

UNHCR Monthly Protection Update Sexual and Gender Based Violence (SGBV) September 2019

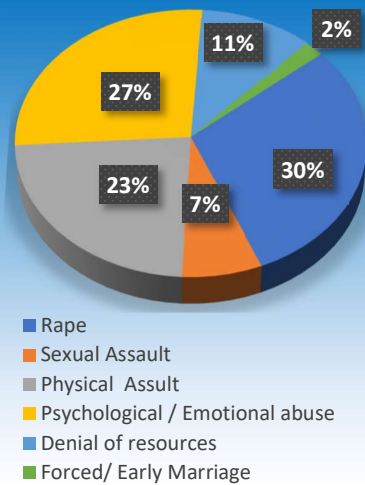


Key Figures

3643

Total incidents Jan -Sept

SGBV incidents Jan -Sept 2019



SGBV interventions January -September 2019

Interventions	Number	%
Safe House /Shelter	68	2%
Health/Medical Services	848	23%
Legal Assistance services	1368	38%
Psychosocial Services	3469	95%
Safety and Security Services	577	16%
Livelihood Services	628	17%



A men's group during an EMAP session in zone 5, Bidibidi settlement.

Key highlights

- 3643 (3097F/546M) SGBV incidents were reported between January and September 2019 in the refugee hosting districts. In September, 469(432F/37M) incidents were reported. There was an improvement in the time between incident and reporting in Arua as logged in the GBV Information Management System. Compared to August where only 10% of cases were reported between 0-3 days, 37% of cases in September were reported within 0-3days of occurrence. This is attributed to continuous community sensitization on timely reporting.
- PSEA:** Following the establishment of the PSEA Focal Point Network and training in Bidibidi in August, UNHCR convened the first meeting of the PSEA network in September. Participants from 13 agencies shared various actions taken since the trainings such as training of staff on PSEA, incorporation of PSEA messages into existing activities including radio programmes and gender programmes, reviewing internal procedures on PSEA as well as handling cases of SEA within their organisations. The network is embarking on focus group discussions (FGDs) with community members on Community Based Complaints Mechanism (CBCM).
- 33 sessions of the **Girls shine methodology** were conducted to address barriers to development and education of girls aged 10-19 in Arua. 835 girls discussed about life skills, healthy relationships, communicating choices, social and emotional skills and stress management. As a result, girls are learning how to control impulses, understand one's feelings and emotions, recognize healthy relationships and deal with challenges. In Bidibidi, 170 adolescent girls were engaged through the girl shine program where they were involved in a series of sessions covering topics relating to building trust, social & emotional skills, safety, visioning, health and hygiene and solidarity. These sessions empower girls and build on their potential to take charge of their own lives and ambitions.
- UNHCR monitored the operation of the **Women and Girls Centres (WGCs) of Imvepi Zone II**, which were recently handed over by CARE to OPM. Of the 3 WGCs visited, only one centre in village 19 was active with Child Voice activities of tailoring, psychosocial support and hair dressing. UNHCR held a meeting with OPM and IRC to discuss the handover of these facilities to UNHCR's implementing partner and continue with the provision of services and assistance to women and girls of zone 2.

- As of the end of September, 3155 women and girls accessed the **Women Centres of Imvepi and Rhino Camp Settlements**. The activities they engaged in include psychosocial group counselling, sensitization on SGBV and referral pathways, knitting, tailoring, bakery, hair dressing, music and drama. Also, 60 female refugees attended functional adult literacy classes (FAL). In addition, mobile group psycho-social support sessions were conducted in Arua reaching 523 women that otherwise would not be able to benefit from these activities because of limited mobility and long distances.
- In Bidibidi, 104 (24 new, 80 old) women and girls including survivors accessed the women and girls' safe spaces. They engaged in psycho-social support activities and experience sharing.
- In Rwamwanja, Zero Tolerance Village Alliance (ZTVA) award ceremonies were held in Kikurura zone for village A and B (under UNHCR funding) and in Base Camp IV (under Church of Sweden funding). 1056 (482M/574F) refugees were awarded certificates of completion for their six months training on ZTVA. The training is aimed at using the awarded beneficiaries to train other community members to eradicate SGBV in their communities thereby promoting community participation in their own protection. The sustainability plan is continuous monitoring by the SGBV Task Force to the specific communities.
- As of the end of September, 15 **EMAP sessions** were facilitated in Imvepi and Omugo, reaching 312 (208F/104M) individuals. 09 Sessions targeted women and focused on understanding violence against women, girl's safety mapping, ideal community safety planning while 06 sessions targeting men focused on introduction to EMAP, understanding violence and safety plan.

SASA! methodology



SASA! Community activists in Bidibidibidi receive communication materials

- The SASA! Rapid Assessment Data Collection was successfully completed on 25th September 2019 in Adjumani. All the planned (8) FGDs and 2805 individual

household interviews were conducted in the settlements of Boroli, Pagirinya, Maaji, Mungula, Olua, Nyumanzi, Ayilo, Elema and Olijji. The results will inform the readiness to implement the Action Phase which will be rolled out in 2020.

- In Bidibidi, 127 (74M/53F) Community Activists (CAs) were trained on SASA. The training sought to empower the CAs on SASA, explored the concept of change, circles of influence, power and violence against women. CAs were challenged to balance power in their relationships and transform community members to prevent violence against women and girls. Currently the community activists are engaged in asset mapping and mobilization. 300 copies of SASA! Communication materials were distributed to activists to support them in their outreach and awareness sessions in the community. In Yangani. 189 (102F/87M) PoCs were reached through door to door activism by SASA! CAs.
- On 18th September, a focus group discussion on SASA! targeting men between 25-60years was conducted in Kiryandongo with 16 males in attendance. During the discussions, it was highlighted that cash distributions were contributing to separation of families in the community. Shelter issues were also highlighted. As an action point, there is need for continuous awareness on proper use of money as well as awareness raising sessions on SGBV prevention of and response.
- In Imvepi, 169 individuals attended **VSLA sessions** on social networks and social support, participation in public life, leadership and elections. In Bidibidi, 227 women took part in VSLA group saving meeting activities, 235 women took part in the Functional Adult Literacy (FAL) classes, 106 participated in knitting, beading and tailoring while 77 took part in bakery. The activities are meant to keep women active and empower them with knowledge and skills necessary to improve their wellbeing.
- Furthermore, in Bidibidi, 510 backpacks and other scholastic materials (170 dozen of 96 paged books, 10 boxes of pens, 25 boxes of pencils, 34 boxes of white board markers, 200 pieces of manila cards among other items) were distributed to women and young mothers enrolled in FAL classes to aid in their learning process.

Coordination

- UNHCR and OPM continued to strengthen coordination of SGBV partners through organising SGBV Working Group meetings. During the Working group meeting in Kiryandongo, the PSEA work plan was adjusted and partners were encouraged to integrate awareness on the same in their routine activity plans. In compliance with the country SGBV/PSEA strategy, new members were encouraged to provide new focal points and alternates in consultation with their HR. Partners

were also encouraged to harmonize some of the activities on prevention and response to SGBV in the settlement and the mainstreaming of SGBV.

- On 17th September, Arua District Local Government (ADLG) with the support of Ministry of Gender, Labor and Social Development (MGLSD); the Office of UN Resident Coordinator and UNHCR convened the **Spotlight Initiative Country Programme meeting** attended by the district's technical and political wing, cultural and religious leaders, local and international NGOs, as well as the UN agencies that, together with UNHCR, are implementing the EU-UN Spotlight funds in Uganda (UNDP, UNFPA, UNICEF and UN-Women). During the meeting the District and the MGLSD presented an overview of the 4 years Programme (2019-2020), aiming at ending violence against women and girls (VAWG) and harmful practices (HP). The activities are being implemented mostly through partners, including the MGLSD, which received 40% of this joint fund to be shared with local governments. UNHCR also participated in the launch of the spotlight initiative in Kyegegwa district where it was agreed that there was a need to strengthen the district SGBV working group as well as develop a harmonized plan of action for all partners handling SGBV.
- On 26th September, UNHCR and OPM chaired a coordination meeting at Imvepi base camp with IRC, Child Voice (CVI), CARE and TPO to discuss the handover process and general operation of the protection house. CVI was formally granted authorization from UNHCR and OPM to take over the management of the facility. The meeting resolved that CARE will formally handover the protection house to OPM, that will assign it to CVI. IRC will continue case management for survivors brought to the protection house, while CVI will cover operational costs and conduct trauma-healing interventions. UNHCR will continue to provide training and mentorship to partners on how to run the protection house with the guidance of the existing SOPs.

Community participation in SGBV prevention and response

- In Bidibidi, 3273 (1,151M/2,122F) community members benefitted from outreach sessions with key messages on SGBV categories, causes, consequences and use of referral pathway. Additionally, three SGBV awareness sessions were conducted in villages 9, 4 and 8 of Zone 5 in Bidibidi reaching 306 (180F/126M) PoCs. Major topics covered included concepts of SGBV, drug abuse and SGBV, domestic violence and SGBV referral pathway. The sessions were conducted in partnership with the Police Child and Family Protection Unit- Yangani.
- On 4th September, 01 Focus group discussion was conducted at the Youth Centre in Kiryandongo

targeting elderly persons, 16(4M/12F) individuals were in attendance. This brings the cumulative number of sessions to 51 and individuals reached to 2990 (1010M/1980F). It was recommended that continuous awareness raising targeting children and parents on the importance of respect, staying in school and the referral pathways is vital.

- FGDs were also conducted in Ocea, and Odubu zones in Arua to generate opinions, experiences and feelings of women and girls of reproductive age (WGRA) for the BPRM end line assessment report. Girls expressed how uncomfortable they felt using reusable pads due to lack of storage bags especially for school going girls. They instead opt for disposable ones. Girls also highlighted lack of convenient washrooms moreover, mothers with heavy flows revealed that the kit is insufficient.
- On 24th September 2019, UNHCR participated in a community dialogue in zone 3 village 5 (Arua) organized by World Vision to discuss SGBV issues related to food, including SEA. The dialogue was attended by 59 (24F/35M) participants including residents of villages 4, 5 and 6 as well as representatives of UNHCR, OPM, IRC, WV and RWCs. The community acknowledged that domestic violence between intimate partners is vivid in the community and is often triggered by the sale of food and mismanagement. It was expressed by the community that the preferred method for reporting SGBV is to resort to RWC leaders to resolve the issues. Nonetheless, many survivors are remaining silent. UNHCR encouraged the community to report all cases of SGBV to partners, OPM and UNHCR either directly or through the community structures.
- As of September, 256 **awareness and sensitization sessions** were conducted in Arua settlements reaching out to 66839(33830F/33009M) refugees and host communities. The sessions were conducted by partner staff and community structures, including Gender Task Forces, Male Action Groups and SASA! Community Activists. The topics covered among others effects of child/ forced marriages, misuse of power as a root cause of GBV, dangers of alcoholism, girl child education, Sexual Exploitation and Abuse, Sexual and Reproductive Health Rights, Menstrual Hygiene Management, referral pathways and HIV as a consequence of SGBV.

Capacity development supported

- As of end of September, 55 community based facilitators and 48 block leaders were trained on SGBV core concepts and the referral pathway for Omugo zone. Additionally, 29 (17F/12M) GBV task force and community volunteers in Omugo undertook a training to improve on the quality of awareness and information sessions conducted at community level. In Lobule 77 (19F/58M) gender task force (GFTs), RWCs and Male

action groups (MAG) were trained on their roles and responsibility in SGBV prevention and response.

- A three days training on SGBV case management was conducted for new staff and volunteers reaching out to 12 (11F/1M) participants. Topics covered included key sectors of GBV response, case management, GBV guiding principles, types of GBV cases with special considerations, GBV Counselling skills among others.

Challenges

- Underreporting of SGBV cases remains a major concern due to a variety of factors including stigma, shame, family reactions and dissolution, perception of SGBV as a private matter, or lack of confidence in reporting channels. Most survivors remain silent due to fear of reprisals and/or mistrust on getting supported if reported.
- Limited access to basic necessities including sufficient hygiene kits leads to negative coping strategies that increase the risk of SGBV.
- Access to justice for SGBV survivors is still a gap with inadequate knowledge and support for legal processes, logistical support to police for timely case management support and rejection of medical examination (PF3 filled) by non-governmental health facilities. This is exacerbated by the lack of understanding of Host Country Laws by survivors who perceive the style of justice as non-responsive to their needs. Some Refugee Welfare Council (RWC's) have also been noted to be going beyond their jurisdiction and managing cases outside their limits which further confuses the access to justice process. There is need for capacity building training for community leaders on case management.
- Inadequate counselling space (outreach programme) for SGBV and other critical protection cases has been noted particularly in South West.

Strategy

- Using integrated programming to mainstream SGBV prevention and response into all sectors, in particular; shelter, WASH and child protection.
- Application of the SASA! Approach and the Zero Tolerance Village Alliance (ZTVA) to reduce the risk of SGBV in the settlements.
- In the Urban, UNHCR and InterAid Uganda continue to contribute to SGBV prevention and response through a multi sectoral strategy. However, stronger collaboration is required with some organizations such as JRS, RLP, CEDOVIP, ACTV and ActionAid Uganda

that provide services linked to SGBV in Kampala with their own funding.

- Refresher SGBV/GBV IMS training for the partner staff in the different locations are planned for enhanced SGBV data management.
- Awareness raising and advocacy within communities to address under-reporting of GBV and community responsibilities towards SGBV prevention and response.
- Training and capacity building of community-based committees/ groups implementing SGBV initiatives in community.
- Protection of refugees from sexual exploitation and abuse through intensifying community mobilization and sensitization.
- Improving outreach to refugees, including through mobile activities to ensure identification and safe referral of SGBV survivors and those at risk
- Strengthening key partnerships with UN agencies, NGOs, Government, and local communities to reinforce SGBV prevention, response and coordination mechanism.
- Promoting engagement of men and boys in SGBV prevention and response.
- SGBV prevention and response activities are pursued in close cooperation with UN agencies, NGO partners and the Government of Uganda. UNHCR works to improve access to quality services in SGBV prevention and response, including:
- Providing safe environments for women and girls through mass communication, community mobilization, and establishment of Women Resource Centres as well as listening and counselling centres.
- Strengthening existing specialized services for SGBV survivors such as psychosocial, medical and legal services and support survivors to the same, adopting a survivor centred approach particularly intensifying psychosocial interventions for IPV (Intimate Partner Violence) survivors who may fall vulnerable to a variety of mental health issues and remain hidden.

UNHCR implementing partners

Government of Uganda, Humanitarian Initiative Just Relief Aid (HIJRA), Danish Refugee Council (DRC), Lutheran World Federation (LWF), International Rescue Committee (IRC), Humanitarian Assistance and Development Services (HADS), CARE International Care and Assistance for Forced Migrants (CAFOMI) and American Refugee Council (ARC), Inter Aid Uganda (IAU)

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