus on the working framework format with implementing partners. I sent an assessment and hope this assessment will be considered by donors working in the field we included in that document. These organizations need to work properly, and efficiently and help people. We can have a separate presentation and discussion about all topics, subjects, and issues we included in that assessment. Because this relates to approach, facts, funding format, transparency, bureaucratic matters, and how to work with small organizations. We have discussed this in-between of our coalition, and it is time for a separate discussion. And maybe to advocate what we put on the agenda. Please consider this to have a separate discussion. 	
<p>3. Referral pathways update (UNFPA)</p> <ul style="list-style-type: none"> - Orientation sessions - Joint community information and awareness materials review 	<ul style="list-style-type: none"> - UNFPA introduced Ms. Aban Sarkarati, Cash and Voucher Assistance (CVA) expert related to GBV/Sexual and Reproductive Health Rights (SRHR). - UNFPA CVA Expert: I am here to support UNFPA and its partners, considering that CVA implementation modality is in the response plan. UNFPA is committed to scaling up within the organization and focusing on the safe integration of CVA into a different aspect of GBV and SRHR response programming. Advocating as GBV interagency coordination body together with the other leaders can create a space for assessment and safety inclusion as its mandate key population in the emergency cash voucher assistance also consists of gender and GBV and protection risk assessment for multi-cash implemented by the humanitarian actors. UNFPA recently extended the use of CVA and diversified the model and objectives of the CVA across a number of contexts including in the Ukraine response. - UNFPA will mainstream CVA programming and support putting mitigation measures into the prevention of GBV risk in CVA programming as part of overall protection mainstreaming within CVA. Thank you very much for looking forward to more interaction with the team and partners. - GBV SWG-UNFPA: Referral pathway: 	<ul style="list-style-type: none"> • Contact GBV SWG bilaterally to inform about the any planned GBV activities to be reflected in the GBV activity mapping tool. • GBV SWG will share the referral pathways in Romanian and Russian shortly. • GBV SWG will share the outline for the SOPs development with the group, if anyone is interested in participating in the SOP development task force please contact the UNHCR/UNFPA co-chairs. • GBV SWG will improve communication in three languages Romanian, English and Russian.

	<ul style="list-style-type: none"> - Referral pathway shared with all. Thanks all for your engagement and four RP: Chisinau, Central, North and South parts of the country have been shared in the folder. Your please share with us your updates on the RP. - The rough draft of the designed version of the Referral Card has been shared in the group for your review. - Co-chairs conducted an intro workshop/orientation session, on Wednesday and the second one will be held on Friday. If you are interested in this session please inform other partners to attend. - Mapping of GBV interventions has been started and an excel sheet will be shared in the group. IOM, UNFPA, UNHCR and UNW have started to work on it. - We would like to bring local partners, and any organizations that are planning to do. The main reason is to improve access by refugees for services, inform planned activities, share or contact us bilaterally. - Comments: - Action Aid: Would the documents/referral paths be available in the Roma language? - GBV SWG- UNHCR: we are looking at the translation capacity we have, we also trying to make sure that beyond translation that the communication materials produced to the community are visual and not only depend on high-level literacy. Good point, we will check. - Action Aid: Good to know that you are also looking at different literacy levels. - GBV SWG- UNHCR: Would be good to present the gender assessment findings for the next meeting. - Memoria: Since the emergency started we provided psychological assistance and medical assistance to 800 refugee women. 2 weeks ago we have a situation form women form Ukraine and she was proposed for paying for rent with sex. This is a sexual harassment case from my point of view. We proposed to go to police but she refused because she does not trust this. We need to develop a referral system within our network. She does not speak well Russian, only Ukrainian. The language barrier did not allow us to explain where to go and how to get support. Nothing might happen if she reports. - GBV SWG- UNHCR: We promote and provide a survivor-centered approach. Link up different services and safe support, these are the goals of the referral pathway. We need a Protocol like a guide to manage the cases and link up with 	
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	<p>other services. How we can provide an immediate response, how we can reduce the risks should be in the Protocol.</p> <ul style="list-style-type: none">- GBV SWG- UNFPA: this is also related to our upcoming activity on developing the SOPs for frontline services and PSEA should be integrated.- Memoria: speaking about RACs we forgot about private families. We are working and doing interventions with regard to sexual violence, and domestic violence however, we need more information on how to deal with such kinds of cases as SEA. The refugees paid a high cost about 700 euro per month and this is a big price. Refugees do not have much access to information.- GBV SWG- UNHCR: this is really a key question. We need to address this collectively. The safe way of providing information, we do not put people at more risk. If anyone has good practices or ideas in the group that you are already doing and using in your outreach , especially women and girls living in host families, please do share any ideas you have.- Facebook video: https://www.facebook.com/watch/?v=1812230812306887 made by UNW and La Strada about sexual violence and this is a good practice to prevent violence, harm and abuse.- UN Women: This is a campaign product that was developed and linked to what was presented today under the Coalition work. The video is targeting Ukrainian women refugees who are crossing the borders to other countries including Moldova. It is in Russian, Romanian and Ukrainian. This will be a good guide for those who will report the cases of sexual violence because this is the main focus of the information.- We will have a larger campaign with UNHCR, IOM aimed at awareness-raising among refugees at RACs and including private accommodation. We need to look at the solutions and this is critical. How we link communities with services. All should be organized in a cohesive way.- With Coalition are working on an early warning brief which includes indicators of Conflict Related Sexual Violence adapted to Moldova. In a few weeks, a workshop will be delivered by UN Women HQ on basic knowledge on what it is and how to prevent it. We need to see how to seek support.- UNFPA: we need to be very careful about this issue and not put a survivor in danger. The safety and security of the survivor is important. It is very important	
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	<p>to abide by an ethical way of reporting and sharing information. As sharing information can put the survivor at risk. Definitely, we need to refer to the WHO guideline on ethics and safety of GBV data, and UNFPA and UNHCR we all worked for many years in this. When we share the information, we do not need to identify a person unless she wants to disclose her experience. Ethical issues are paramount. There are principles that we have to abide. There is a need to bring expertise that help us. The identity needs to be protected through a survivor-centered approach.</p>	
<p>4. AOB</p>	<ul style="list-style-type: none"> - GBV SWG-UNHCR: a following week to the next week, there will be a visit Special Representative to the Secretary-General of the UN on conflict-related sexual violence (CRSV). This is a very high-level visit at global level related to CRSV. What I can try and do if she is available to participate in our SWG meeting. What are the global commitment, global protocol of the UN, how we provide survivor assistance and how we can make sure the information is managed in an ethical and safe way are important points. Definitely, there is a lot of guidance on that. We can be engaged with OHCHR to prepare the presentation and need to discuss it more in-depth. - We would like our communication to be in the Romanian language as well. We will send the invitation in three languages and the Referral Pathway in Romanian will be also shared. - GBV SWG- UNFPA: SOPs with a specific focus on GBV in emergencies will be developed in addition to what already exists nationally for frontline service providers. Please let us know if anyone is interested to be part of the process. The outline will be shared with the group. - In addition, please encourage local NGOs to be part of this weekly platform so that to better coordinate and share information and support each other as the number of participants from local NGOs is really getting less and less. - IOM: indicated would be interested in supporting the development of the GBV SOP 	<p>GBV SWG co-chairs to meet with OHCHR and plan actions for visit of a SG Special representative.</p>

