GENDER EQUALITY
PROMISING PRACTICES
SYRIAN REFUGEES IN THE
MIDDLE EAST AND NORTH AFRICA
See these publications for additional UNHCR and partner promising practices related to gender equality:

UNHCR, *Age, Gender and Diversity Good Practices in the Americas – One step further, the methodology behind the practice* (UNHCR Bureau for the Americas, December 2015).


UNHCR, *Age, Gender and Diversity Best Practice Compilation* (UNHCR Bureau for the Americas, 2012).

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<td>LGBTI</td>
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<td>Post Exposure Preventive</td>
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<td>YMCA</td>
<td>Young Men's Christian Association</td>
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INTRODUCTION

“Gender equality refers to the equal enjoyment of rights, responsibilities and opportunities of women, men, girls and boys. Gender equality implies that the interests, needs and priorities of each gender are respected.”

UNHCR, Age, Gender and Diversity Policy (2011)

This report contains in-depth information on seven gender equality promising practices that are part of the United Nations High Commissioner for Refugees’ (UNHCR’s) response to the Syria crisis in the Middle East and North Africa (MENA). Over the last six years, UNHCR and partners have implemented numerous catalytic initiatives that seek to address specific gender-related protection needs and risks of diverse Syrian women, men, boys and girls, as well as drawing upon their existing capacities. It is now important to document these initiatives to ensure that our efforts, as well as lessons learned, will continue to be built upon in the interest of pursuing gender equality as an integral element of humanitarian programming.

This report aims to provide information and inspiration to UNHCR colleagues, partners and other international and national organizations working together with refugees and internally displaced persons (IDPs).
Building on the reports documenting age, gender and diversity (AGD) good practices in the Americas,¹ this report is the first in a series of regional documentation of gender equality promising practices. It contains promising practices from ongoing work with Syrian refugees in the MENA region, namely:

1. Urban refugee women's network – Turkey
2. Sector gender focal points network – Jordan
3. LGBTI youth group – Lebanon
4. Building capacity for protection of LGBTI persons of concern – Jordan
5. Mobile SGBV prevention and response services – Lebanon
6. Art therapy to prevent and respond to SGBV – Egypt
7. Emergency shelter for women and girls – Lebanon

For each promising practice, detailed information is included in order to enable strengthening, upscaling, adaptation and replication of gender equality promising practices (see Box 1).

**Box 1: Promising practice structure**

Each gender equality promising practice follows the same structure for coherence and comprehensiveness:

1. **Project overview** – summary of project name, location, partners, core objectives and activities.
2. **Context and needs** – country context, protection needs and risk, and process of assessment.
3. **Process and activities** – methodology and key activities of the project.
4. **Partners and resources** – partner organizations as well as human, financial and other resources.
5. **Participation and accountability** – participation of diverse persons of concern in the project as well as accountability mechanisms.
6. **Results** – outputs, outcomes and impact of the project.
7. **Lessons learned** – challenges in implementing the project.
8. **Recommendations** – practical advice for upscaling, adapting and replicating.
9. **More information** – key resources and contacts.

¹ UNHCR Bureau for the Americas, *Age, Gender and Diversity Good Practices in the Americas – One step further, the methodology behind the practice* (UNHCR, 2015). UNHCR Bureau for the Americas, *Age, Gender and Diversity Best Practice Compilation* (UNHCR, 2012).
Rationale

This report is developed in response to needs identified by the UNHCR MENA Bureau, as well as UNHCR operations around the world, to document and share promising practices on gender equality from the field. The 2016 UNHCR Review of Gender Equality in Operations, which analysed interviews and survey responses from 73 UNHCR operations, cites a high demand from UNHCR operations staff to document and share existing work on gender equality.\(^2\)

The MENA region is currently facing humanitarian crises and forced displacement on an unprecedented scale while continuing to demonstrate the space for improvement in global measurements of gender equality.\(^3\) In response to the Syria and Iraq crises, UNHCR and partners have created projects and programmes that seek to promote gender equality through targeted services to women and girls; supporting networks of women and lesbian, gay, bisexual, transgender and intersex (LGBTI) persons; preventing and responding to sexual and gender-based violence (SGBV); and building their own institutional capacity in these areas. This report is designed to ensure that UNHCR’s progress in developing more inclusive and equitable programming at the field level is actively identified, supported and shared.

This report also serves to promote the implementation of international, regional, United Nations (UN) and UNHCR policies related to gender equality, including:

- UNHCR Commitments to Refugee Women (2001)
- UNHCR Age, Gender and Diversity Policy (2011)
- Regional Approach to address Sexual and Gender-Based Violence in the Syria and Iraq Refugee Situations
- Regional Approach to the Protection of Refugee Children affected by the Syria Crisis

Methodology

In order to complete this report, the UNHCR Gender Equality Unit in collaboration with the UNHCR MENA Protection Service, recruited an experienced Arabic-speaking gender equality researcher. The researcher used the following methods to identify and document the promising practices:

- Establishment of criteria for qualifying as a promising practice (see Box 2).
- Requests for nominations of potential promising practices from relevant UNHCR staff, including SGBV focal points.
- Desk review of reports and other relevant documentation.
- Field research including semi-structured interviews and focus group discussions with UNHCR and partner staff and Syrian refugees, as well as meetings and field visits.

\(^3\) Oxfam, Factsheet: Women, Peace and Security in the Middle East and North Africa Region (OXFAM, 2016).
Box 2: Criteria for gender equality promising practice

1. **Relevance** – The project successfully addresses the problem, i.e. the project activities were the right ones to reduce/mitigate/transform the problem. The project is based on needs articulated by diverse women, men, girls and boys of concern.

2. **Impact** – The project has achieved its defined goals (objectives, outputs and outcomes) and it has promoted gender equality.

3. **Participation** – The project is participatory, involving diverse women, men, girls and boys in decision making throughout the project cycle, including through accountability mechanisms for feedback and complaints.

4. **Age, gender and diversity** – The needs, risks, priorities and capacities of persons of concern of different ages, genders and other forms of diversity are included throughout the project as well as ensuring their participation and access. This includes persons with disabilities and LGBTI persons. The project either integrates AGD or is targeting a specific AGD group.

5. **Sustainability** – The project has the ability or potential to continue after external funds end, i.e. its financial and human resource strategies include mobilizing national resources and involving national partners along with a clear exit strategy.

6. **Replicability** – The project has the potential to be scaled up and/or adapted and replicated in other contexts.

In addition, a validation workshop was held in Amman, Jordan on the 22 November 2016 bringing together 19 UNHCR and partner staff with international, regional and national organizations working on gender equality. The workshop provided a space to exchange information on key challenges and recommendations as well as a detailed peer review of each draft gender equality promising practice. The drafts were revised based on this feedback and then shared with the respective UNHCR operations and partner organizations for final review.

The documentation process had a few limitations and challenges, namely:

- Escalation of the Iraq emergency led to the cancellation of field research and inability to document promising practices in that country.

- Lack of accessible secondary data including baseline data and project monitoring, review and evaluation reports, making it difficult to assess impact.

- Competing demands and time constraints faced by UNHCR operations, especially in emergency contexts, led to delays and cancellations of some interviews and focus group discussions.

In response to these challenges, the researcher took the initiative to reach out to partners to schedule interviews and focus group discussions, conducted follow up phone interviews to obtain additional information, and included multiple rounds of review with operations to ensure accuracy.
1. Project overview

In 2015, Syrian refugee women in the Turkish city of Gaziantep established the Women’s Committee of the Future, with ongoing support from the national non-governmental organization (NGO) Association for Solidarity with Asylum Seekers and Migrants (ASAM). It is the first urban network of Syrian women asylum-seekers and refugees in the city. The 15 members of the network serve each other as a support group, as well as engaging in volunteer work to empower refugee women, increase Syrian refugees’ access to services and enhance their protection through advocacy, rights education and community-based campaigns. After its establishment, UNHCR began providing capacity building to the network members as well as supporting their activities.
2. Context and needs

In mid-2016, Turkey was hosting 3,005,434 refugees and asylum-seekers, 91 per cent of whom are Syrians who were forced to flee the armed conflict in their country.\(^4\) Gaziantep, which is located close to Syria, has seen the arrival of more than 350,000 Syrians, bringing its total population close to two million.\(^5\)

Refugees in urban settings in Turkey face a number of challenges: lack of access to information; language barriers; obstacles to registration, which in turn hinder their access to health and education; a dearth of livelihood opportunities; and occasional social tension between refugees and host communities. Women and girls also face gender-specific barriers to accessing education and the labour market as well as sexual and gender-based violence (SGBV), including child marriage and domestic violence.\(^6\)

Despite the prevalence of committees or networks for women in refugee camps, prior to this initiative there was no network of female Syrian refugees in Gaziantep. This is also the case for other urban contexts, where there may be less opportunities for refugee women to establish and participate in committees and networks.

3. Process and activities

In response to Syrian refugee women’s lack of a forum to discuss needs, share information and exercise community leadership, ASAM began hosting weekly tea hours in Gaziantep in 2015. The tea hours were informal gatherings that took place after the Turkish language classes provided at the ASAM Multi-Service Refugee Support Centre (community centre). Some 10 women attended the first gathering, but that number soon increased as women spread the word about the tea hour. Syrian women began to use the tea hour to get to know each other in an informal setting and discuss the issues they faced as female refugees in Gaziantep.

In addition to a female Arabic-Turkish translator, a female psychologist from ASAM’s community centre was assigned to support the tea hours to provide psychosocial support and assist with facilitating the discussions. The facilitator supports communication both with ASAM and the host community. She also observes group dynamics, ensuring that all members participate in the discussions.

At the request of the now 15 Syrian women participating in the group, ASAM organized a number of activities which enabled them to bond and build trust, including drawing, watching movies related to women’s rights, engaging in outdoor activities, and photography classes. As members of the group began to feel comfortable discussing problems faced within the Syrian refugee community, including child marriage and domestic violence, they reached out for more information and training.

The Syrian women participated in training on SGBV and volunteerism provided by ASAM and training on community protection mechanisms, codes of conduct and humanitarian principles provided by UNHCR. The facilitator also shared information and fostered awareness-raising discussions on volunteerism and child marriage.

The refugee women began to recognize their own ability to organize and take steps to tackle problems within their families and the broader Syrian refugee community in Gaziantep. For this reason, in March 2016, they decided to establish the Women’s Committee of the Future, with a registration process that entailed developing

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and signing their own terms of reference and code of conduct. This process of organizational development from the initial informal tea hours to establishing a network took place over a period of three months.

Once the network became independent, its members continued to build their own internal capacity. They invited women activists working on domestic violence and child marriage to share their experiences, and they attended various relevant training sessions. Today, ASAM continues to support the network through the provision of a facilitator and venue for meetings. To guide its work, the network drafts six-month plans of action and uses the WhatsApp messaging application to communicate outside of the weekly meetings. Communication happens in both Arabic and Turkish.

As part of its formalization, the network defined its principal objectives as to:

- Empower refugee women and the wider Syrian refugee community.
- Act as a bridge between the refugee community and humanitarian organizations.
- Undertake protection activities through information dissemination, advocacy and case referral.

Although the network’s activities change, depending on the needs that arise, it regularly organizes the following activities:

- Advocacy for the rights of refugees, including access to health and education for refugee children.
- Information distribution and education sessions to raise the awareness of Syrian refugees of their rights and entitlement to basic services.
- Community-based campaigns against early marriage, domestic violence and sexual harassment.
- Direct protection support to Syrian community members, including SGBV case referrals, and assistance with registration and access to health services.
- A day of solidarity and peaceful coexistence between Syrian and Turkish children through the exchange of drawings and paintings.

The women in the network are currently exchanging ideas on how to pass on beautiful/positive memories of Syria to the children of their community so they do not remember their homeland only as a place of war. The network is also preparing to implement a project that targets adolescent girls and teaches them to sew clothes as a way of promoting their social and economic empowerment and thereby providing some protection against child marriage.

In addition, the network has conducted a survey on Syrian refugees’ access to health services and education in Gaziantep. Network members designed the questionnaire, with support from ASAM, and collected the data from 158 refugees. ASAM is currently analysing the data and will issue a report soon.

4. Partners and resources

The establishment of a network for urban Syrian refugee women was supported by a female professional psychologist to provide facilitation and psychosocial support and a female Arabic interpreter, as well as a safe and convenient venue for regular meetings. ASAM has provided for these needs at its Multi-Service Refugee Support Centre. This community centre also offers non-food items and vouchers, health care, mental health and psychosocial support, legal counselling, case management, language classes, vocational...
training, art and music courses and other much needed services. ASAM has also paid for minor costs, such as for transportation to outdoor activities and for lunch, which has enabled network members to enjoy their time together and build trust. The community centre is supported by the International Medical Corps and UNHCR, with funding from Japan.

The network implements independent activities, such as community awareness raising on child marriage, as well as activities in collaboration with, and funded by, ASAM and UNHCR. To date, the women’s network has not received external funding for the organization itself, only financial and in-kind support from ASAM and UNHCR to undertake specific activities.

5. Participation and accountability

The network is now independent and run with the participation of all its members. ASAM’s provision of a professional facilitator has helped encourage all members to feel comfortable in expressing their views.

UNHCR provided training for the network members to help them develop their own code of conduct – including information on the principle of “do no harm”. After this participatory process, each member signed the code of conduct – which serves as a key organizational document and accountability mechanism for the network.

Prospective members are encouraged to attend network meetings as guests and, if their contribution is seen as positive, may be invited to join the network. An open voting system is established to facilitate this membership process.

The network members also discussed and collectively created their own terms of reference, which include the responsibilities and roles of the network members. When preparing to implement activities, members vote to assign specific members to oversee each planned activity.

To ensure continuous improvement of the network, members are encouraged to share any complaints or feedback with the facilitator and ASAM Multi-Service Refugee Support Centre managers for action. ASAM and UNHCR are responsible for taking action on any complaints raised and can call a meeting with the network to discuss any misconduct issues.

Age, Gender and Diversity Approach

The network is open to all women aged 18 years and older living in Gaziantep who wish to work for the benefit of the Syrian community, no matter what their background. Network members have varying levels of education. In spite of the age requirement, the network also accepts adolescent girls aged 16-18 as voluntary members, though they cannot become formal members until they are 18, which is when they can sign the code of conduct. There is currently one adolescent girl who is part of the network. The meeting venue is not fully accessible for women with disabilities, but they can still access the meeting room with help from members and/or ASAM staff.

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6. Results

“We think that the positive side of our displacement is that this Committee has empowered us as women to realize our rights and our capacity to make changes that affect our lives as women here and when we return home.”

Member of Women’s Committee of the Future

Though no independent evaluation has been conducted, according to interviews with network members and the ASAM facilitator, along with participant observation, the work of the network has had a positive impact on the lives of members, their families and communities, including:

- Strengthening network members’ empowerment, including self-confidence and understanding of their rights through mental health and psychosocial support, training sessions and other activities. This had led to women taking action to address the various daily challenges they face, including convincing their husbands and fathers of the value of their participation in the network.
- Supporting positive change related to gender equality in families and the community, as the network has become a strong voice for Syrian women in Gaziantep.
- Increasing advocacy for the rights of Syrians, leading to a positive impact on the lives of their families, relatives and neighbours, including greater access to health and education and prevention of child marriages.
- Creating an active, participatory, and effective network that is achieving its goals.

Although the impact on the wider community has not yet been assessed, activities conducted by the network seem to be contributing to bridging the divides between the refugee and host community. For instance, feedback from Turkish children showed that they were moved by the drawings and texts of their Syrian counterparts when both groups participated in activities to encourage peaceful coexistence.

Although at its start the network did not plan to become involved in case referrals, over time members began making referrals to ASAM and UNHCR for cases in their neighbourhoods which they believed required protection or medical assistance. As noted by one member:

“Most of us on the Committee are victims of early marriage. So it is both a community issue and a personal issue as well for us. Knowing about the negative impact of early marriage in our lives helped us a lot in leading awareness-raising campaigns against early marriage. We succeeded on many occasions in preventing such acts from happening.”

Sustainability

ASAM is gradually decreasing its facilitation role in the network in order to encourage the members to lead its meetings and activities independently. ASAM has observed the network’s capacity to manage some of its activities successfully in the absence of the facilitator. Nonetheless, ASAM views this process as a long-term transition that should be undertaken gradually.

Both ASAM and UNHCR are developing an exit strategy for their involvement with the network, ensuring that the process is carried out progressively in order to prepare the members for independent leadership without the two organizations’ technical support. In order to achieve this goal, however, the network requires a physical place and financial resources to build its capacity and manage its work autonomously.

In the future, to expand its role and related activities, it may be useful for the network to collaborate with, and to obtain support from, local governmental authorities and other host community organizations.
7. Lessons learned

The concept of volunteerism is challenging, especially in the socio-economic context of urban refugee settings. The women who are members of the network have encountered significant resistance from their husbands regarding their participation and their voluntary status. However, women have developed bargaining strategies and techniques to counteract this resistance by, for example, engaging their husbands in friendly discussions before meetings are held on the challenges facing Syrian refugees in Gaziantep and how the network is assisting them. One member describes her experience:

“Our participation in the Committee is full of challenges for some of us. The new realities that women are taking new gender roles and going out and participating in public life, like Committee meetings, pose a challenge to our culture. As for me, I have to engage continuously in negotiation and bargaining games with my husband in order to attend the Committee meetings. Other women on the Committee have the same problem.”

A lesson learned is that since participation in the network (which adds to refugee women’s existing workload inside and outside the home) is voluntary and members receive no compensation or payment, there is a need to prioritize social interaction and recreation through organizing regular social events.

8. Recommendations

This model of providing support to a refugee women’s network that is in the process of being established can be replicated in similar urban settings. In particular, tea hours or another form of informal space for interaction is a good practice for building the trust and open communication needed to support the creation of associations or networks. In addition, ensuring that the process of establishing the network was driven by the women themselves encourages both empowerment and sustainability.

It might be beneficial to link the network to existing local structures or organizations to strengthen connections between refugee and host community women and to ensure sustainability. Before initiating this type of process, it is always important to consult directly with diverse refugee women and to assess whether or not there are existing informal women’s networks already in place.

9. More information

UNHCR Turkey: turan@unhcr.org

ASAM
Email: sgdd@sgdd.org.tr
Website: http://sgdd.org.tr/
Facebook: https://www.facebook.com/asamsgdd/
Instagram: https://www.instagram.com/sgdd_asam/

ASAM has developed a short video and other materials on the network and its activities, which will be used to boost the visibility of the group and can be shared upon request.
SECTOR GENDER FOCAL POINTS NETWORK – JORDAN


Project Objective: Promote gender equality in the refugee response efforts in Jordan by strengthening the technical capacity of gender focal points, increasing inter-sector linkages and improving capacity and knowledge management.

Implementing Partners: UN agencies and NGO partners that are part of the Syria Refugee Response in Jordan.

1. Project overview

The Inter-Agency Task Force (IATF) led by UNHCR Jordan, in close collaboration with other UN agencies and partners, established the Sector Gender Focal Points Network (SGFPN) in 2014. The SGFPN is co-chaired by UNHCR and UNICEF and as of May 2017 has 30 members from 22 different organizations. The SGFPN includes at least two gender focal points from each of the eight sectors contributing to the Syria Refugee Response in Jordan and at least one member from each of the sub-sectors. The main objective of the network is to promote gender equality in the different refugee response sectors: basic needs, shelter, health, education, food security, protection, livelihoods and water, sanitation and hygiene (WASH). To meet this objective, the

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8 Organizations that are part of the SGFPN as of May 2017: ACTED, ARDD, CARE, CARITAS, Future Pioneers, Handicap International, ICMC Jordan, IFH, IRC, JEN, JHAS, JHCO, MECI, Medair, Mercy Corps, NRC, Relief International, Save the Children Jordan, Syria Relief & Development, UNICEF, UNHCR, UN Women.
SGFPN provides technical support, coordination, capacity building and knowledge management for gender equality. This strategic approach to building gender equality capacities from within the sectors helps ensure the continuity, accountability and sustainability of gender equality integration into humanitarian response plans and programming.

2. Context and needs

In mid-2016, Jordan was host to 721,369 refugees and asylum-seekers, more than 90 per cent of whom are Syrians who were forced to flee the armed conflict in their country.\(^9\) Jordan also hosts 2,117,361 registered Palestinian refugees who are provided protection and assistance by UNRWA.\(^10\)

It has been clear throughout the Syria crisis that cultural beliefs and practices, legal structures in countries of origin and asylum, insecurity and socio-economic pressures contribute to the perpetuation of gender inequality among Syrian refugees, primarily discriminating against women and girls. This inequality allows men to enjoy greater access to and control over resources while it puts barriers in the way of women’s mobility and decision making.

Gender inequality has an impact on Syrian women’s access to humanitarian services, including health, education and livelihoods, as well as increases their risk of sexual and gender-based violence (SGBV).\(^11\) When a comprehensive humanitarian effort was developed to respond to the Syria crisis in Jordan, the inter-agency coordination structure was seen to provide an opportunity to incorporate gender equality measures more systematically across all plans and programmes.

3. Process and activities

The objectives of the SGFPN are to promote gender equality in the refugee response effort and to ensure that diverse refugee women, men, girls and boys have equitable access to humanitarian assistance and protection. The 30 members of the SGFPN meet monthly and are drawn from UN agencies as well as national and international civil society organizations. The sector gender focal points, who may be men or women, come from a variety of professional backgrounds and possess technical expertise in many different areas.

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Focal point membership is voluntary; sector coordinators call for nominations when turnover of existing gender focal points happens, at which point new sector gender focal points can volunteer to participate. The sector coordinator then selects the sector gender focal point, based on the following criteria: (1) they are active members of respective sector working groups; and (2) they are committed to attending monthly SGFPN meetings and undertaking the necessary follow-up actions. Sector coordinators also look at levels of expertise, interest and motivation, organization, and other relevant factors when making their selections. Focal points are not necessarily at line management level, although the line managers within each respective

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\(^9\) UNHCR, [Population Statistics – Midyear 2016 Stats](https://www.unhcr.org/en-us/vhbo النساء والفتيات في البيئة والعلاقات المتعلقة بالصحة والتعليم وفرص العمل والحماية، وزيادة خطر العنف والعنف الموجه ضد الفتيات في Syrienne femmes et filles dans leur environnement et les relations liées à la santé, à l'éducation et au travail et de protection, et augmentent le risque de violence sexuelle et de violence liée au genre (SGBV).\(^11\) When a comprehensive humanitarian effort was developed to respond to the Syria crisis in Jordan, the inter-agency coordination structure was seen to provide an opportunity to incorporate gender equality measures more systematically across all plans and programmes.

3. Process and activities

The objectives of the SGFPN are to promote gender equality in the refugee response effort and to ensure that diverse refugee women, men, girls and boys have equitable access to humanitarian assistance and protection. The 30 members of the SGFPN meet monthly and are drawn from UN agencies as well as national and international civil society organizations. The sector gender focal points, who may be men or women, come from a variety of professional backgrounds and possess technical expertise in many different areas.

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<tr>
<th>Sectors:</th>
<th>Sub-Sectors:</th>
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Focal point membership is voluntary; sector coordinators call for nominations when turnover of existing gender focal points happens, at which point new sector gender focal points can volunteer to participate. The sector coordinator then selects the sector gender focal point, based on the following criteria: (1) they are active members of respective sector working groups; and (2) they are committed to attending monthly SGFPN meetings and undertaking the necessary follow-up actions. Sector coordinators also look at levels of expertise, interest and motivation, organization, and other relevant factors when making their selections. Focal points are not necessarily at line management level, although the line managers within each respective

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\(^10\) UNRWA, [Where we work: Jordan](https://www.unrwa.org/where-we-work/jordan).
organization must approve the participation of their staff in the SGFPN. The role of sector gender focal point is in addition to the normal workload of staff (who may include affiliated workforce members such as consultants).

The [Terms of Reference](#) for the SGFPN (see Annex 1) lay out the following responsibilities for focal points:

1. **Gender mainstreaming strategy**
   - Support the sector coordinators to mainstream gender into the sector response plan.

2. **Technical support within sector meetings**
   - Advocate for the inclusion of gender issues in project formulation.
   - Advocate for sector assessments to disaggregate data by sex and age.
   - Support the sector to interpret and analyse the different needs, risks and capacities of women, men, girls, and boys in order to shape the development of appropriate activities.
   - Support the inclusion of gender equality measures ([IASC Gender Handbook in Emergency Action](#)) in implementation, monitoring and evaluation.
   - Contribute sector information and analysis to ensure a more accurate understanding of gender equality measures in humanitarian action.

3. **Capacity development**
   - Identify the needs of colleagues for information and training in gender equality mainstreaming.
   - Support the sector coordinator to develop and deliver sector-appropriate gender equality analysis in programming workshops as well as training in the use of the [IASC Gender Marker](#).
   - Encourage and support staff in raising gender equality issues in the sector.

4. **Knowledge management**
   - Participate in the SGFPN.
   - Share information and experiences with the SGFPN members, contribute to SGFPN advice and guidance to elements of the Inter-Sector Working Group structure, and ensure that SGFPN messages are communicated regularly with all sector members.

In keeping with these areas of responsibility, activities of the SGFPN have included:

- In 2016, delivered annual training on [Gender in Humanitarian Action](#) to humanitarian workers involved in refugee response planning and programming in Jordan, benefiting 30 staff from eight sectors.
- Facilitating workshops to update sector-specific gender analysis.
- Assisting the protection and education sectors to develop and implement tailored impact indicators related to participation and gender equality.
- Supporting accurate and consistent usage of the [IASC Gender Marker](#) in Jordan Humanitarian Fund proposals, and encouraging sector organizations to incorporate the Gender Marker in all their work.
- Piloting a project on the revised [IASC Gender and Age Marker](#).
- Ongoing advocacy to mainstream gender equality in each sector.

In addition, the [SGFPN Work Plan for 2017](#) includes planned activities in the areas of coordination, resource sharing, capacity building, application of the [IASC Gender and Age Marker](#), monitoring and analysis (see Annex 2).

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**Gender Equality Promising Practices:** Syrian Refugees in the Middle East and North Africa (Geneva: UNHCR, December 2017) 15
4. Partners and resources

As previously mentioned, the SGFPN consists of a total of 30 gender focal points from each humanitarian sector and sub-sector. A variety of UN agencies and civil society organizations contribute staff to the SGFPN at any given time, thereby broadening participation and ownership of inter-agency coordination responsibilities beyond the most established actors.

The SGFPN does not independently raise funds or manage resources; instead, each UN agency and civil society organization has the chance to contribute resources by undertaking activities prioritized by the SGFPN. While the SGFPN’s specific focus is on humanitarian response to the Syria crisis, it also maintains contact and engages in coordination with such bodies as the Gender Theme Group of the United Nations Country Team (UNCT). The network has benefited from the support of the inter-agency Senior Gender Capacity (GenCap) Adviser.

The SGFPN’s work to promote gender equality has been greatly facilitated by supportive leadership at the Inter Agency Task Force, the Inter-Sector Working Group and sector levels. Senior leadership has made gender equality a priority, ensuring its importance in the entire humanitarian response.

5. Participation and accountability

The SGFPN is a highly participatory forum, where gender focal points can openly raise issues and discuss and propose joint activities. The SGFPN is accountable to the Inter-Sector Working Group as well as each sector coordinator. SGFPN members are also individually accountable for implementing their ToR (see Annex 1) and annual work plan (see Annex 2). All organizations active under the refugee response coordination structure are ultimately accountable to the Government of Jordan.

Cases of sexual exploitation and abuse identified within the various sectors may be referred to the protection from sexual exploitation and abuse mechanism via, for instance, the gender focal points from the protection sector.

Age, Gender and Diversity Approach

The gender equality training provided by the SGFPN takes into account different age, gender and diversity groups. While the principal focus of the SGFPN is gender equality, analysis frequently takes into consideration related elements of diversity, including, for example, age, disability and LGBTI issues.
6. Results

Since 2014, the work of the SGFPN has resulted in greatly improved gender mainstreaming in the work of UN agencies and civil society organizations providing humanitarian assistance in Jordan. This was achieved in part by building awareness of the different needs, levels of access and participation of diverse women, men, girls, and boys within Jordanian refugee programming.

Concrete results include:

- Gender focal points have benefited from increased authority in the sector meetings, especially if they are skilful in leading and coordinating gender mainstreaming and programming targeting women and girls within their sector.
- All sectors are currently conducting gender analyses, with the education and health sectors having completed the process (see More information below).
- Greater knowledge and skills on gender equality among humanitarian staff due to training initiatives.
- Piloting of various IASC gender equality tools, contributing to the finalization of the IASC Gender and Age Marker and a monitoring tool for the Gender Empowerment Measures.
- Improved gender equality mainstreaming in refugee response programme design, through support for the correct usage of the IASC Gender Marker in Jordan Humanitarian Funds proposals.
- Development and implementation of impact indicators related to participation and gender equality within the protection and education sectors.
- Increased documentation and analysis of sex and age-disaggregated data (SADD) in assessment, monitoring and evaluation, which has led to practical changes in programming.

For instance, as a result of monitoring and evaluation of SADD, the reasons behind the low participation of girls in camp child- and youth-friendly spaces, youth committees and volunteering committees have been re-examined. Protection actors have drawn on the findings to improve programming and take measures to address the barriers that prevent girls from accessing and participating in camp activities.

Similarly, actors in the health sector examined health-seeking behaviours among Syrian refugee women and used the findings to reduce the effects of the socio-cultural barriers that prevent some women from accessing public health units in the camps. This was done through the appointment of more female doctors and female health professionals, such as midwives.

Sustainability

The SGFPN is quite sustainable in that it does not rely on external funds or other resources, but on small contributions of staff time by many agencies. As such, sustainability is closely linked to the continued overall coordinated refugee response.

However, the frequent turnover of humanitarian staff and the departure of trained gender focal points has had a negative impact on the sustainability of SGFPN work. More efforts to ensure that the two slots for gender focal points per sector are always filled may be helpful in overcoming this challenge.
7. Lessons learned

Each sector is at a different level in terms of integrating gender equality into its humanitarian programming. While some sector coordinators demonstrate an interest in discussing, understanding and better implementing gender equality in their sectors, others have struggled to prioritize gender equality in the face of competing demands. Clear messages from the Inter-Sector Working Group and/or sector coordinators provide the incentive to incorporate gender equality measures into the needs analyses, activities and performance indicators of the respective sectors.

The SGFPN was created with only the limited participation of refugee women, men, girls and boys and other stakeholders, such as local women’s organizations and host communities. It would therefore benefit from fresh and sustained consultations with diverse refugees and local and national organizations working on gender equality.

While the SGFPN is able to support the integration of gender equality at the sector level, the full application of gender equality measures at the institutional level within the organizations involved in the network requires additional efforts.

8. Recommendations

The SGFPN is a good practice that can be replicated in other humanitarian contexts with sector or cluster approaches. However, clear support from sector coordinators and inter-sector coordination mechanisms as well as senior management within the relevant UN agencies and civil society organizations is critical for the SGFPN to be effective. In addition, before the start of an initiative like this it is important to consult directly with refugee women, men, girls and boys as well as host communities; national and local civil society organizations and others working on gender equality; and identify and consult with existing networks and mechanisms for communication and collaboration.

9. More information

UNHCR Jordan: joram@unhcr.org


IATF, Education Sector Gender Analysis (2016).

IATF, Health Sector Gender Analysis (2016).
1. Project overview

In 2015, lesbian, gay, bisexual, transgender and intersex (LGBTI) refugee youth, with the support of UNHCR and other partners, established an innovative LGBTI Youth Group in Lebanon. It was created to provide peer-to-peer support, a safe space for open discussion, life skills development activities and increased access to protection, assistance and services for LGBTI Syrian refugees. The group is led by LGBTI refugee youth, with the 15 initial members ranging in age from 19 to 29. The group has expanded to 35 members with UNHCR Lebanon’s support, including through accessing financial support in 2015 from the Global Youth Initiative Fund and in 2016 from the Multi-Donor Trust Fund for UN Action against Sexual Violence in Conflict. The group is now able to conduct more activities and increase its support for LGBTI refugees of all ages and nationalities, as well as Lebanese LGBTI persons.
2. Context and needs

In mid-2016, Lebanon was host to 1,049,364 refugees and asylum-seekers, 98 per cent of whom are Syrians who were forced to flee the armed conflict in their country.12 Lebanon also hosts 449,957 registered Palestinian refugees who receive protection and assistance from the United Nations Relief and Work Agency for Palestine (UNRWA).13 These numbers make Lebanon the country with the greatest number of refugees per capita in the world.14 The refugee population also includes individuals from Ethiopia, Iraq, Somalia, Sudan and some 30 other countries.15 The exponential increase in the number of refugees since the start of the Syrian conflict in 2011 has brought with it many protection challenges in an increasingly narrow protection space and a context classified as a protracted emergency.

In 2015, a focus group discussion with LGBTI Syrian and Iraqi refugee youth was conducted by UNHCR Lebanon and a national non-governmental organization (NGO). In 2016, as part of the operation’s participatory needs assessment, additional focus group discussions were carried out with LGBTI refugees of different nationalities. These assessments determined that LGBTI refugees face particularly high protection risks, including disproportionate levels of violence, exploitation and abuse. The assessments also exposed the particular difficulties faced by LGBTI refugees in finding decent housing and obtaining and keeping a job, due to discrimination. As a consequence, LGBTI refugees suffer from extreme isolation and face difficulties in building protective social networks with other refugees and integrating into their host community.

Not only do LGBTI refugees in Lebanon face specific challenges to integration, they also experience sexual harassment, assault and other forms of sexual and gender-based violence (SGBV). Many LGBTI refugees have been subjected to severe physical violence, necessitating hospitalization or surgery in some cases. Recurrent sexual violence, including rape, is not uncommon. Transgender refugees face disproportionately high rates of sexual violence and sexual exploitation. LGBTI refugees are often fearful of reporting incidents of violence — including physical and sexual assault — to the authorities for fear of repercussions, including possible additional violence.

3. Process and activities

In order to undertake the needs assessment and then to establish LGBTI Youth Group, UNHCR Lebanon reached out to LGBTI refugees who had previously been in contact with UNHCR and NGO partners. It was these refugee youth who took the initiative to establish the LGBTI Youth Group.

Two LGBTI refugees were then recruited as volunteers in order to better link LGBTI communities with UNHCR and NGO partners. In 2016, in order to support their work with LGBTI persons of concern, UNHCR Lebanon entered into formal partnerships with an international humanitarian NGO, a national case management NGO and a specialized national LGBTI organization focused on support and advocacy. In 2015 the LGBTI Youth Group applied for and succeeded in securing a one-year grant through UNHCR’s Global Youth Initiative fund.

In 2016, a second LGBTI Support Group was created in another geographical area in Lebanon to expand the accessibility of LGBTI refugees to these protection spaces. Like the youth group, this one consists of refugees of all ages, nationalities and sexual orientations and gender identities, including Syrians and Lebanese. Both groups are organized and driven by their members.
The LGBTI Groups have an official meeting once a month, but also sustain a peer-to-peer support network through informal meetings in places where members feel safe and comfortable.

LGBTI Youth Group activities include:

- **Regular meetings and updates**: Monthly discussions among members to share updated information on the situation in their communities, including challenges faced and opportunities identified.

- **Information sessions**: Regular sessions are held with group members, during which information is provided on available services. During these sessions, group members can share frustrations and openly discuss and seek clarification on questions and challenges they face in accessing services.

- **Training**: NGOs provide training and training-of-trainers to build group members’ capacities and awareness in areas of interest to them, such as legal assistance, health services and first aid. There is also a capacity building component on sexual orientation and gender identity (SOGI) delivered in coordination with a national NGO specialized in working with LGBTI persons.

- **Case management**: Social workers with a national NGO provide psychological and emotional support, assistance with accommodation, financial support including emergency cash assistance, medical and legal services, and resettlement referrals to UNHCR for cases deemed at heightened risk or necessitating specific protection measures.

- **Life skills activities/vocational training**: Different activities, as prioritized by the group, are offered by NGOs including courses in hairdressing, make-up, cooking, the English language, film-making, handicrafts and photography.

- **Psychosocial support activities**: Social workers provide art therapy via music, dance and drama.

- **On-the-job coaching activities**: Group members are given access to an internship programme for SGBV survivors in order to build their skills in specific areas and to be able to learn in a safe environment while developing social networks and ultimately regain self-confidence.

Internal capacity building initiatives were also implemented by UNHCR and NGO partners as well as with key service providers in order to improve their ability to protect and assist LGBTI refugees, including:

- **Training**: UNHCR, with the support of a national NGO working on LGBTI issues, conducted training-of-trainers sessions on case management for relevant actors, among them nine social workers (six women and three men) in 2015. In 2016, a six-month training programme (one session per month) for case management supervisors of local and international NGOs was conducted on SOGI to improve their response when working with LGBTI persons of concern.

- **Capacity building**: Awareness-raising and training activities were undertaken with UNHCR and partner NGO guards, registration and reception staff, non-specialized SGBV actors, outreach volunteers and others to increase their understanding of SOGI, and how to implement their obligation to ensure that LGBTI persons of concern are not discriminated against and are provided with safe spaces. The rainbow “Safety” pins developed at UNHCR headquarters were shared with UNHCR Lebanon frontline staff and a password given to LGBTI persons to use when approaching the UNHCR Reception Centre.
4. Partners and resources

With the technical and financial support of UNHCR and NGO partners, the LGBTI Youth Group members themselves have assumed the bulk of the responsibility for implementing this project. Trained social workers, caseworkers and outreach staff from the NGOs support the work of the LGBTI Youth and Support Groups.

Outreach volunteers with previous volunteer, academic or work experience in the fields of social work, law, or psychology; motivation; availability; and a connection to, and support from, the LGBTI community; have been recruited to offer additional support to LGBTI refugees. This entails identification and referral of high-risk cases and support in conducting community-based initiatives.

The LGBTI Youth Group operated on a budget supported for one year by the UNHCR Global Youth Initiative Fund. Both the LGBTI Youth and Support Groups have also secured funding from UNHCR Lebanon and the Multi-Donor Trust Fund for UN Action against Sexual Violence in Conflict.

5. Participation and accountability

The LGBTI Youth Group is independent and organized and led by its members, so it is highly participatory. Members jointly decide how the group will be run and what activities to prioritize. Several communication, feedback and complaints mechanisms have been established, such as:

- **Focus group discussions**: UNHCR and partner NGOs conduct focus group discussions with LGBTI group members, providing the space to discuss activities and receive feedback and suggestions.

- **Evaluations**: After each activity a participatory evaluation is conducted, while upcoming activities are adjusted based on the feedback received.

- **Complaint boxes**: Every community centre has a complaint box where group members can deposit their feedback anonymously. Although feedback generally has been positive, the initiative has seen some changes based on concerns raised through this box as well as directly with UNHCR and NGO staff.

- **Emergency hotline**: An emergency hotline has been established for LGBTI persons. One of the NGO partners offers a rescue option, including the provision of short-term accommodation, until the national case management NGO and UNHCR can develop and execute a longer-term plan.

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**Age, Gender and Diversity Approach**

The LGBTI Groups now include members of all ages, sexual orientations and gender identities, and nationalities – bringing together asylum-seekers, refugees and host community members.
6. Results

“Because of my identity as a transgender person, I find it hard to get a job or maintain a decent living standard. I was exposed to sexual exploitation by an official last year in order to get residency papers renewed. Further, I had serious health problems with my liver at that time but was not able to access health services because I could not afford the fees. Add to that the fact that I was late paying my rent and the landlord threatened to throw me out. As a result, I felt lonely, isolated and powerless to a point where I decided to commit suicide.

During this difficult time in my life, I accidentally met with someone who introduced me to a member of the LGBTI Youth Group who managed to immediately connect me to the group. After that, some of the group members referred me to specific institutions where I managed to receive free medical care for my serious health situation. The group has also helped out with temporary accommodation. I was also invited to attend the art therapy activities which comprised singing and dancing, which was of great help to me in my healing process. Now I am an active member of the group which has become my home, my family and my first line of support.”

LGBTI Youth Group Member

During a focus group discussion held as part of documenting this field practice, LGBTI Youth Group members noted that, although they faced many challenges in their home country, the risks in the host country are exacerbated due to the loss of the social support networks they had at home. The LGBTI Youth Group has managed to create a safe and inclusive environment and become, in their words, "a second home". Through the group, they have become better informed of the services available to them, benefit from much needed peer support and are able to start participating in community life. The group has created a sense of belonging and empowerment, inspiring hope and supporting greater self-reliance.

Focus groups with LGBTI refugees in 2016 as part of UNHCR Lebanon’s participatory needs assessment, individual interviews with LGBTI refugees and the monthly meetings with the LGBTI Youth Group indicate that:

- Case workers have strengthened their skills and developed the attitudes necessary for undertaking case management with LGBTI refugees. Guards at UNHCR and partners centres have shown a positive change of attitude to assisting LGBTI refugees. UNHCR reception staff have improved their ability to identify the needs of LGBTI refugees and refer them to specialized services.
- The skills training provided to LGBTI group members has enabled some LGBTI refugees to access livelihood opportunities.
- LGBTI persons from different refugee communities have been brought together, leading to increased understanding of their different backgrounds and situations they faced in their countries of origin and increased provision of peer-to-peer support and assistance.
- LGBTI rights advocacy tools have been developed. After participating in a film-making workshop, LGBTI Youth Group members wrote and acted in a documentary titled, My Refugee Story, directed and filmed by 1morecup media organization and facilitated by MOSAIC.
- The involvement of LGBTI Youth Group members in UNHCR Lebanon’s annual participatory assessments has led to changes in programmes based on their concerns and suggestions.
- UNHCR has built new, productive partnerships with international and national NGOs working on LGBTI rights, opening the doors to long-term collaboration.
Sustainability

The LGBTI Youth Group membership has expanded over the past year and managed to secure funds through UNHCR’s Global Youth Initiative Fund, UN Action against Sexual Violence in Conflict and UNHCR Lebanon.

As the group is run by its member, who volunteer their time and expertise, with support from national NGOs, it is quite sustainable.

7. Lessons learned

Organizing support and services for refugee and host community LGBTI persons is challenging in Lebanon. For instance, it is difficult to reach out to LGBTI persons living outside urban centres. These difficulties are exacerbated by the precarious legal context faced by LGBTI refugees in the country. The interpretation of article 534 of the Lebanese Penal Code, which states that “any sexual intercourse contrary to the order of nature is punishable by up to one year in prison” is a major area of concern that affects the protection of LGBTI persons of concern.\textsuperscript{16} It hampers outreach by humanitarian organizations and makes it difficult to gain the trust of LGBTI persons. As such, strict confidentiality procedures need to be established. Moreover, some national NGOs have expressed concerns that providing services and support to LGBTI persons could jeopardize their operations, or lead to the stigmatization of their staff.

### Potential Risks and Mitigation Strategies

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<tr>
<th>Risk</th>
<th>Mitigation</th>
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<tbody>
<tr>
<td>LGBTI Youth Group members stated four risks:</td>
<td>Key measures have helped mitigate these risks:</td>
</tr>
<tr>
<td>• Low participation of refugees.</td>
<td>• The LGBTI Youth Group only undertakes activities that are suggested by group members.</td>
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<tr>
<td>• Lack of legal documentation limits freedom of movement.</td>
<td>• Meetings and activities are held in a safe location that is easily and safely accessible to those living in different parts of the city.</td>
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<tr>
<td>• Risk of detention and deportation.</td>
<td>• Safe transportation to activities and meetings is ensured for all members of the group.</td>
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<tr>
<td>• Discrimination and related security concerns during group meetings and activities.</td>
<td>• Advocacy is conducted by UNHCR in Lebanon on the need for refugees to obtain legal documentation and other refugee rights.</td>
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</tbody>
</table>

\textsuperscript{16} Article 534 of the Lebanese penal code prohibits “sexual intercourse contrary to the order of nature” which, although a Jdeideh court rejected its application to homosexuality in January 2014 is, nonetheless, inconsistently applied by law enforcement agencies to LGBTI persons.
8. Recommendations

This initiative has the potential to be scaled up through increases in funding and membership. It can also be adapted to other contexts and replicated, but it is important to keep in mind the following recommendations:

- Map national legal frameworks on SOGI issues and the extent to which domestic law and policy may pose possible risks of discrimination, penalization or prosecution of persons who are LGBTI. Develop a strategy to manage and mitigate risks arising in this context, especially when developing LGBTI-specific programming that may increase the visibility or exposure of LGBTI persons.

- Undertake a mapping exercise, before initiating specific activities, to identify existing local organizations working with LGBTI persons as well as the key actors to be engaged in the project. It is essential to establish a network and strong alliances at all levels due to the potential sensitivities and challenges related to working with LGBTI persons.

- Reach out to diverse LGBTI asylum-seekers and refugees through a safe participatory assessment that identifies existing networks and determines specific needs, priorities and capacities. These should form the basis for an initiative that is led by LGBTI persons of concern, with support from UNHCR and partner NGOs.

- Bring together LGBTI members from the host community and diverse refugee communities in a group forum.

- Collaborate with local grassroots LGBTI organizations that have existing experience working in the specific cultural context.

- Pilot the project first, as a small-scale initiative, carefully designing the project with the possibility for it to be scaled up later.

- Build the capacity of social workers in case management, including by training and mentoring them to support LGBTI persons of concern without discrimination, meeting their rights and needs, and maintain full confidentiality.

- Provide training to other key services providers, including UNHCR frontline and partner staff and affiliate workforce.

- Ensure the provision of comprehensive services and referral pathways, including health, mental and psychosocial support, housing, financial assistance, vocational training and education, legal assistance and other services in a "one-stop shop".

- Prioritize mental health and psychosocial services and livelihoods support, including internships and vocational training, as they are both vital to the protection of LGBTI persons of concern.

- Develop awareness-raising materials for the broader community that promotes acceptance, respect and non-discrimination for persons with diverse SOGI.

- Continue with the establishment and implementation of relevant UNHCR internal mechanisms to raise awareness on this topic.
9. More information

UNHCR Lebanon: lebbe@unhcr.org

1morecup media organization and MOSAIC, My Refugee Story (2016).


MOSAIC, Sexual Orientation and Gender Identity Toolkit (2016), in Arabic, (soon to be released in English).

MOSAIC, Legal Guide about Article 534, in Arabic.

Faysal El Kak, Male Survivors of Sexual Assault: A Manual on Evaluation and Management for General Practitioners (MOSAIC), in Arabic, in English.

National and Regional Organizations

MOSAIC: https://www.mosaicmena.org/

ABAAD Resource Centre for Gender Equality: http://www.abaadmena.org/

International Organizations

International Lesbian, Gay, Bisexual, Trans and Intersex Association (ILGA): http://ilga.org/

Out Right Action International: https://www.outrightinternational.org/
1. Project overview

In 2014, UNHCR Jordan began an initiative to strengthen its capacity to protect and assist lesbian, gay, bisexual, transgender and intersex (LGBTI) persons of concern. The aim is to ensure that all five field and camp offices in the country become safe and welcoming spaces for LGBTI persons. Despite a challenging protection environment and cultural sensitivities that adversely affect LGBTI refugees and asylum-seekers, the UNHCR Jordan initiative has significantly increased the protection of LGBTI persons of concern.
LGBTI focal persons are now in place in all UNHCR Jordan offices, referral pathways have been established and UNHCR and partner staff in these offices are trained and equipped to interview LGBTI persons in a respectful manner and to provide them with counselling and referrals to services that enhance their protection and access to solutions.

2. Context and needs

In mid-2016, Jordan was host to 721,369 refugees and asylum-seekers, more than 90 per cent of whom are Syrians who were forced to flee the armed conflict in their country. Jordan also hosts 2,117,361 registered Palestinian refugees who are provided protection and assistance by the United Nations Relief and Work Agency for Palestine (UNRWA).

LGBTI refugees and asylum-seekers face many challenges in Jordan. While the legal environment is relatively tolerant, LGBTI refugees and asylum-seekers face protection risks and discrimination from persons in positions of authority, family members and community members. Key protection risks include violence, harassment, extortion and segregation; rejection by families and communities of origin; hiring discrimination and abuse in the workplace; and the hostility of landlords and neighbours. LGBTI persons of concern also have difficulties in gaining access to health care, whether mental and psychosocial support, treatment for sexually transmitted infections such as HIV/AIDS or hormone therapy for transgender persons. Another obstacle is the perception among some LGBTI persons that UNHCR and partner staff may also hold discriminatory views.

Though UNHCR Jordan has promoted protection and access to solutions for Iraqi LGBTI asylum-seekers and refugees since the beginning of the Iraq crisis more than a decade ago, in 2013 the operation identified that the protection of LGBTI persons of concern required strengthening. Encouraged and guided by UNHCR’s Need to Know Guidance: Working with LGBTI Persons in Forced Displacement of 2011 and the UNHCR Guidelines on International Protection #9 on sexual orientation and gender identity (SOGI) of 2012, UNHCR Jordan made a commitment to improving protection and assistance responses for LGBTI persons.

3. Process and activities

In collaboration with the international Organization for Refuge, Asylum and Migration (ORAM), UNHCR Jordan organized a workshop on LGBTI issues in November 2013 that included an awareness-raising and training component for an initial core team of UNHCR staff. The workshop also included mapping and needs assessment exercises that helped lay the foundation for a strategy for system strengthening and capacity building to improve protection for LGBTI persons of concern.

The strategy incorporated the lessons that UNHCR Jordan had learned as it responded to individual LGBTI cases over the years, when persons of concern were initially interviewed by UNHCR Protection and often subsequently matched with in-house and implementing partner case workers. This earlier experience had allowed the operation to develop institutional knowledge on LGBTI experiences, risks and needs in the countries of origin and asylum. This knowledge, together with feedback received from LGBTI asylum-seekers and refugees, was incorporated into the operation’s approach.

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17 UNHCR, Population Statistics – Midyear 2016 Stats.
18 UNRWA, Where we work: Jordan.
UNHCR Jordan also benefitted from the important perspectives of national LGBTI advocates and community members. Initial contact with advocates allowed the operation to connect with LGBTI community members in Jordan, who have provided encouragement and expert advice concerning available resources, community views, activities to be conducted and the overall content of the plan. UNHCR Jordan also employed a respected community member as consultant/trainer on LGBTI awareness and protection.

The strategy, based on the understanding that change must start within UNHCR, has two pillars: 1) training designed to strengthen LGBTI awareness among UNHCR staff and partners; and 2) improved protection responses to LGBTI persons of concern. It is not geared toward establishing LGBTI protection as a stand-alone intervention; rather, the aim is to mainstream LGBTI protection within the agency’s overall work.

With the objective of creating a receptive environment for LGBTI persons at UNHCR’s offices in Jordan and improving protection responses in LGBTI cases, the plan included the following activities:

- Training for UNHCR and partner staff on working with LGBTI persons in forced displacement.
- Developing an in-house network of staff trained to respond appropriately to LGBTI persons’ protection risks and needs.
- Creating welcoming environments in UNHCR offices, including visibility through posters and pins, providing assurances of confidentiality, use of appropriate terminology and engaging in respectful behaviour and body language.
- Establishing a referral system for LGBTI persons of concern.
- Inclusion of the needs, risks and priorities LGBTI asylum-seekers and refugees in standard operating procedures and practices, including criteria for prioritization as urgent/emergency cases for protection interviews, refugee status determination, and resettlement, as well as prioritization for other services and assistance, including financial assistance.

Following the initial workshop and finalization of the LGBTI protection strategy, an internal network of 70 LGBTI-sensitized UNHCR staff was created. These frontline staff were recruited from protection, registration, community services and other units from each of the five UNHCR offices in Jordan. All have undergone LGBTI awareness raising and training in interviewing techniques and serve as entry points for LGBTI persons of concern who approach these offices. Every staff member in the in-house LGBTI protection network wears the rainbow button that signals to LGBTI persons of concern that they can safely approach that staff member.

To signal safe spaces and increase identification, UNHCR Jordan and its partners use rainbow colours as an LGBTI symbol. These rainbow colours appear on buttons as well as posters with the phrase, “You are safe here”, in Arabic and English.

In addition, UNHCR Jordan has conducted 20 half-day training sessions on “Working with LGBTI Persons in Forced Displacement” in both English and Arabic. Training participants included 435 humanitarian staff members (230 women and 205 men) representing 24 organizations, including United Nations (UN) agencies, non-governmental organizations (NGOs) and community-based organizations. The training focuses on:

- The core values of UNHCR, including the Code of Conduct; the Policy on Discrimination, Harassment, Sexual Harassment and Abuse of Authority; and the Age, Gender and Diversity Policy.
- Basic information on gender, sex and sexuality.
- Correct LGBTI terminology in Arabic and English.
- Specific protection risks faced by LGBTI persons of concern.
- The international legal framework for LGBTI rights.
As follow-up to the LGBTI awareness training, four half-day training sessions on “Interviewing LGBTI Asylum-seekers and Refugees” were held in 2016 with 77 staff from UNHCR, UN agencies and partners. UNHCR Jordan also conducted a LGBTI protection training-of-trainers for several UNHCR partners, including UN agencies and NGOs.

UNHCR Jordan and partners also undertake targeted LGBTI protection responses as a component of its mandated protection role. They have established a referral system monitored by UNHCR protection officers who supervise in-house and implementing-partner case workers. The case workers maintain contact with the agencies involved in the referral system, besides working directly with LGBTI persons of concern.

The types of service LGBTI persons need varies from case to case, but include legal counselling and services, monthly financial assistance, urgent cash assistance, mental health and psychosocial support, health care (in cases of rape this includes post exposure preventive (PEP) kits, hepatitis vaccinations and free, anonymous HIV and other sexually transmitted infection testing) and coordination with the Family Protection Department of the Public Security Directorate in response to violence or other crimes.

4. Partners and resources

UNHCR implements the plan and provides training to its own staff and those of its operational partners in the context of the Syria Refugee Response in Jordan. The sensitivity of the issue in Jordan requires UNHCR to adhere strictly to its mandate-supported objectives and to target those organizations that would most clearly benefit from improvement in their protection response to LGBTI persons of concern.

Three facilitators were responsible for delivering the LGBTI-related training. Two were UNHCR protection staff with LGBTI and training experience, and one was an external, highly-qualified Jordanian trainer on LGBTI issues respected by the Jordanian LGBTI community. Office premises were used for all the training, both to keep costs down and to present the issue as a low-key, technical skills-development process rather than a public event that might have attracted unwanted attention.

The UNHCR LGBTI focal points in field offices dedicate approximately ten per cent of their time to this issue, along with two full-time staff in Amman who allocate at least twenty per cent of their time.

5. Participation and accountability

Participation by LGBTI persons of concern can be strengthened going forward. The LGBTI protection strategy and activities has largely relied on existing guidance and standards pertaining to reception, training and protection response, rather than on providing material services or a new protection mechanism for LGBTI persons of concern. UNHCR efforts have focused on ensuring that the existing systems and services of UNHCR and partners were accessible to LGBTI persons of concern, and the views of LGBTI community members have been gathered individually to inform further improvement.

LGBTI persons of concern can contact UNHCR’s LGBTI focal points to provide direct feedback or make complaints, given that the focal points’ engagement is fairly intensive and bound by strict confidentiality. They can also submit complaints or provide other feedback through the complaint boxes in all registration areas, including in camps. In addition, a code of conduct was created for all security field officers and security guards in the camps in agreement and collaboration with the companies managing them.

Age, Gender and Diversity Approach

All LGBTI persons of concerns are included in the LGBTI protection plan, regardless of age, SOGI, or any other form of diversity.
6. Results

- There was an increase in the number of LGBTI individuals provided with safe and dignified access to services. Participants from partner organizations improved their skills and capacity to identify and refer LGBTI cases to UNHCR and other service providers. In several cases, partner staff approached UNHCR immediately after the training to refer cases that, due to the training, they had come to recognize as in need of protection assistance.

- The UNHCR partner organizations that participated in the training reported to UNHCR that by increasing their awareness of LGBTI protection risks and responses they were able to reach out to more LGBTI persons and create a more welcoming environment for them.

- Following the training, UNHCR partners reported that they were able to sensitize other organizations regarding the protection needs of LGBTI persons of concern.

- Partner organizations also reported that the training on LGBTI interviewing techniques was of practical use as it enabled them to reach out and address LGBTI protection needs and concerns more effectively.

- The rainbow button with the text “Safety” in Arabic has become so widespread among LGBTI focal points and advocates that the vast majority of LGBTI persons of concern are familiar with it – showing it is an effective way to signal a safe environment.

Sustainability

The LGBTI protection strategy has the potential to be sustainable as it relies almost entirely on human resources and capacity (knowledge and skills) within UNHCR and among its partners, with resources that have been predominantly mobilized internally.

There is continuing interest among UNHCR Jordan staff and partners in expanding the LGBTI training programme to focus on specific areas such as interviewing techniques, credibility issues and health, among others.

7. Lessons learned

Initiatives that aim to increase the protection of LGBTI persons of concern in contexts such as Jordan can be particularly challenging. Lessons learned from the experience are:

- LGBTI identity can be a difficult concept to discuss and understand in some contexts. Although most participants responded favourably to the training sessions, some challenged the legitimacy of LGBTI identity on religious grounds. Facilitators developed strategies and techniques to address these concerns. For example, they avoided cultural debate by diverting discussion away from cultural and religious perspectives and instead promoted discussion around LGBTI identity from the perspective of service delivery. Facilitators frequently reiterated that they were “not promoting homosexuality” but “doing humanitarian work”. This helped foster a better environment during the training.

- Case studies of violence by persons in positions of authority, including sexual violence, perpetrated against LGBTI persons of concern were also presented during the training. Discussing the nature and role of authority figures in perpetrating violence against LGBTI persons proved challenging. Although few participants denied the reality of authority figures committing sexual and gender-based violence (SGBV) against LGBTI persons of concern, the facilitators avoided the potential for conflict by highlighting case studies of a more global or regional nature, rather than referring to specific countries.
Potential Risks and Mitigation Strategies

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<thead>
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<th>Risk</th>
<th>Mitigation</th>
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<tr>
<td>LGBTI persons, especially transgender people, face a high risk of</td>
<td>• Criteria for the prioritization of LGBTI protection cases have been established, allowing</td>
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<td>violence, including sexual assault.</td>
<td>such cases to be given precedence over others to ensure that appropriate information is</td>
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<td></td>
<td>obtained and actions taken.</td>
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<td></td>
<td>• LGBTI focal points are available to provide same-day or next-day interviews to address</td>
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<td>protection needs.</td>
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<td></td>
<td>• Refugee status determination and other protection interventions for LGBTI persons of concern is</td>
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<td></td>
<td>prioritized.</td>
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<tr>
<td>An LGBTI person’s identity could be disclosed to a third party –</td>
<td>• The importance of the right to confidentiality is emphasized in all training and procedures.</td>
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<td>constituting a serious protection risk.</td>
<td>• References to LGBTI status are not recorded in broadly-accessible proGres (UNHCR’s</td>
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<td>registration database) fields.</td>
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<td>• SGBV reports are maintained separately from the main case file, and are accessible only to</td>
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<td>staff with the need to know.</td>
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8. Recommendations

This initiative could be scaled up to enable the engagement of more UNHCR and partner staff, especially in training sessions. However, when replicating this project, it is important to keep in mind the need to:

- First consult with LGBTI persons of concern and national LGBTI organizations and associations to assess needs, risks, capacities and proposed solutions jointly.
- Understand the cultural, social and legal contexts as they pertain to LGBTI identity, especially when designing and facilitating training on LGBTI protection and assistance.
- Use correct terminology in the national language in order to clarify misconceptions around LGBTI identity as a result of language bias and increase sensitivity and awareness on LGBTI issues.
- Avoid distributing printed materials to training participants on topics related to LGBTI persons of concern in contexts where possessing this literature could pose risks to the individual. Printed materials could put organizations and individuals at risk, as they could be interpreted as promoting homosexuality.
- Take specific measures to address the protection needs and risks faced by transgender persons, especially transgender women. The LGBTI population is not a homogenous group. Within this population, transgender persons often face heightened protection risks, including sexual assault, harassment and other forms of transphobic violence. Specific measures may also be needed to increase lesbian women’s access to protection and assistance.
- Emphasize scientific research that substantiates and normalizes diversity of sex, SOGI and that disputes stigmatizing views, and focus on the topic from the perspective of UNHCR’ policy on everyone’s equal right to protection, assistance and solutions and what this means for service delivery.
9. More information

UNHCR Jordan: oram@unhcr.org


MOSAIC, Sexual Orientation and Gender Identity Toolkit (2016), in Arabic (soon to be released in English).

International Organizations

Organization for Refuge, Asylum and Migration (ORAM): http://oramrefugee.org/

International Lesbian, Gay, Bisexual, Trans and Intersex Association (ILGA): http://ilga.org/

Out Right Action International: https://www.outrightinternational.org/
MOBILE SGBV PREVENTION AND RESPONSE SERVICES – LEBANON

1. Project overview

The International Rescue Committee (IRC), with financial support from UNHCR, provides mobile sexual and gender-based violence (SGBV) prevention and response services in five districts of Tripoli in Lebanon: Bchare, Denieh, Koura, Menieh and Zgharta. This project, begun in 2014, is designed to provide services for girls and women from both the Syrian refugee population and the Lebanese host community. It is part of a broader project to provide a favourable protection environment for Syrian refugees in North Lebanon, which includes both static and mobile SGBV prevention and response services.
The mobile services target women and girls who are at risk or survivors of SGBV; have restricted mobility due to security concerns, cultural norms and/or disabilities; and who have limited access to information or face restrictions in obtaining it. The mobile services include psychosocial support, case management, referrals to service providers, life-skills training, age-appropriate support groups and dedicated activities for adolescent girls. The mobile approach has proved effective in its ability to reach high-risk groups who either have limited access to SGBV protection services or none at all.

2. Context and needs

In mid-2016, Lebanon was host to 1,049,364 refugees and asylum-seekers, 98 per cent of whom are Syrians who were forced to flee the armed conflict in their country.21 Lebanon also hosts 449,957 registered Palestinian refugees who receive protection and assistance from the United Nations Relief and Work Agency for Palestine (UNRWA).22 Due to the absence of formal refugee camps (aside from those for Palestinian refugees), the refugees from Syria are scattered across host communities throughout Lebanon. As a consequence, it is particularly challenging to reach out to them and provide them with needed services. This difficulty is compounded by restrictions imposed on the refugees’ and asylum-seekers’ freedom of movement for security reasons, which may prevent them from accessing service delivery points.

Issues related to valid residency documentation, reductions in assistance, tensions with host communities and limited opportunities for financial independence further increase the vulnerability of refugees and restrict their mobility. For women and girls, these hindrances are compounded by cultural and social barriers to mobility that in some cases leave them unable to gain access to services, including medical and legal assistance.

The Gender-Based Violence Information Management System (GBVIMS), participatory assessments, focus group discussions and monitoring throughout 2015 highlighted how prolonged displacement continued to increase the risks of SGBV for refugees and asylum-seekers, with 87 per cent of incidents reported occurring after arrival in Lebanon. The most commonly reported forms of violence against Syrian refugees include physical assault, domestic and sexual violence, denial of resources and both child and forced marriage.23 Syrian refugee women also report being forced to resort to sex work to cover the basic needs of their families.24

The dispersed nature of the refugee population in Lebanon and related economic, logistical and safety concerns limits the access of SGBV survivors to services, including those provided at static community centres. Under-reporting of SGBV fuelled by shame, stigma and fear of reprisals also remains a large challenge. For these reasons, it is of particular importance to reach out to and identify refugees at risk of SGBV, ensure they have accurate information about their rights and are provided access to effective, safe and ethical services.

Since November 2012, the IRC has gained considerable experience in developing and implementing SGBV programmes in Lebanon. It has found that a community-based approach that encourages women and girls to attend activities on a regular basis, including group psychosocial activities, is the most effective way to promote help-seeking behaviours and to encourage them to access SGBV response services.

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22 UNRWA, Where we work: Lebanon.
24 Idem.
3. Process and activities

IRC staff engage directly with refugee and host communities in order to lay the groundwork for mobile SGBV services for women and girls. This involves extensive interaction in order to identify community outreach volunteers as well as gatekeepers such as parents and husbands. IRC staff recruit and train female refugee and host-community outreach volunteers on gender-based violence (GBV) core concepts, GBV risk assessment tools and psychological first aid. The outreach volunteers then disseminate information on services and mobilize the community, as well as find safe spaces for the provision of mobile services. The outreach volunteers are trained to assess SGBV risks in the community, especially those faced by women and girls, using participatory and observational methods. GBV risk assessment tools include focus group discussions, community mapping and safety audits, all of which are employed after the trust of the community is gained.

Mobile services are offered in communities with a reportedly high incidence of SGBV and low levels of access to services. Women and girls from these communities select the precise location where they would like services to be provided; this ensures the space can be accessed in a safe and secure manner.

There are currently 12 mobile teams in the IRC Women’s Protection and Empowerment Program, five of which service the Tripoli districts. Each mobile team is made up of a female caseworker, a female community mobilizer and a male driver. The mobile teams are supported by specialized staff, including case management officers, adolescent girls’ officers and programme managers, who provide technical support and capacity building. Four male IRC community mobilizers support the work of the mobile teams on a rotational basis by disseminating information about IRC services and raising awareness among men on GBV.

The services provided by the mobile teams are adapted from those provided at the static centres. They include age-appropriate psychosocial activities, including support groups; case management, including referrals to other services such as health and legal services; parenting and life skills; recreational activities and community mobilization. The aim is to provide quality, holistic, survivor-centred case management.

Age-appropriate support groups for women and girls are facilitated by female caseworkers. The support groups aim to strengthen existing coping skills to deal with life challenges and promote confidence, decision making and healing. In addition, a self-development curriculum is facilitated with women, Arab Women Speak Out which addresses issues of power, decision making, self-confidence and other topics. This activity encourages women to take more active roles in their families and communities. Additional activities are implemented based on needs assessments and consultation with women and adolescent girls.

The mobile services also implement an Adolescent Girls Initiative by maintaining contact with and providing support to adolescent refugee girls. In 2014, the IRC conducted an assessment of adolescent girls and their mothers, fathers and other gatekeepers in order to understand more clearly their needs and interests. The assessment covered coping mechanisms, SGBV risks and access to and delivery of information and services. Based on this assessment and continued collaboration with adolescent girls, the courses described below were developed. In 2015 the IRC conducted an additional assessment of the particular needs of engaged or married girls and adapted the course curriculum to reflect their needs.

Two courses have been designed to meet the specific needs articulated by adolescent girls and equip them with the knowledge and skills to mitigate, prevent and respond to GBV. The first course, My Safety, My Well-Being (MSMW), was designed primarily for Syrian refugee and Lebanese adolescent girls living near IRC centres (where the courses are conducted and psychosocial support services are provided). The MSMW course consists of 24 sessions held twice a week, with each session lasting approximately two hours. The

25 K4Health Project, Arab Women Speak Out, toolkit and flashcards (1999).
26 IRC, My Safety, My Well-Being: Course curriculum and facilitator guide (2016).
second course, *Life Skills through Drama*, has been adapted from the MSMW curriculum to be conducted in more fluid circumstances, such as community safe spaces. This course consists of 12 sessions, each lasting some two hours. While the same topics and issues are addressed, the structure and flexibility of the latter course is better suited to the mobile locations.

At the end of both courses, the participants receive assistance to develop safety plans that take into account their specific risks, including forced and child marriage. They are also required to devise a project (through exercises such as drama, songs and making presentations) that examines GBV in their community. A mother-daughter day is also organized to strengthen the relationships between adolescent girls and their mothers.

To increase the sustainability of the Adolescent Girls Initiative, girls with leadership potential are trained to become mentors to other girls in their community. Mentors must be older than 15, show an interest in mentoring and have attended more than 50 per cent of the mentor training programme. The training includes sessions on mentorship skills, GBV prevention and response, confidentiality, individual case referrals and how to be positive role models. Mentors support their peers, either individually or in groups, to address the challenges they face.

In addition, parenting skills sessions are offered to both women and men in the community as part of the strategy to engage gatekeepers in identifying the needs of adolescent girls and promoting a safe and protective environment for this at-risk group.

Men and boys are also targeted as part of the prevention strategy. They are encouraged to raise their awareness of SGBV, engaged in advocacy efforts and assisted to become agents of change towards gender equality. In cases of SGBV against men or boys, men are referred to other local and international service providers and boys to child protection agencies, as these organizations have expertise in this area.

4. Partners and resources

This IRC programme receives financial support from the United States’ Department of State’s Bureau of Population, Refugees, and Migration; the NoVo Foundation; the Swedish International Development Cooperation Agency; UNHCR and the United Nations Children’s Fund (UNICEF).

5. Participation and accountability

Recognizing the importance of empowering communities to be agents of their own protection, the IRC identifies and builds the capacity of outreach volunteers from both the refugee and host communities. Both volunteers and gatekeepers are identified through wide outreach by IRC staff, including discussions with women and girls about influential figures in their communities from whom they feel comfortable seeking information.

Women and adolescent girls are reached through extensive outreach, including with their parents, husbands and other gatekeepers. The girls and women themselves decide whether or not they wish to participate in activities, while IRC ensures that the activities and courses offered meet the needs that the women and girls have identified.

Feedback mechanisms for the SGBV mobile services include comments provided in feedback forms, interviews and case management satisfaction surveys. The surveys solicit feedback specifically related

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27 IRC, *Life Skills through Drama*. 

to case management to ensure that social workers are held accountable to minimum standards, including prioritizing the safety and comfort of women and girls during case management sessions. The IRC also has a dedicated reporting mechanism for complaints and claims related to misconduct. For monitoring purposes, the IRC also uses a site tracker, a bi-weekly monitoring sheet and records relevant information in the Gender-Based Violence Information Management System (GBVIMS).

For the courses, girls are given the opportunity to provide feedback on various aspects such as facilitation, space, curricula topics and group dynamics after each session and adjustments are made accordingly. The IRC updates the course curricula regularly based on lessons learned and feedback received.

The IRC also applies an outreach approach to ensure that women and girls with mobility restrictions are provided with information. This provides opportunities to ask adolescent girls about girls in their communities who may not be able to come to activities or who previously came to sessions but no longer participate in them.

**Age, Gender and Diversity Approach**

The mobile approach is unique in that it facilitates access to SGBV prevention and response for women and girls of varying ages and abilities as well as in involving refugees and host communities. It increases participation in and access to services and resources by reaching out to women and girls who are unable to take part in activities in a centre or are uncomfortable doing so. In addition, it provides targeted services and support to adolescent girls.

The engagement of men is ensured at all stages and has proved to be key to the success of the mobile services and the protection of women and girls participating in the activities. As previously mentioned, services target women and girls, but if men and boys are identified as survivors or at risk of SGBV they are referred to service providers with expertise in supporting male survivors.

**6. Results**

According to the 2015 International Center for Research on Women (ICRW) independent Evaluation of a Mobile Approach to Service Delivery in Lebanon, mobile services have contributed to improvements in the wellbeing of Syrian refugee women and girls. Specifically, the mobile services have been found to:

- Broaden the social networks of Syrian women and girls, helping build social cohesion and increasing their access to information, material resources, advice and support.
- Improve the communication skills and coping mechanisms of Syrian women and girls, thereby improving family relations.
- Break down barriers between Syrians and Lebanese, helping to combat discrimination against refugees.
- Provide Syrian women and girls with an opportunity to enjoy themselves and relieve stress.
- Increase the knowledge of Syrian women and girls of safety-promoting strategies, healthy coping techniques, effective communication skills and management of their health and that of their families.
- Help Syrian women and girls regain a sense of self and purpose and bolster their self-esteem.

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Sustainability

The mobile services adopt a community-based approach. Building leadership among women and girls and engaging men as agents of change promotes these services’ sustainability, though more efforts are needed. However, there should be no problem in maintaining the areas used by the mobile services, since these are generally public spaces.

Community outreach volunteers are pivotal to the sustainability of the mobile services, as it is the volunteers who refer survivors to IRC caseworkers, conduct community mobilization activities and organize women for psychosocial support sessions even after the mobile services have left a community.

Consultations with community members (such as women, men, girls, boys, local authorities and community-based organizations) have resulted in the development of an exit strategy that will secure the continuity of services after a six-month intervention in the targeted community. The strategy includes the safe referral of SGBV survivors, community mobilization, identification and training of community outreach volunteers and the development of a community safety plan. Community safety planning involves various groups within the community, including adolescent girls, adult women and men, in identifying risks and putting in place simple measures to prevent SGBV.

In addition, the IRC has trained more than 15 organizations (including international and local NGOs and UN agencies) on the two courses for adolescent girls to ensure that they can continue to provide these courses beyond the scope of the IRC programme.

7. Lessons learned

Despite their successes, mobile services can be challenging to implement. Lessons learned are highlighted below:

- Some families considered the sexual education module, which is included in the courses for adolescent girls, inappropriate. To respond to their concerns, the mobile team made significant efforts to reach out to each community and educate its members on the importance of sexual education for adolescent girls. It was emphasized that such information should be provided only by trained professionals.

- Some families prevented adolescent girls who had been identified as in need of training (as SGBV survivors or persons with disabilities) from availing of it. This was addressed by the IRC through having several outreach strategies to disseminate information about available services. These strategies include:

  ▶ **Referrals from outreach volunteers**: The outreach volunteers identify adolescent girls and make referrals to the respective community mobilizers as appropriate and when consent is provided.

  ▶ **Word of mouth**: Indirectly ask women and adolescent girls who already attend our activities about whether all adolescent girls in your community go to school; how do they spend their day; and if there are any adolescent girls in your community who cannot go outside the informal settlements.

  ▶ **Referrals**: Referrals from other women and girls who attended the activities.

  ▶ **Door to door visits**.
Potential Risks and Mitigation Strategies

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<tr>
<th>Risk</th>
<th>Mitigation</th>
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<tr>
<td>The safety and confidentiality of survivors can be compromised should they be accessing services in inappropriate locations.</td>
<td>It is essential that the space where mobile services are provided be closed to non-participants.</td>
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<td>In high-risk communities where a safe space may not exist, funds should be allocated to improve the</td>
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<td>safety and confidentiality of the space, or activities should be conducted in a private home and case</td>
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<td>management provided over the phone.</td>
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<tr>
<td>The focus of the mobile services on women and girls can lead some men in the community to feel excluded and to express reservations about the programme and even to challenge it.</td>
<td>By involving men and boys as agents of change, including through outreach sessions, mobile services</td>
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<td>teams can overcome this challenge and encourage men and boys to become partners in efforts to gain</td>
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<td>gender equality.</td>
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8. Recommendations

The IRC’s mobile service in Lebanon is a promising approach for accessing hard-to-reach populations of women and girls, and in particular refugees, with SGBV prevention and response services. When aiming to replicate this programme in another context, there are several recommendations that should be considered:

- Although mobile services increase access, both static and mobile services should be maintained and promoted. Static services are vital in providing more reliable safe spaces for psychosocial support and training courses, as well as enabling more mobile women and girls to access services.
- Continue the emphasis on outreach, consultation and participation of women, men, girls and boys of concern and local leaders throughout the project. This includes training to become community outreach volunteers.
- Map and establish good working relationships with national and local service providers, to establish a strong referral network.
- SGBV service delivery for men and boys is be a field to be explored. Adequate procedures and training are required for staff providing these services, and referral networks for men and boys must be identified. In addition, mobile services should be trained and ready to provide services and referrals to lesbian, gay, bisexual, transgender, and intersex (LGBTI) persons of concern.
- The feedback received during the training sessions on reproductive health reiterated the importance of understanding the differing needs and perspectives among adolescent girls and not mistaking them for a homogenous group. For example, girls who are already survivors of child marriage require training on reproductive health that is different from what others may require. For this reason, a separate session for married adolescents, focusing on subjects such as contraception and financial literacy, has been developed.
- The participation of married adolescent girls may be met with resistance, due to fear that the information they receive in training could disrupt their family lives. To overcome this resistance, the mobile teams conduct specific community outreach programmes aimed at engaging husbands in order to assuage their fears. This approach has been successful in increasing the participation of married adolescent girls in the programme.
9. More information

UNHCR Lebanon: lebbe@unhcr.org
IRC Website: https://www.rescue.org/
IRC’s Women Protection and Empowerment in Lebanon: http://ircwpelebanon.org
IRC Lebanon Women’s Protection and Empowerment Senior Manager – Petronille Geara: petronille.geara@rescue.org
IRC, My Safety, My Well-Being: Course curriculum and facilitator guide (2016).
IRC, Life Skills through Drama.
Arab Women Speak Out, Manual and flashcards in Arabic.
A Girl Stepping Forward, highlights the achievements of adolescent girls during and after attendance in these activities.

Other Resources

Gender-Based Violence Information Management System (GBVIMS).
UNHCR SGBV Prevention and Response Training Package (October 2016).
UNHCR Action against Sexual and Gender-Based Violence and Response: An Updated Strategy (June 2011).
UNHCR Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons – Guidelines for Prevention and Response (May 2003).
Faysal El Kak, Male Survivors of Sexual Assault: A Manual on Evaluation and Management for General Practitioners (MOSAIC), in Arabic, in English.
ART THERAPY TO PREVENT AND RESPOND TO SGBV – EGYPT

Population Group: Asylum-seeker and refugee women, men, girls and boys from all countries of origin.

Project Objective: Strengthen sexual and gender-based violence (SGBV) prevention and response by assisting survivors to process violent situations, break the taboos surrounding discussion of SGBV and be in a space that encourages gender equality.

Implementing Partners: CARE International in Egypt.

1. Project overview

In partnership with UNHCR Egypt, CARE International in Egypt (CARE) initiated its Prevention and Response to Sexual and Gender-Based Violence project in November 2013. The project, which has now been extended until December 2017, aims to tackle sensitive topics and delve into the root causes of issues often considered taboo. To do so, CARE adopts rights-based, survivor-centred and community development approaches, employing innovative methods that target survivors of sexual and gender-based violence (SGBV). The project also encourages collaborative and equal interaction among women and girls, and men and boys in order to build an understanding and appreciation of each other’s experiences.
To this end, CARE conducts awareness-raising activities that highlight the different types of SGBV and their harmful consequences. It also implements a case management system that assists SGBV survivors and facilitates their recovery. Case management is provided to all asylum-seeker and refugee SGBV survivors – whether they are women, men, girls or boys. Case managers provide the survivors with emotional support while focusing on the four pillars of response: health care; safety, including safe housing; psychosocial support; and legal assistance.

Art therapy, one of the project’s utilized methods, is a creative means of expression that helps survivors to come to terms with having endured violence, change their perspectives on SGBV and improve their self-esteem. CARE’s experience with projects targeting Egyptians has indicated that art therapy is highly effective not only in raising awareness of violence against women but also in changing project participants’ attitudes towards that violence. CARE began using art therapy as a tool to help prevent and respond to SGBV among African, Iraqi and Syrian asylum-seekers and refugees, the majority of them Syrians, in the cities of 6th of October and Obour in the greater Cairo area.

2. Context and needs

In mid-2016, Egypt was host to 256,400 refugees and asylum-seekers, 46 per cent of whom are Syrians who were forced to flee the armed conflict in their country. SGBV is a significant concern for both the host and refugee communities in Egypt. In 2015, the United Nations Population Fund (UNFPA) reported that in Egypt 1.7 million women suffered from sexual harassment on public transportation, 3.7 per cent faced violence in the workplace, and 16,000 girls were harassed at educational institutions. Refugee women, on account of their vulnerable situations, may face higher risks of SGBV.

According to various reports, the types of SGBV faced by refugees in Egypt include domestic violence, sexual harassment in public spaces, exploitation and harmful traditional practices. Through direct interaction with both refugees and medical partners, it was found that female genital mutilation is prevalent in African refugee communities and child marriage is especially widespread among Syrians.

3. Process and activities

Under the Prevention and Response to Sexual and Gender-Based Violence project, CARE conducts SGBV awareness-raising activities for all asylum-seeker and refugee populations and provides case management services for refugee and asylum-seeker SGBV survivors. SGBV survivors access the project by calling its helpline, participating in CARE activities or visiting the Women Friendly Space in 6th of October City. CARE also works closely with refugee community-based organizations, such as Bokra Ahla and the Al Manara Centre, in joint outreach activities among asylum-seeker and refugee women, men, girls and boys. SGBV survivors also reach the project through referrals from UNHCR and other international and national organizations.

The art therapy workshops are one of the activities that CARE provides to asylum-seeker and refugee populations in Greater Cairo. The target group includes SGBV survivors who are already participating in the project as well as other asylum-seekers and refugees who are interested in joining. The project serves both

29 UNHCR, Population Statistics – Midyear 2016 Stats. Available at:
31 UNFPA, UNHCR and WFP, Joint Assessment for Syrian Refugees in Egypt (2013), pp. 18.
33 UNHCR, Sexual and Gender-Based Violence Prevention and Response in Refugee Situations in the Middle East and North Africa (2015); UNHCR, Woman Alone (2014)
to prevent SGBV and to respond to it, the first by raising awareness and changing attitudes and the second by helping survivors to process the violence they have endured and build their self-confidence.

Invited by CARE and refugee community-based organizations, each workshop has between 15 and 25 participants who attend for five consecutive days. To foster open discussion, participants are separated into different groups: adult women; adult men; girls and boys aged five to nine; female and male adolescents aged 10 to 14; and female and male youth aged 15 to 17.

The workshop sessions are designed to take participants through three phases:

1. **Self-expression**, which supports participants to open up and discuss issues that they may not be accustomed to talk about.

2. **Reflection**, which guides participants through their thoughts, helping them reflect on their perspectives and concepts related directly or indirectly to violence.

3. **Healing**, which reduces the repercussions of being either the survivors or the perpetrators of violence.

This methodology seeks to create a safe and confidential space where trust can be built among participants. Confidentiality mechanisms are always in place for all participants, as well as referrals to the CARE SGBV Case Management Unit in case a participant discloses violence. Participants are also given the option to speak individually with the facilitator or CARE’s SGBV field supervisors. The art therapy workshops use different methods, including performing puppet shows, clay sculpting, writing, acting, drawing, colouring and discussions about films in order to accomplish three objectives: help survivors begin to process their violent experiences; break through taboos on dealing with the subject; and offer a gender-equal space that encourages them to discuss their concerns freely.

**Help survivors start to process violent situations**

To help survivors start to process violent situations that they have personally experienced, a psychodrama activity is used. By recreating life situations, acting them out and assessing them within a safe environment, participants are able to understand more clearly the circumstances in which they have found themselves and determine how they might respond differently in hopes of altering the outcome of such situations. This process unfolds as follows:

- The activity begins with ice-breaking exercises intended to enhance the creativity of participants and allow them to get to know each other in a relaxed manner.

- Participants are asked to recreate, through acting, a single scene that reflects an aspect of their lives. They then listen to music and are asked to describe in writing the situations that they associate with the music. Finally, they are asked to write their life stories and present them to the group.

- The facilitator subsequently guides the participants through their stories, drawing out additional details and helping attendees identify violence to which they may have been subjected or which they may have inflicted upon someone else.

- Two participants then engage in interactive theatre, wherein they act out the roles of the victim and the perpetrator. This has proven to be an effective way to generate discussion and assist participants to find alternatives to violence – in particular related to topics such as early marriage and domestic violence.
Break through taboos

The facilitator refrains from taking on the role of an authority figure and takes measures to establish a non-judgemental and encouraging environment. To help overcome taboos that discourage participants from speaking out about SGBV, various activities (e.g. the staging of puppet shows, clay sculpting, writing, acting, drawing, colouring and discussions about films) are employed to allow participants to build trust, open up, and share their stories as survivors, witnesses or perpetrators. Art therapy workshops have proven effective for men, as they provide them with an outlet to express themselves, pushing back against societal pressure that often forces them to suppress their emotions. This is of great importance as it offers an alternative to violence with which men may not have been previously familiar and which challenges the belief that masculinity and violence are interlinked.

“... At first when I started mobilizing women to attend art therapy sessions, they made jokes about it and its irrelevancy to their needs, which are mostly material. The first day was quiet. However, women gradually started speaking up and defining their experiences. The last session was loud, as women openly spoke about their personal experience of violence within and outside their households. It was the first time I heard these women talk about domestic violence, as it had always been a secret and, in their culture, they are not supposed to ... speak in public about family secrets.”

Bedour ElEryan, Director of Bokra Ahla, a refugee community-based organization

Offer a space that encourages equality – empowering women and enlightening men

Art therapy workshops provide a platform for both sexes to voice their concerns in separate groups. Sessions are segregated by sex for adults in order for members of each sex to communicate freely and discuss their experiences and perceptions in the absence of any restrictions or judgement imposed by members of another sex. The workshops raise awareness among women of their rights while also empowering them, while men are made more knowledgeable about SGBV and their beliefs about a link between masculinity and violence challenged.

In age-specific groups, girls and boys, female and male adolescents and youths, are also invited to express their emotions and thoughts through art. The facilitator creates a safe space for them to share SGBV incidents they face at school, on the streets or at home and proclaim their right to oppose such violence. They also engage in activities to enable them to reconsider resorting to violence when problem solving and to safely oppose all forms of violence perpetrated against them.

“Prevention of violence, whether at home or outside the household, requires listening, understanding, and creating a dialogue.”

Male art therapy participant

4. Partners and resources

While UNHCR provides financial support, outreach activities are implemented in CARE’s Women Friendly Space and in partnership with refugee community-based organizations, such as Bokra Ahla and Al Manara Centre. CARE’s two field supervisors under the Prevention and Response to Sexual and Gender-Based Violence project build partnerships with community-based organizations and liaise with the art therapy facilitators. The art therapy workshops take place in the facilities of Bokra Ahla and the Al Manara Centre.

CARE has partnered with two professional facilitators for this project: Mayer Magdi Wadih, a psychodrama expert, and John Milad, who specializes in art therapy.
5. Participation and accountability

Asylum-seekers and refugees have been included in the design, development and implementation of the Prevention and Response to Sexual and Gender-Based Violence project, including the art therapy workshops, since the outset of the project. Their needs, priorities and capacities have had a direct influence on the project, and numerous activities implemented in the Women Friendly Space are a result of initiatives by refugee and asylum-seeker women.

The art therapy workshops are open to all asylum-seekers and refugees, including survivors of SGBV and other forms of violence. Confidentiality, case management and referral mechanisms are always in place for all participants. If a participant, who is not already accessing CARE SGBV services, discloses violence during the workshop, the facilitator has a discussion with him/her and if s/he is in agreement, they are referred to a case manager and then provided with services in accordance with their identified needs and priorities. The case management system assists SGBV survivors and facilitates their recovery, ensuring that their rights and needs are first and foremost. All information that is part of SGBV case management, such as screening and closure forms, are handled with confidentiality including encrypting with passwords.

Many innovative techniques are used during the workshops to promote the active participation of women, men, girls and boys in age and gender-segregated settings. In addition, asylum-seekers and refugees have been trained to act as co-facilitators of the art therapy workshop. Feedback by participants is collected after each workshop in order to address any concerns raised and make changes to the workshop methodology.

<table>
<thead>
<tr>
<th>Age, Gender and Diversity Approach</th>
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<tbody>
<tr>
<td>Participants are separated by age and gender in order to enable women, men, girls and boys to discuss matters safely and openly. With respect to diversity, the workshops are open to all asylum-seekers and refugees without discrimination. The facilitators have experience working with diverse groups of participants and encouraging their full and active participation.</td>
</tr>
</tbody>
</table>

6. Results

“Before the training I was mentally disturbed by how my kids [had] become violent. I didn’t know what to do about it until I attended these sessions. I then tried to take my children through the same process I went through during the training. I can now see changes [since] I [have] started listening to them while reflecting on violence and their experience at school and on the streets.”

Female art therapy participant

Between November 2013 and December 2016, 1,277 asylum-seekers and refugees had participated in the project: 1,083 women, 91 girls, 90 boys and 13 men. Though there has not been an independent evaluation, feedback from interviews with participants, facilitators and CARE staff as well as workshop evaluations and participant observation have confirmed that the art therapy workshops have enhanced participants’ well-being and built their resilience while helping to positively change attitudes about SGBV.
Feedback from participants indicated that:

- The approach is empowering and participants felt comfortable sharing their struggles with SGBV – whether as survivors, witnesses or perpetrators.
- Many of the men reported that their partners observed a positive change in their attitudes following the workshop. A Syrian man proudly described his wife's new view of him as “a new man who recognizes the right of all women to live safely and without fear”.
- Many participants improved their sense of well-being after attending the sessions as a result of being able to relieve their stress and openly discuss taboo topics.
- After the workshops, participants were able to discuss gender equality and SGBV openly with their partners, children and other family members and influence their thinking on these subjects.

**I Have Retrieved My Dream**: KL, a 17-year-old male Syrian refugee in Cairo, is the breadwinner for his family and a participant in the art therapy workshop. In the first stage of the workshop, the facilitator asked the participants to share their feelings and memories. KL began to uncover memories of a sexual harassment incident he faced when he was only eight years old. In addition to that trauma, KL also remembered seeing two of his close friends killed in front of his eyes in Syria. Since becoming involved in interactive theatre and acting on stage, however, KL has become more optimistic about the future and found new friends. His true talents have surfaced. Moreover, he has become a crusader against SGBV.

KL credits the interactive theatre training with helping him overcome his inner pain from the awful incidents in his early life. As a bonus, he has discovered he is a talented actor. The young man has become a co-trainer for a new theatre group for women in the same project. Moreover, he was recruited as a theatre trainer by a local Syrian non-governmental organization (NGO) working in Egypt.

**Sustainability**

CARE International in Egypt conducted a 12-day art therapy Training of Trainers (ToT) for 20 Syrian refugees (15 women and 5 men). The ToT built the capacities of these participants, if approved and permitted by the facilitator, to continue offering art therapy workshops after the CARE project ends. This helps sustain the work done by refugees with refugees so that it has a lasting impact on the wider refugee community. It is important to note that the art therapy facilitator assesses whether the trainees are able to conduct workshops; if so, he continues to monitor their work to ensure its quality.

**7. Lessons learned**

- **Facilitation**: Having an Egyptian male facilitator constituted a challenge, especially at the outset of the sessions, because it is not customary for Syrian women to discuss SGBV issues openly, especially in the presence of men. Men too initially felt antagonized during the art therapy workshop. The facilitator overcame these challenges by repeatedly stressing the non-judgmental nature of the activity, helping the participants feel more at ease in opening up and discussing sensitive issues.
- **Group composition**: Having the children and youth groups include female and male participants together raises concerns regarding disclosure, confidentiality, and safety. In particular if participants are being encouraged to disclose SGBV-related incidents, it is recommended that participants are separated by sex.

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34 Ethar Soliman, CARE Egypt, "I Have Retrieved My Dream" (2016).
• **Methodology:** Many Syrian refugees initially found it challenging to use art therapy to tackle SGBV. Initially, men were not convinced of the importance of art therapy, which they viewed as a mere diversion, though adolescent boys and male youths were more receptive. Some women were initially reluctant to discuss domestic violence due to their fear that they would be stigmatized. For these reasons, the facilitator introduced the subject in a safe and enabling environment that gave participants the space to recognize the seriousness of the topic and the critical importance of discussing it openly.

• **Focus on SGBV:** Some participants in the workshops emphasized other forms of violence they suffered as a result of the political crises in their home countries, rather than SGBV. In response, the facilitator carefully stressed the significance of other forms of violence and the need not to dismiss it but to focus, nonetheless, on SGBV.

• **Terminology:** The term “sexual and gender-based violence” can confuse participants, due to the different interpretations of it. For instance, many participants believe that SGBV refers strictly to physical violence. To overcome this confusion, the facilitator avoided the term “SGBV” and referred instead to different forms of violence, such as verbal, emotional, physical and sexual.

• **Women’s participation:** Among Syrian refugees from conservative communities, men often do not allow their wives to participate in activities such as training and workshops. To overcome this challenge, CARE adopted a strategy whereby women were encouraged to join activities such as legal awareness sessions, as it provides important information needed by refugees, or Village Savings and Loan Association (VSLA) groups. This was generally well received by their husbands, as it served the material needs of their families. During VSLA meetings, women were also encouraged to make handicrafts and to sell them in public spaces. As a result, men gradually became accustomed to allowing the women in their families to leave the home, and the project successfully broke through a socio-cultural taboo that otherwise limited the lives of women. Women also convinced the men in their families to participate in art therapy workshops; this helped the men gain the perspective to help influence positive change.

• **Involving host community women:** Participants in the art therapy workshops reported that it could have been more beneficial had women from the host community also been part of the sessions. This would allow for cultural discussion and strengthen relationships and solidarity between refugee and Egyptian women. Additionally, it would help in their efforts to address common issues in relation to SGBV prevention and response.

### Potential Risks and Mitigation Strategies

<table>
<thead>
<tr>
<th>Risk</th>
<th>Mitigation</th>
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<tbody>
<tr>
<td>Increased violence or discrimination against SGBV survivors in retaliation for disclosing abuse.</td>
<td>Sessions are disaggregated by sex in order for each sex to freely communicate and discuss their experiences and perceptions. In addition, among groups of the same sex, the principle of confidentiality was explained and emphasized and the facilitator took measures to establish a non-judgemental and encouraging environment.</td>
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<tr>
<td>Divided political allegiances of Syrian refugees could lead to disruption, conflict or even violence during the workshop.</td>
<td>Ground rules were established at the beginning of the workshop, including that no reference or discussion by the facilitator or participants should involve political opinion. The facilitator reminded participants to respect and adhere to this ground rule throughout the workshop.</td>
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</tbody>
</table>
8. Recommendations

The art therapy workshops have the potential to be scaled up and replicated in other contexts of forced displacement. However, they should only commence after consultations with asylum-seeker and refugee women, men, girls and boys as well as other organizations providing SGBV prevention and response services, including local women’s organizations. This would help identify needs, priorities and existing capacities, and identify and manage possible risks. It is also important that the topics discussed around SGBV be relevant to the everyday experiences of refugees and internally displaced persons.

Art therapy should only be provided in contexts where comprehensive SGBV response services already exist. If a person discloses that they have experienced SGBV during the workshops, there should always be case management services and a referral network to help them in place. This would permit the survivors to be provided with health care, legal assistance, safe housing and psychosocial support according to their needs and decisions as survivors.

The facilitator is key to the success of this initiative and should be carefully selected. Facilitators should have social work experience and training, a clear understanding of gender equality and SGBV issues, and be skilled in negotiation and advocacy. For safety and comfort, facilitators should be the same sex of the participants, i.e. groups of women should have a female facilitator and vice versa. In addition, for the children and youth groups it is recommended that they are also separated by sex for safety and to encourage participation.

9. More information

UNHCR Egypt: areca@unhcr.org

CARE International in Egypt: http://www.care.org.eg/


Other Resources


Gender-Based Violence Information Management System (GBVIMS).

UNHCR SGBV Prevention and Response Training Package (October 2016).

UNHCR Action against Sexual and Gender-Based Violence and Response: An Updated Strategy (June 2011).

UNHCR Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons – Guidelines for Prevention and Response (May 2003).

Faysal El Kak, Male Survivors of Sexual Assault: A Manual on Evaluation and Management for General Practitioners (MOSAIC), in Arabic, in English.

1. Project overview

In August 2013, the Lebanese non-governmental organization (NGO) ABAAD – Resource Centre for Gender Equality, supported by UNHCR and other donors, established the Al-Dar Emergency Midway House (MWH) to provide safe, temporary shelter to survivors and those at risk of sexual and gender-based violence (SGBV). There are now three MWHs administered by ABAAD in Lebanon, two of which were established with UNHCR funding. At present, UNHCR gives financial support to one MWH for renovations, while also providing the project with technical support in the form of knowledge-sharing platforms and assistance in programming and quality assurance.
The MWHs provide emergency shelter, case management and referrals to tailored services, including medical services, psychosocial and legal assistance, vocational training, and language classes. Each MWH shelters as many as 20 women and their children, including boys aged 12 and younger, for a maximum of two months. More than 65 per cent of the SGBV survivors in the MWHs are refugee women. The shelters are the first of their kind in Lebanon and the only ones designed to serve women and girls from both the refugee and host community.

2. Context and needs

In mid-2016, Lebanon was host to 1,049,364 refugees and asylum-seekers, 98 per cent of whom are Syrians who were forced to flee the armed conflict in their country. Lebanon also hosts 449,957 registered Palestinian refugees who receive protection and assistance from UNRWA. Syrian refugees are dispersed across the country in urban, peri-urban and rural settings, living in unfinished buildings, collective shelters and informal settlements.

Among Syrian refugees, the most commonly reported forms of violence against women and girls include physical assault, domestic and sexual violence, denial of resources, and forced and child marriage. Some Syrian refugee women report being forced to resort to sex work to cover the basic needs of their families.

SGBV survivors cited the need for temporary housing during a participatory needs assessment with Syrian refugees conducted by UNHCR and partners. In response, a follow-up evaluation of the existing shelter services in Lebanon by UNHCR, UNICEF and ABAAD found that no emergency shelter services were available to SGBV survivors nor were targeted specifically for women with children. Furthermore, all the shelters lacked the capacity to address urgent protection situations, provide housing for women for more than one month and to serve high-risk cases. Most were affiliated with particular religious communities or associations, deterring women of different faiths from reaching out to them.

3. Process and activities

The MWHs were established to provide emergency, non-conditional, temporary shelter to women and girls who are either survivors, or at risk, of SGBV and to provide them with access to multi-sectoral services. As the words emergency and non-conditional indicate, the shelters offer immediate, free safe houses for women and girls of all nationalities, ages, cultural backgrounds, sexual orientations and economic status, be they asylum-seekers, refugees or members of the host community.

The aim of the MWHs is to work together with female survivors and their children to:

- Ensure their safety and security.
- Provide tailored services to those with specific needs.
- Empower them to support one another.
- Develop action plans with them in order to rebuild their social networks and support their reintegration.

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36 UNRWA. Where we work: Lebanon.
38 Idem.
The MWHs adhere closely to a survivor-centred approach, based on the principles of respect for human rights, safety and security, confidentiality and non-discrimination. They also follow the Inter-Agency Standard Operating Procedures (SOPs) for SGBV Prevention and Response in Lebanon. These SOPs were developed through a national consultation process involving all those working to prevent and respond to SGBV, including UNHCR, UNICEF and the Lebanese Ministry of Social Affairs. ABAAD established management guidelines for the operation of each MWH in line with the SOPs.

ABAAD is part of the inter-agency SGBV working group and the MWHs are included in the inter-agency SGBV SOPs including the referral pathway. Survivors and those deemed at risk of SGBV are given information about the MWHs or referrals by UNHCR, other UN agencies, the Ministry of Social Affairs, national and international civil society organizations and the justice and health systems. ABAAD also runs information campaigns and has a 24-hour emergency helpline.

Decisions on unaccompanied children are often discussed with the Union for the Protection of Juveniles in Lebanon (UPEL) and the Juvenile Judge. Unaccompanied children who are survivors of SGBV can only be referred to the MWHs if mandated by a judge, in accordance with the national child protection legal framework.

When contacted by a survivor of SGBV and/or her family, ABAAD staff conduct a rapid assessment of the situation. A social worker from the MWH or the referral agency accompany the MWH driver who then picks up the survivor and her children from a safe location, such as a ministry, NGO or law enforcement offices, and securely drives them to the MWH. If the situation is one of high risk, social workers may, with the consent of the survivor, communicate with and involve law enforcement.

After admission to the MWH, the survivor goes through a three-week reception phase during which she is welcomed and made familiar with the shelter’s philosophy, objectives and code of conduct. Survivors and their families in MWHs are offered many different forms of support during their two-month stay, including:

- **Immediate basic assistance:** Including food, clothing, hygiene and baby kits.
- **Security:** Each MWH has established security measures, including cameras and electronic fence and gate, and establishing direct communication with law enforcement to ensure protection in the event of a security incident.
- **Medical care:** Including on-call doctors, psychologists and psychiatrists as well as the clinical management of rape.
- **Psychosocial Support:** Eight sessions of individual therapy are offered to support SGBV survivors to develop their capacities to understand their own emotions and learn how best to cope. Group therapy activities, including drama and art therapy, neuropsychology sessions and daily coaching sessions are part of the psychosocial support programme. The MWHs also provide tailored services and referrals to survivors with specific needs, including survivors with disabilities, those suffering trauma and stress, and those with diverse sexual orientations and gender identities. All psychosocial services are provided in-house, and support is available 24/7.
- **Case management:** Social workers provide survivors with the opportunity to express their needs, priorities and wishes and work with them to develop a tailored action plan. Such plans are designed to facilitate the survivors’ access to health services, mental health and psychosocial support, legal assistance (including an on-call lawyer), job placement, vocational training, social services, longer-term housing and other services.

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*Gender Equality Promising Practices: Syrian Refugees in the Middle East and North Africa (Geneva: UNHCR, December 2017)*
• **Education, skills building and job placement:** Different educational activities are provided for children, adolescent girls and women. Women and adolescent girls are offered language classes, vocational training and activities to build life skills, for example in communication skills, stress and anger management, resource allocation and budgeting. They are also encouraged to participate in targeted psychosocial support activities (e.g. film club and art activities, including jewelry making and painting). Social workers assist women to identify job opportunities and accompanying them to interviews. Children participate in psychomotor activities, sports, games, and arts and crafts, including activities that emphasize gender equality. Classes in remedial Arabic and English, mathematics and science are also provided.

• **Peer-to-peer skills building:** Survivors with specific skills (English, cooking, housekeeping, child care, make-up application, hairstyling, dancing, painting, sewing, etc.) teach other women and girls with the supervision of staff members. The peer-to-peer skills building programme enables survivors to recognize and appreciate their individual strengths, to support themselves in their recovery and to resume a more routine way of life.

• **Recreation:** Weekly activities targeting mothers and their children help build positive parenting and communication skills. Entertainment activities for all residents of the MWHs include eco-tourism, ceremonies and celebrations both within the shelter and outside.

• **Reintegration:** Social workers support survivors to design their own reintegration plans, including visits to other communities and participation in activities outside the MWH. Activities aimed at social integration outside the shelter include visits to older women and men; sales of baked goods, with the revenue distributed to families in need; clothes collection and distribution drives in collaboration with the Lebanese Red Cross; and drafting letters to women who have recently arrived at the MWHs.

• **Exit:** Following reintegration activities, the MWH social workers evaluate the survivors’ coping and self-help mechanisms and their ability to adapt to their new circumstances. All survivors complete an exit plan prior to leaving the MWH and are encouraged to choose where they live next. The exit plan is developed together with a social worker and in coordination with referral agencies. Some survivors choose a solution away from their families, often in temporary collective shelters such as the Danish Refugee Council collective shelter, the UNHCR Shelter Unit and the Caritas Lebanon Migrant Center. Others may opt for a long-term shelter such as those provided by the Maryam and Martha Association, Good Shepherd Sisters, Service de l’Enfant au Foyer and the YMCA.

4. **Partners and resources**

There are 10 dedicated staff members in each MWH, including shelter directors, case managers (who hold a bachelor’s degree in social work and have a minimum of two years’ experience related to SGBV and child protection), social workers, psychotherapists, lawyers, child care attendants, night attendants and drivers. Key staff members who work with survivors have been trained in case management and survivor-centred approaches, the principles on working with survivors, and confidentiality practices.

As previously mentioned, the MWHs are included in the inter-agency SGBV working group. ABAAD coordinates with UNHCR and other UN agencies, the Ministry of Social Affairs and national and international civil society organizations so that survivors can be referred to the MWHs. Staff of the MWHs also liaise with the local community, police and other security providers in order to raise awareness of the shelter and prevent and respond to any security incidents.

The MWH staff work in close collaboration with other civil society organizations, including INTERSOS, Danish Refugee Council, Caritas Lebanon Migrant Center, Makhzoumi Foundation, Maryam and Martha Association, Mission de Vie, Lebanese Red Cross, Service de l’Enfant au Foyer, Good Shepherd Sisters and UPEL, both by providing referrals to their services and jointly designing exit plans. UNHCR, UNICEF, OCHA, Norwegian People’s Aid, Norwegian Church Aid and Caritas Austria contribute to the MWHs’ operational and service costs.
5. Participation and accountability

The MWHs are managed using a survivor-centred approach that encourages women and girls to make decisions about their own lives while providing them with the services they request. Women and girls actively participate in the daily management of the shelter and are directly engaged in decision making, in addition to taking on tasks such as cleaning, cooking, gardening and organizing activities. They are also encouraged to share their skills with others at the MWHs.

After each session or event, survivors complete a form outlining their feedback and addressing any concerns they may have. They are also invited to share negative feedback anonymously through a complaint box. Both senior management of the MWH and the director of ABAAD follow up on these complaints in accordance with ABAAD’s complaints response mechanism.

Once the problem raised through the complaints response mechanism has been addressed, the ABAAD monitoring, evaluation, accountability and learning officer ensures that all corrective procedures have been implemented. The entire process is documented in the complaint and feedback tracking database. Survivors also complete an exit survey which enables them to provide feedback on the services offered by the MWHs.

Staff at the MWHs use a coding system for filing and documentation in order to ensure confidentiality and avoid putting the survivors at further risk. A follow-up and feedback mechanism that works through coordination with the stakeholders and case managers or through direct communication with the survivors is also in place.

Age, Gender and Diversity Approach

The MWH targets women and adolescent girl survivors of SGBV within both refugee and host communities. Particular emphasis is placed on reaching individuals with specific needs, including persons with diverse sexual orientations and gender identities, as well as people living with disabilities. One of the MWHs is wheelchair accessible and ABAAD, with support from UNHCR, is currently renovating another MWH, including ensuring accessibility for persons with disabilities. In addition, MWHs provide referrals to organizations dedicated to supporting LGBTI persons.

Male SGBV survivors, including men and boys from the ages of 12 to 18, are referred to a select number of separately administered shelters that welcome them, such as Mission De Vie and UPEL. Mothers are whose sons are in the shelters are encouraged to visit them in order to keep family ties strong.

International Medical Corps and ABAAD also run a Men’s Centre for men with abusive behaviours in order to prevent SGBV by offering confidential and anonymous services, including one-to-one psychosocial support sessions, to increase emotional self-awareness and promote behavioral change.
6. Results

Since their establishment more than three years ago, the MWHs have hosted more than 400 women, girls and boys. Many organizations frequently refer women to the MWHs due to their reputation for offering immediate safe shelter. The availability and accessibility of the MWHs has played a significant role in the lives of SGBV survivors who have nowhere else to turn, allowing them to receive vital services, escape abusive situations and begin their recovery.

Survivors who have received support from the MWHs say that the shelters served as a safe home away from home. They were pleased with the opportunity to learn, teach others and gain confidence, as well as grateful for the opportunity to meet others in similar situations and heal together.

The MWH teams support survivors in developing their exit plans based on their own needs, wishes and priorities. For instance, one woman who took shelter in an MWH was hired to work in a shelter for children after she was evaluated by the shelter’s staff on her skills and capabilities. In 2016, ABAAD secured 10 job placements for Lebanese MWH residents.

Almost 75 per cent of the women who had used the services of the MWHs were able to successfully begin their recovery from trauma and lead better lives after leaving the shelters. Of these:

- 25 per cent opted to return to supportive family members and are now living peaceful lives.
- 60 per cent found more permanent solutions away from their families, mostly in collective shelters.
- 15 per cent returned to their spouses/parents (while continuing follow-up with referral agencies or ABAAD safe spaces).

Sustainability

This project is entirely funded by external donors. However, since the activities and services of MWHs are carried out in consultation and close coordination with relevant national civil society organizations and government institutions, it may be possible to formalize partnerships with them in order to contribute to the sustainability of the services.

7. Lessons learned

Establishing and running a safe shelter with comprehensive service provision is a challenging endeavour. Lessons learned from the experience of the MWHs include:

- It is important to build and maintain relationships with the surrounding community in order to gain support for the work of the shelter and to help increase security and integration.
- A close working relationship with the police and other security providers is critical to prevent and respond to any security incidents.
- The location and layout of the shelter is important to its success, as survivors need open spaces to improve their well-being.
- Working with survivors with disabilities requires adaptation of the MWH structures and services. It must be noted that accommodating survivors with psychosocial disabilities can be quite challenging and sometime risky both for the survivors and others in the shelters.
- Mental health services in Lebanon, where there is only one mental health hospital, are very expensive. There is an urgent need for specialized emergency safe shelters for SGBV survivors that require mental health related support.
- There is a need to engage in constant fundraising.
Potential Risks and Mitigation Strategies

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<tr>
<th>Risk</th>
<th>Mitigation</th>
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<tr>
<td>Reintegration could lead to continuing and/or escalating violence.</td>
<td>Comprehensive exit plans developed by survivors in collaboration with social workers and other service providers adequately assess the risk of violence and ensure referrals to temporary or longer-term shelters if necessary. Regular follow-up with survivors who choose to reconcile with their partners provides ongoing monitoring and support, including referring their partners to the International Medical Corps and ABAAD’s Men’s Centre and to individual and couple therapy.</td>
</tr>
<tr>
<td>The abduction of children and adolescent girls by abusive family members is considerably higher if they attend school.</td>
<td>MWH staff members provide non-formal education sessions to ensure that children and adolescents have access to education during their stay at the shelter. However, there is an ongoing debate on how to reconcile the shelter’s objective of preventing SGBV with the right to education.</td>
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</tbody>
</table>

8. Recommendations

There is a shortage of safe shelters for SGBV survivors around the world and in the MENA region. Forcibly displaced and stateless women and girls face additional obstacles in accessing shelters, including a shortage of space, the need to travel long distances to reach shelters, lack of information and an inability to bring their children along. There is also a gap in the provision of specialized shelter services for SGBV survivors with disabilities. Therefore, it is good practice to establish shelters that are more easily accessible to all refugee and host-community women and girls, including persons with disabilities. The MWHs could be expanded as well as replicated in other contexts, as long as they are adapted to meet the specific needs of survivors and they take into account the specific legal, social and security contexts unique to the location.

It is important to keep the following considerations in mind:

- The shelter needs to be accepted by the community in which it is located. Outreach and good communication with neighbours and local police is crucial.
- It is important to develop a strategy that will ensure the long-term sustainability of the MWHs. Collaboration with government agencies, municipalities, the private sector and civil society partners will encourage buy-in, referrals and support.
- The MWH model might work better in urban rather than rural contexts, especially with regard to security and the accessibility of services.

9. More information

UNHCR Lebanon: lebbe@unhcr.org

ABAAD Website: http://www.abaadmena.org/

ABAAD Email: abaad@abaadmena.org

ABAAD Documentary on Al-Dar Emergency Safe Housing

ABAAD Brochure on Al-Dar Emergency Safe Housing

ABAAD Video, Tools and Forms: A video providing an overview of the MWHs, tools and templates, and referral and exit plan forms can be requested from ABAAD.

Inter-Agency Standard Operating Procedures (SOPs) for SGBV Prevention and Response in Lebanon (2014).

Other Resources


Gender-Based Violence Information Management System (GBVIMS).

UNHCR SGBV Prevention and Response Training Package (October 2016).

UNHCR Action against Sexual and Gender-Based Violence and Response: An Updated Strategy (June 2011).

UNHCR Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons – Guidelines for Prevention and Response (May 2003).

Faysal El Kak, Male Survivors of Sexual Assault: A Manual on Evaluation and Management for General Practitioners (MOSAIC), in Arabic, in English.

WAY FORWARD

During the 22 November 2016 validation workshop in Amman, Jordan, participants shared common challenges they face when working on gender equality as well as developing a set of key recommendations for taking forward these gender equality promising practices.
Challenges and solutions

Through interactive exercises, workshop participants identified and discussed common challenges they face when promoting gender equality within their work with refugees and IDPs.

Challenges

- Changing institutional culture as well as attitudes and behaviors of individual staff.
- Measuring impact of programming and advocacy on gender equality.
- Knowledge management, including related to gender equality.
- Numerous staff and high staff rotation, raising challenges in relation to establishing and maintaining sufficient gender equality capacity.
- Management commitment to gender equality.
- Buy-in from humanitarian staff and partners.
- Shared understanding of gender equality, beyond the focus on SGBV.
- Lack of practical gender equality guidance, tools and resources, including checklists.
- The need for meaningful and substantive integration of gender equality as a core principle and objective of humanitarian agencies, rather than as a token exercise.
- Lack of staff capacity and accountability on gender equality.
- Cultural essentialism rather than recognizing cultural diversity, change and the need for gender equality work in all regions and settings.
- Lack of support for diversity and gender equity within own organizations, including need for review of own policy, strategies, codes of conduct and internal procedures.
- The need for more meaningful engagement with communities, including preparatory work and long-term engagement.
- Donor constraints and short-term funding cycles.

Workshop participants also shared potential solutions to four of the identified challenges.

Sustainable and effective engagement with communities

Engaging with communities to promote gender equality must use a bottom-up approach, where diverse women, men, girls and boys of concern are fully involved from the beginning in identifying needs and priorities and then implementing the initiatives. Participatory methods, such as community social action and analysis, can be particularly useful. Only once the priorities have been established by the communities themselves, should proposals be taken to donors/international organizations. Communities should be treated as partners rather than grantees. Humanitarian staff need to be trained on how to engage with communities in a participatory and equitable manner. Having an active conversation about gender equality with communities, as well as involving both male and female humanitarian staff in community outreach is also helpful. Finally, it is important to recognize that change needs to happen at many different levels, both local and national, and that it takes time – so long-term, sustainable engagement is vital.
Accountability

In order to hold staff, particularly senior management, accountable for promoting gender equality, it is useful to have included gender equality in the core organizational objectives/outcomes as well as audit and reporting processes. Reporting on progress on gender equality, including conducting institutional gender and diversity audits, and celebrating successes can support accountability. Making gender equality minimum standards and tools mandatory can also be an effective approach. Another strategy is to hire gender equality specialists to support colleagues to improve their work, identify and support gender equality advocates within the organization, and to build an internal movement/network. At another level, gender-sensitive feedback mechanisms and complaints procedures, including internally amongst staff and externally with persons of concern, are absolutely essential to improving accountability.

Changing staff attitudes and behaviours

Having clearly defined institutional standards and expectation on gender equality, including within codes of conduct and through policies on the prevention and response to sexual exploitation and abuse and sexual harassment, is a much needed foundation for change in staff attitudes and behaviours. Making sure these gender equality standards are clearly specified in all staff terms of reference and thereby in their annual personnel appraisal is also important.

Working with UNHCR and partner staff and affiliate workforce to change attitudes and behaviours can also be done through ongoing capacity building, including self-assessment of own attitudes, interactive on-the-job training and systematic mentoring. Showcasing how behavioural change on gender equality can happen and demonstrating that it can be fun, creative and lead to transformation is another useful strategy. Rewarding staff for changing, even small habits, can be an important incentive. Finally, where gender inequality may be deeply entrenched, mitigation measures may be useful.

Limited capacity, including due to high staff rotation

Establishing a system of gender focal points and mentors, with clear terms of reference and adequate training and support, can greatly improve internal gender equality capacity. Clear gender equality minimum standards and simple tools also assist in building institutional capacity, especially if they are practical and user friendly. Ensuring adequate handover and improved systems of knowledge management can help increase institutional memory to reduce the negative impact of high staff rotation. For instance, one strategy is to create shared online spaces to store information on gender equality among relevant UN agencies and non-governmental organizations (NGOs). Finally, including mandatory training on gender equality as part of staff induction/orientation programmes will improve capacity and also help address issues of high staff rotation.
Recommendations

In order to strengthen, upscale, adapt, replicate and promote gender equality promising practices in the MENA region, these are the key overarching recommendations for UNHCR and partner staff, in particular senior management:

• **Improve gender-sensitive evidence-based programming:** Increase the collection and analysis of sex, age and diversity-disaggregated data and adoption of gender-sensitive indicators and accountability mechanisms such as gender markers. Also regularly document and share information on gender equality practices, including successful mainstreaming of gender equality in sectors such as education, water, sanitation and hygiene (WASH), livelihoods and others. Build upon these promising practices, strengthen and upscale existing initiatives and adapt and replicate new initiatives.

• **Increase prioritization of gender equality:** Advocate within UNHCR operations and with other key actors to prioritize resources, including funding, for gender equality projects as well as mainstreaming gender equality into sectoral work.

• **Work with host community women and girls:** Better incorporate women and girls from host communities in gender equality projects to foster sustainability, solidarity and community.

• **Strengthen gender equality knowledge and skills:** Develop the technical capacity of UNHCR and partner staff on gender equality conceptually as well as operationalising it in practical and diverse ways, including on increasing the participation, decision making, and access for women and girls; protection and services for LGBTI persons; adequate response for male survivors of SGBV; and promoting gender equality through community engagement, including with men and boys. Also develop the technical capacity of gender focal points on specific sectors, such as livelihoods and shelter.

• **Identify and develop new partnerships:** Identify and collaborate with new partners, including local civil society organizations working for gender equality and LGBTI rights, in particular women’s organizations.

• **Engage with partners to ensure gender equality is prioritised:** Engage with existing partners in all sectors of humanitarian response, including basic needs, protection, shelter, WASH, education, health, livelihoods and food security to promote gender equality within these areas of work.

• **Share existing gender equality resources:** Share existing gender equality related materials such as guidance, handbooks, tools, checklists and training materials.

• **Create gender equality standards and tools:** Develop agreed standards on gender equality for different sectors, as well as practical tools geared towards strengthening operational responses including in emergency settings.

• **Create a network of gender focal points:** Establish a global or regional network of gender equality focal points to share expertise, good practices and joint advocacy, training and projects.

• **Increase staff accountability:** Increase accountability and motivation for staff to promote gender equality through their work, for instance through inclusion in terms of reference and annual personnel appraisal.
ANNEX 1

Terms of reference for the sector gender focal points network (2017)

Background

The Jordan Refugee Inter-Agency Task Force (IATF) oversees the humanitarian response to people seeking refuge in Jordan away from the crisis in Syria. The responses are organized into the following eight sectors: Basic Needs, Education, Food Security, Health (including Mental Health, Nutrition and Reproductive Health), Livelihoods, Protection (including Child Protection, Sexual and Gender-Based Violence and Mental Health/Psycho-social), Shelter and WASH.

The IATF wants to ensure that humanitarian responses do not further perpetuate gender inequalities through the distribution of goods and service provision. Consequently, sectors were requested to nominate gender focal points to assist the sector leads to incorporate gender equality measures into their collective programming. Nominated sector gender focal points are provided with basic training on gender equality measures within humanitarian action. There is at least one gender focal point per sector.

It is acknowledged that the role of Gender Focal Points is taken on by agency staff with existing workloads.

This role is a vital contribution to the building of the capacities of sectors to identify the distinct needs of women, girls, boys and men seeking assistance and tailor strategies and performance indicators appropriately. It will support the work of the IATF Strategic Action Plan. Consequently the IATF will support and review its operations and the ability of sectors to operate in a gender – inclusive manner.

Due to the work of the Sector Gender Focal Points Network (SGFPN) and the Senior GenCap Advisers in 2015-2016, the Jordan Refugee Response has become more gender responsive with a continued commitment to mainstreaming gender in sector interventions. The gender marker was applied to the Jordan Humanitarian Fund call for applications. The Gender Equality in Humanitarian Action training was conducted for the SGFPN members and filed staff in May 2016. Refresher gender training sessions were conducted for SGFPN members throughout 2016. Gender analysis for each sector was initiated in 2016; the Education and Health Sectors completed their respective sector gender analysis by the end of 2016.

Main Responsibilities

1. Gender mainstreaming strategy

   Support the Sector Coordinator within their nominated sector to mainstream gender into the Sector Response Plan. This should include gender analysis within situation analyses and a clear disaggregation of the gender needs of refugees, which will be monitored and reported on.

2. Technical Support within Sector Meetings

   ▶ Advocate for the inclusion of gender issues in project formulation, raising relevant gender issues relevant to project.

   ▶ Advocate for sector assessments to disaggregate data by sex and age.
Support the sector to interpret and analyse the differences for women, girls, boys and men and encourage this in order to shape the development of appropriate activities.

Support the inclusion of gender equality measures (ADAPT ACT C framework) in implementation activities and monitoring and evaluation.

Contribute sector information and analysis to facilitate an overview of gender equality measures in humanitarian action.

Promote inter-sector linkages for gender mainstreaming.

3. Capacity Development

Identify the needs of colleagues for information and training in gender equality mainstreaming.

Support the Sector Coordinator to develop and deliver sector-appropriate gender in programming workshops and training in the Gender Marker.

Encourage staff to raise gender equality issues in the sector.

4. Knowledge Management

Participate in IATF’s Sector Gender Focal Point Network.

Share information and experiences with the Sector Gender Focal Point Network.

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ADAPT ACT C stands for: Analyse gender differences; Design services to meet needs of all; Participate equally; Train women and men equally; Address GBV in sector programmes; Collect, analyse and report sex- and age-disaggregated data; Target actions based on a gender analysis; Coordinate actions with all partners.
ANNEX 2

Gender focal points network work plan (2017)

Objective: The Jordan Refugee Interagency Taskforce (IATF) seeks to ensure that women and men (including young adults and elderly), girls and boys (including adolescents, children and infants) are able to equitably access the available humanitarian resources irrespective of their gender or age. This reflects the policies of its member agencies. One of the strategies that it uses is to sponsor a cross-sectorial network that focuses on how to effectively promote gender equality in the sectors’ needs analyses, strategic responses and activities, and response indicators. The Sector Gender Focal Point Network (SGFPN) comprises gender focal points nominated from each of the refugee sectors and is chaired by these agencies that lead refugee sectors: UNHCR, UNICEF and WFP. The role of the Gender Focal Points is to support their nominating sector to incorporate and monitor gender equality measures. The Network uses a range of strategies to support its members, including: peer-learning, information sharing, coaching, training, training others, and sharing useful resources.

<table>
<thead>
<tr>
<th>Key Areas of Work</th>
<th>Activities</th>
<th>Expected Output</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>Comments</th>
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</thead>
<tbody>
<tr>
<td>Monitoring &amp; Analysis</td>
<td>Interact with sector coordinators monthly to advocate for inclusion of gender equality in sector work</td>
<td>Update the SGFPN at monthly meetings</td>
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<td>All GFP should review sector work plan, raise issues, and if necessary, request a standing agenda item on sector meetings or have regular meetings with sector chairs.</td>
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<tr>
<td>Monitoring &amp; Analysis</td>
<td>Learn how to analyse and review the sex and age disaggregated data in Sector Dashboard</td>
<td>Attend the session by Inter-Sector Coordination Information Management Team on the Sector Dashboard and learn on how to good use of the data</td>
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<td>All GFP get familiarized on how to analyse the Sector Dashboard</td>
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<tr>
<td>Monitoring &amp; Analysis</td>
<td>Review the sex and age disaggregated data in Sector Dashboards</td>
<td>Review and highlight any issues with the sector coordinators</td>
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<td>All GFP should review the data monthly when it is updated and raise any issues with the sector chairs.</td>
</tr>
<tr>
<td>Monitoring &amp; Analysis</td>
<td>Support/lead on reviewing a gender analysis 2016 of the sector</td>
<td>2016 Gender Analysis for each sector to be reviewed to prepare for the updated Gender Analysis in 2018.</td>
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<td>All GFP can host a gender analysis workshop, update the gender analysis for your sector, or develop another activity (Education and Health Sectors to Phase 2; other sectors to finalize their sector gender analysis.)</td>
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<tr>
<td>Review sector work plan from gender perspective</td>
<td>All sector work plans have incorporated gender.</td>
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<td>Before the new annual work plan development, all GFP should work to review and enforce gender is included in sector work plan.</td>
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<tr>
<td>Applying Age and Gender Marker</td>
<td>Conduct Refresher sessions for the network</td>
<td>FP to get refresher training sessions on Gender Marker</td>
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<td>All GFP get Gender Marker refresher sessions.</td>
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<tr>
<td>Applying Age and Gender Marker</td>
<td>Conduct Refresher sessions for Sector Members</td>
<td>FP to deliver training for sector partners on Gender Marker</td>
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<td>All GFP conduct Gender Marker sessions every six months for sector partners.</td>
</tr>
<tr>
<td>Applying Age and Gender Marker</td>
<td>Support sector to apply Age and Gender Marker to relevant humanitarian planning and funding documents</td>
<td>All documents have incorporated age and gender and will score 2 on IASC Age and Gender Marker.</td>
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<td>All GFP can support the sectors to ensure that the age and gender markers are applied accurately.</td>
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<tr>
<td>Key Areas of Work</td>
<td>Activities</td>
<td>Expected Output</td>
<td>01</td>
<td>02</td>
<td>03</td>
<td>04</td>
<td>Comments</td>
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<tr>
<td><strong>Capacity Building</strong></td>
<td>Training on refresher sessions for GBV guidelines</td>
<td>Deliver refresher training for SGFPN</td>
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<td>Training on Information Management and Monitoring and Evaluation and Gender</td>
<td>Deliver training for SGFPN</td>
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<td>Information Management presentation on Sector Dashboard in April 2017</td>
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<td>Training on LGBTI</td>
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<td>Training on Advocacy techniques</td>
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<td></td>
<td>Gender Awareness, Gender Analysis, Gender Planning, Monitoring and Reporting</td>
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<td><strong>Resource Sharing</strong></td>
<td>Disseminate gender resources and analysis for sharing and advocacy purposes</td>
<td>Monitor resources in your sector and share all gender analysis that you find within sector.</td>
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<td>All GFP should keep themselves aware of current developments and guidance on gender for their sector. Presentations to the Sector and to the SGFPN can be made for new resources.</td>
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<td>Keep Data Portal active</td>
<td>All focal points and chairs share resources from your sector, update with meeting minutes, share training modules</td>
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<td>All GFP, Co-Chairs</td>
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<tr>
<td><strong>Coordination</strong></td>
<td>Attend sector meetings regularly</td>
<td>All GFP must attend their sector meetings regularly</td>
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<td>All GFP</td>
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<tr>
<td></td>
<td>Attend SGFPN meetings regularly</td>
<td>All GFP must attend monthly meetings</td>
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<td></td>
<td>Identify gender focal points in your sector</td>
<td>When there is turnover, the GFP and sector chairs identify and nominate new FPs.</td>
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<td>All GFP should also identify and recruit possible new gender focal points to improve capacity within the sector.</td>
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<td></td>
<td>Engage with other relevant networks on gender issues</td>
<td>Sector Focal Points continue to share gender expertise</td>
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<td>All GFP are encouraged to participate in relevant gender forum.</td>
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<td>Updated and shared contact list</td>
<td>Updated contact list available</td>
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<td>Co-chairs update the list of SGFPN.</td>
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<td></td>
<td>Review and Update TOR for SGFPN</td>
<td>Update and review yearly</td>
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<td>All GFP</td>
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<td>Develop and disseminate a briefing note on role of SGFPN</td>
<td>Draft and circulate within the sectors</td>
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