Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons

Guidelines for Prevention and Response

May 2003
Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons

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Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons
In every community in the world there are people who have been affected by acts of brutality. Atrocities committed by armed groups in conflict situations are often well publicized, while abuses committed behind closed doors in the confines of one’s own home often remain completely hidden. Refugees and internally displaced people, who do not enjoy the protection of their own governments, are among those most vulnerable to acts of violence, including sexual and gender-based violence.

We have learnt that sexual and gender-based violence is most prevalent in environments where there is a general lack of respect for human rights. Sexual and gender-based violence is, of course, itself a human rights violation. Women and children, who are often most vulnerable to human rights abuses, are also the ones who suffer most from sexual and gender-based violence.

These Guidelines offer practical advice on how to design strategies and carry out activities aimed at preventing and responding to sexual and gender-based violence. They also contain information on basic health, legal, security and human rights issues relevant to those strategies and activities.

The Guidelines were developed in consultation with UNHCR’s partners in refugee protection: governments, inter-governmental agencies and non-governmental organisations. They are intended for use by UNHCR staff and members of operational partners involved in protection and assistance activities for refugees and the internally displaced. They have been tested in 32 countries around the world with the participation of more than 60 partners.

Sexual and gender-based violence is a serious problem, and one which we must tackle head-on. We have developed a number of tools to help to prevent it, and to assist survivors when we are unable to prevent it. It is up to all of us who work with refugees and internally displaced people to use these tools effectively.

Ruud Lubbers
United Nations High Commissioner for Refugees
INTRODUCTION

Background

UNHCR first published Sexual Violence against Refugees: Guidelines on Prevention and Response in 1995. By that time, it had become clear that the magnitude of the problem called for a focused approach and considered, concerted actions that had not, until then, been adequately formulated and compiled in any of UNHCR’s earlier publications. The 1995 Guidelines helped create a greater awareness and understanding of this serious human rights violation and laid the foundations for developing programmes to prevent and respond to it. Yet sexual and gender-based violence against refugees, especially women and children, continues unabated. It has been exacerbated by unequal gender relations within communities of concern; it has been used as a weapon of war and as a means of exercising power; it has been both a cause of forced displacement and a terrible consequence of the breakdown of family and community structures that accompanies displacement. It has also been perpetrated by some of the very people who have been entrusted with the task of protecting refugees and displaced persons.

Since 1995, many lessons have been learned concerning individual, institutional and national responsibilities for implementing the Guidelines and for providing protection to uprooted persons. Throughout those years, UNHCR, other UN agencies, governmental and non-governmental organisations, refugees, returnees and internally displaced persons have evaluated the programmes and activities suggested in the Guidelines in the context of complex emergency situations. The culmination of this evaluation process was the Inter-Agency Lessons Learned Conference on Prevention and Response to Sexual and Gender-Based Violence in Refugee Situations, which was held in Geneva in March 2001.

Participants at the Conference identified areas for improvement and highlighted the importance of revising the 1995 Guidelines to reflect progress made over the years and to refine an inter-agency, multi-sectoral approach to addressing sexual and gender-based violence against refugees, returnees and internally displaced persons. Recommendations from the Conference included strengthening institutional commitment by developing a Code of Conduct for humanitarian workers; setting common minimum standards for addressing sexual and gender-based violence; supporting the allocation and management of adequate funding and staff; and integrating a gender-equality perspective in institutional practices. Participants emphasised the need to engage the refugee community in all stages of programme delivery: design, implementation, monitoring and evaluation.
## Contents of the Guidelines

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Wherever appropriate, readers are directed to additional sources for more detailed information on specific topics. The titles of these reference materials are provided in shaded boxes throughout the text. "See also:" Sample forms that can be adapted for use in specific situations are included as Appendices. A detailed list of suggested resources appears after the appendices. Electronic versions of selected documents have been included on the CD-ROM that accompanies these Guidelines.
These Guidelines apply to situations in which there are refugees, returnees, internally displaced persons, and/or asylum-seekers. Although UNHCR’s mandate and actions may differ depending on whether the persons of concern are refugees or internally displaced persons, other bodies, such as host country authorities, NGOs, or other UN agencies, may protect and assist both refugees and internally displaced persons.

For the sake of convenience, the term refugees refers also to asylum-seekers, returnees and internally displaced persons, both female and male, children and adults. Similarly, the term refugee settings refers to transit facilities, reception centres, refugee camps, places of detention for asylum-seekers, way-stations during repatriation movements, and centres for communities of internally displaced persons. While most of the recommendations for refugee settings apply in both rural and urban contexts, whenever necessary, specific actions to be taken in specific circumstances are highlighted.

The term victim(s)/survivor(s) refers to individuals or groups who have suffered sexual and gender-based violence. While victims should be treated with compassion and sensitivity, referring to them as survivors recognises their strength and resilience. Sometimes, however, a victim of sexual and gender-based violence remains a victim, despite personal efforts and external support. In certain legal contexts, the term victim may be appropriate and/or required to conform to relevant laws when seeking legal redress. In non-legal settings, however, the word victim may imply powerlessness and stigmatisation, characterisations that are to be avoided by all concerned parties. To recognise all of these contingencies, both terms are used.

While men and boys are often victims/survivors of sexual violence, statistics confirm that the majority of victims/survivors are women and girls. As an acknowledgement of this reality, the Guidelines use feminine pronouns to describe victims/survivors.

The term actors refers to individuals, groups, organisations and institutions involved in preventing and responding to sexual and gender-based violence. Actors may be refugees, local populations, employees or volunteers of UN agencies, NGOs, host government institutions, donors and other members of the international community.
CHAPTER 1
OVERVIEW OF SEXUAL AND GENDER-BASED VIOLENCE

Sexual and gender-based violence is a violation of human rights. This kind of violence perpetuates the stereotyping of gender roles that denies human dignity of the individual and stymies human development. The overwhelming majority of the victims/survivors of sexual and gender-based violence are women and girls.

Sexual and gender-based violence includes much more than sexual assault and rape. Although it may occur in public contexts, it is largely rooted in individual attitudes that condone violence within the family, the community and the State. The root causes and consequences of sexual and gender-based violence must be understood before appropriate programmes to prevent and respond to this violence can be planned.

As the United Nations’ refugee agency, UNHCR is mandated to provide international protection to refugees. UNHCR, together with States, thus shares the responsibility for ensuring that refugees are protected against sexual and gender-based violence.

A Few Facts about Sexual and Gender-Based Violence

- World-wide, an estimated 40 to 70 per cent of homicides of women are committed by intimate partners, often in the context of an abusive relationship.
- Around the world, at least one in every three women has been beaten, coerced into sex, or otherwise abused in her lifetime.
- Trafficking of humans world-wide grew almost 50 percent from 1995 to 2000 and the International Organisation for Migration (IOM) estimates that as many as 2 million women are trafficked across borders annually.
- More than 90 million African women and girls are victims of female genital mutilation.
- At least 60 million girls who would otherwise be expected to be alive are missing from various populations, mostly in Asia, as a result of sex-selective abortions, infanticide or neglect.
- In recent years, mass rape in war has been documented in Bosnia, Cambodia, Liberia, Peru, Somalia and Uganda. A European Community fact-finding team estimates that more than 20,000 Muslim women were raped during the war in Bosnia.
- Ninety-four percent of displaced households surveyed in Sierra Leone have reported incidents of sexual assault, including rape, torture and sexual slavery. At least 250,000, perhaps as many as 500,000, women were raped during the 1994 genocide in Rwanda.

From Violence Against Women: The Hidden Health Burden (World Bank 1994)
Fact Sheet on Gender Violence: A Statistics for Action Fact Sheet (L. Heise, IWTC, 1992)
and
Progress of the World’s Women (UNIFEM, 2000)
Protecting Refugees Against Sexual and Gender-Based Violence

All human beings are born free and equal in dignity and rights.

*Universal Declaration of Human Rights
UN General Assembly
10 December 1948*

Prevention of and response to sexual and gender-based violence are directly linked to the protection of human rights.

Human rights are universal, inalienable, indivisible, interconnected and interdependent. Every individual, without regard to race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or status, is entitled to the respect, protection, exercise and enjoyment of all the fundamental human rights and freedoms. States are obliged to ensure the equal enjoyment of all economic, social, cultural, civil and political rights for women and men, girls and boys.

Acts of sexual and gender-based violence violate a number of human rights principles enshrined in international human rights instruments. Among others, these include:

- The right to life, liberty and security of the person.
- The right to the highest attainable standard of physical and mental health.
- The right to freedom from torture or cruel, inhuman, or degrading treatment or punishment.
- The right to freedom of movement, opinion, expression, and association.
- The right to enter into marriage with free and full consent and the entitlement to equal rights to marriage, during marriage and at its dissolution.
- The right to education, social security and personal development.
- The right to cultural, political and public participation, equal access to public services, work and equal pay for equal work.

Several international instruments specifically address sexual and gender-based violence against women and girls. The *Convention on the Elimination of All Forms of Discrimination against Women* adopted by the General Assembly in 1981, the *United Nations Declaration on the Elimination of Violence against Women*, adopted by the General Assembly in 1993, and the *Beijing Declaration and Platform for Action*, adopted in Beijing in 1995, include all forms of discrimination as violence against women and girls and reaffirm States’ responsibility to work to eliminate them. Most recently, the *1998 Rome Statute of the International Criminal Court* defines rape, sexual slavery, enforced prostitution, forced pregnancy, enforced sterilisation or any other form

(UNHCR’s Executive Committee)…Deplores gender-related violence and all forms of discrimination on grounds of sex directed to refugee and displaced women and girls, and calls upon the States to ensure that their human rights and physical and psychological integrity are protected, and they are made aware of these rights.  

Executive Committee Conclusion No. 85 (XLIX), 1998

United Nations, human rights and humanitarian agencies share the responsibility with States to ensure that human rights are protected. As the UN refugee agency, UNHCR is mandated to provide international protection to refugees and seek durable solutions to their problems. Thus, UNHCR and States share the responsibility for ensuring that refugees are protected against sexual and gender-based violence.

UNHCR’s Definition of Protection

All actions aimed at ensuring the equal access to and enjoyment of the rights of women, men, girls and boys of concern to UNHCR, in accordance with the relevant bodies of law (international humanitarian, human rights and refugee law).

In settings where no actions to prevent and respond to sexual and gender-based violence have been taken, UNHCR should take the lead in co-ordinating and establishing, as part of its core activities, protection and assistance programmes that address this kind of violence. This includes advocating for the rights of refugees, advising States on how to adapt their national legislation so it conforms to international standards, and taking actions to minimise the risk of trafficking in persons, a risk that increases when individuals are displaced.

Trafficking in persons shall mean the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.

What is Sexual and Gender-Based Violence?

Sexual violence, gender-based violence and violence against women are terms that are commonly used interchangeably. All these terms refer to violations of fundamental human rights that perpetuate sex-stereotyped roles that deny human dignity and the self-determination of the individual and hamper human development. They refer to physical, sexual and psychological harm that reinforces female subordination and perpetuates male power and control.

While gender-based violence has a devastating impact on the lives of women and girls who are the majority of victims/survivors, it is also hinders the development of men and boys. Eliminating gender-based violence and gender inequalities helps to strengthen entire communities.

The term **gender-based violence** is used to distinguish common violence from violence that targets individuals or groups of individuals on the basis of their gender. Gender-based violence has been defined by the CEDAW Committee as violence that is directed at a person on the basis of gender or sex. It includes acts that inflict physical, mental or sexual harm or suffering, threat of such acts, coercion and other deprivations of liberty.

The term **violence against women** refers to any act of gender-based violence that results in, or is likely to result in, physical, sexual and psychological harm to women and girls, whether occurring in private or in public. Violence against women is a form of gender-based violence and includes sexual violence.

**Sexual violence**, including exploitation and abuse, refers to any act, attempt or threat of a sexual nature that results, or is likely to result, in physical, psychological and emotional harm. Sexual violence is a form of gender-based violence.

UNHCR employs an inclusive conception of **sexual and gender-based violence** that recognises that, although the majority of victims/survivors are women and children, boys and men are also targets of sexual and gender-based violence.

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### See also:

- Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (1984)
- Convention on the Elimination of All Forms of Discrimination against Women (1979)
- International Covenant on Civil and Political Rights (1966)
- International Covenant on Economic, Social and Cultural Rights (1966)
- Statute of the Office of the UNHCR GA Res 428(v) (1950)
- Universal Declaration of Human Rights (1948)
Expanded Definition of Sexual and Gender-Based Violence used by UNHCR and Implementing Partners
(based on Articles 1 and 2 of the UN General Assembly Declaration on the Elimination of Violence against Women (1993) and Recommendation 19, paragraph 6 of the 11th Session of the CEDAW Committee)

...gender-based violence is violence that is directed against a person on the basis of gender or sex. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty.... While women, men, boys and girls can be victims of gender-based violence, women and girls are the main victims. 
...shall be understood to encompass, but not be limited to the following:

a) Physical, sexual and psychological violence occurring in the family, including battering, sexual exploitation, sexual abuse of children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation.

b) Physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution.

c) Physical, sexual and psychological violence perpetrated or condoned by the State and institutions, wherever it occurs.

Sexual and gender-based violence is largely rooted in unequal power relations. These perpetuate and condone violence within the family, the community and the State. The distinction made between public and private spheres should not serve as an excuse for not addressing domestic violence as a form of SGBV. The exclusion of women and girls from the public arena only increases their vulnerability to violence within the family. Domestic violence reinforces gender-based discrimination and keeps women subordinate to men.

See also:
- Population Reports: Ending Violence against Women (Johns Hopkins University School of Public Health 1999)
- Violence against Women: The Hidden Health Burden (World Bank 1994)

Defining Key Concepts

Sexual and gender-based violence includes much more than sexual assault and rape. To understand its root causes and consequences, it is essential to define and distinguish between the terms gender and sex.

The term sex refers to the biological characteristics of males and females. These characteristics are congenital and their differences are limited to physiological reproductive functions.

Gender is the term used to denote the social characteristics assigned to men and women. These social characteristics are constructed on the basis of different factors, such as age, religion, national, ethnic and social origin. They differ both within and between cultures and define identities, status, roles, responsibilities and power relations among the members of any society or culture. Gender is learned through socialisation. It is not static or innate, but evolves to respond to changes in the social, political and cultural environment.
People are born female or male (sex); they learn how to be girls and boys, and then become women and men (gender). Gender refers to what it means to be a boy or girl, woman or man, in a particular society or culture. Society teaches expected attitudes, behaviours, roles and activities. Gender defines the roles, responsibilities, constraints, opportunities and privileges of men and women in any context. This learned behaviour is known as gender identity.

Women around the world are usually in a disadvantaged position compared to men of the same social and economic levels. Gender roles and identities usually involve inequality and power imbalance between women and men. Violence against women, and its acceptance within society and cultures, is one of the manifestations of this inequality and power imbalance.

A comprehensive prevention and response plan should focus on the roles and needs of both women and men and how both can become agents of change. Focusing only on women when addressing sexual and gender-based violence tends to place the responsibility for prevention and response on the victims/survivors.

Violence is a means of control and oppression that can include emotional, social or economic force, coercion or pressure, as well as physical harm. It can be overt, in the form of a physical assault or threatening someone with a weapon; it can also be covert, in the form of intimidation, threats, persecution, deception or other forms of psychological or social pressure. The person targeted by this kind of violence is compelled to behave as expected or to act against her will out of fear.

An incident of violence is an act or a series of harmful acts by a perpetrator or a group of perpetrators against a person or a group of individuals. It may involve multiple types and repeated acts of violence over a period of time, with variable durations. It can take minutes, hours, days or a lifetime.

Abuse is the misuse of power through which the perpetrator gains control or advantage of the abused, using and causing physical or psychological harm or inciting fear of that harm. Abuse prevents persons from making free decisions and forces them to behave against their will.

Coercion is forcing, or attempting to force, another person to engage in behaviours against her will by using threats, verbal insistence, manipulation, deception, cultural expectations or economic power.

“[Violence against women]….. is a manifestation of historically unequal power relations between women and men which have led to the domination over and the discrimination against women by men and to the prevention of the full advancement of women, and that violence against women is one of the crucial mechanisms by which women are forced into a subordinate position compared with men.”

UN Declaration on the Elimination of Violence against Women
23 February 1994
Power is understood as the capacity to make decisions. All relationships are affected by the exercise of power. When power is used to make decisions regarding one’s own life, it becomes an affirmation of self-acceptance and self-respect that, in turn, fosters respect and acceptance of others as equals. When used to dominate, power imposes obligations on, restricts, prohibits and makes decisions about the lives of others. To prevent and respond to sexual and gender-based violence effectively, the power relations between men and women, women and women, men and men, adults and children, and among children must be analysed and understood.

In humanitarian crises, affected populations depend on the protection and assistance of institutions. Humanitarian aid workers, government, security and law enforcement officials are in a privileged position as they have the power to make decisions that will affect the well-being of the persons they are assisting. Exploitation and abuse occurs when this disparity of power is misused to the detriment of those persons who cannot negotiate or make decisions on an equal basis. Exploitation and abuse can take the form of physical and psychological force or other means of coercion (threats, inducements, deception or extortion) with the aim of gaining sexual or other favours in exchange for services.

In institutional terms, sexual exploitation and abuse by humanitarian staff represents a failure on the part of humanitarian agencies, whose stated role is to provide protection and care.

Inter-Agency Standing Committee
Policy Paper on the Protection from Sexual Abuse and Exploitation in Humanitarian Crises
Rome 9 April 2002

Consent is when a person makes an informed choice to agree freely and voluntarily to do something. The phrase against her will is used to indicate an absence of informed consent. There is no consent when agreement is obtained through the use of threats, force or other forms of coercion, abduction, fraud, deception, or misrepresentation.

The use of a threat to withhold a benefit, or a promise to provide a benefit, in order to obtain the agreement of a person is also an abuse of power; any agreement obtained this way is not considered to be consensual. There is also no consent if the person is below the legal (statutory) age of consent or is defined as a child under applicable laws (see Chapter 5).

A perpetrator is a person, group, or institution that directly inflicts, supports and condones violence or other abuse against a person or a group of persons. Perpetrators are in a position of real or perceived power, decision-making and/or authority and can thus exert control over their victims.

It is a myth that sexual and gender-based violence is usually perpetrated by strangers. In fact, most acts of sexual and gender-based violence are perpetrated by someone known to the survivor, and many violent incidents are planned in advance.
Sexual and gender-based violence can also be perpetrated by family and community members. States and institutions condone and perpetrate sexual and gender-based violence when discriminatory practices are not challenged and prevented, including through the use of legal and policy instruments. During war and conflict, sexual and gender-based violence is frequently perpetrated by armed members from warring factions.

Perpetrators of sexual and gender-based violence are sometimes the very people upon whom survivors depend to assist and protect them.

Most cases of sexual and gender-based violence involve a female victim/survivor and a male perpetrator. Most acts of sexual and gender-based violence against boys and men are also committed by male perpetrators.

**Intimate partners** (husbands, boyfriends): In most societies, the accepted gender role for male intimate partners is one of decision-making and power over the female partner. Unfortunately, this power and influence is often exerted through discrimination, violence, and abuse.

**Family members, close relatives and friends:** Girls are far more likely to suffer sexual and gender-based violence within the domestic sphere. From neglect to incest, these human rights violations are not always reported, since they involve fathers, stepfathers, grandfathers, brothers and/or uncles as perpetrators. Harmful traditional practices also take place with the knowledge and sometimes the participation of family members and close relatives and friends.

**Influential community members** (teachers, leaders, politicians): Leaders and other community members in positions of authority can abuse that power through acts of sexual and gender-based violence. The victim/survivor in these situations is even more reluctant to report the violence because of the perpetrator’s position of trust and power within the community.

**Security forces and soldiers, including peacekeepers:** Soldiers are often the embodiment of ultimate power. They are usually armed and have a mandate to ensure security in communities. In some settings, soldiers can - and do - detain and/or arrest people with impunity. Often, soldiers and security forces are in the position of granting or withholding rights and privileges for refugees. Crossing borders, going through checkpoints, and requesting goods and services from armed forces can increase the risk of becoming subjected to sexual and gender-based violence, especially for refugee women.
**Humanitarian aid workers**: International, national and refugee staff of humanitarian aid organisations, including NGOs, UN agencies, and host government ministries, hold positions of great authority in refugee settings. They are perceived by the community to have money, influence and power. Unfortunately, there have been cases of workers abusing this power and committing acts of sexual and gender-based violence. It is crucial that all humanitarian aid staff receive training and sensitisation about gender and sexual and gender-based violence and that they be held accountable for inappropriate behaviour. (See Appendix 1 for UNHCR’s Code of Conduct (2002).)

**Institutions**: Discriminatory practices in the delivery of social services help maintain and increase gender inequalities. Withholding information, delaying or denying medical assistance, offering unequal salaries for the same work and obstructing justice are some forms of violence perpetrated through institutions.

**See also:**
- The UNHCR Code of Conduct (2002)

### Types of Sexual and Gender-Based Violence

The following table describes some of the more common forms of sexual and gender-based violence. The list is neither exhaustive nor exclusive. It is a practical tool that can be used in each location to help identify the different forms of sexual and gender-based violence that exist. Acts of sexual and gender-based violence have been grouped into five categories:

- Sexual violence.
- Physical violence.
- Emotional and psychological violence.
- Harmful traditional practices.
- Socio-economic violence.
## Sexual Violence

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<tr>
<td>Rape and marital rape</td>
<td>The invasion of any part of the body of the victim or of the perpetrator with a sexual organ, or of the anal or genital opening of the victim with any object or any other part of the body by force, threat of force, coercion, taking advantage of a coercive environment, or against a person incapable of giving genuine consent (International Criminal Court).</td>
<td>Any person in a position of power, authority and control, including husband, intimate partner or caregiver.</td>
</tr>
<tr>
<td>Child sexual abuse, defilement and incest</td>
<td>Any act where a child is used for sexual gratification. Any sexual relations/interaction with a child.</td>
<td>Someone the child trusts, including parent, sibling, extended family member, friend or stranger, teacher, elder, leader or any other caregiver, anyone in a position of power, authority and control over a child.</td>
</tr>
<tr>
<td>Forced sodomy/anal rape</td>
<td>Forced/coerced anal intercourse, usually male-to-male or male-to-female.</td>
<td>Any person in a position of power, authority and control.</td>
</tr>
<tr>
<td>Attempted rape or attempted forced sodomy/anal rape</td>
<td>Attempted forced/coerced intercourse; no penetration.</td>
<td>Any person in a position of power, authority and control.</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>Actual or threatened physical intrusion of a sexual nature, including inappropriate touching, by force or under unequal or coercive conditions.</td>
<td>Any person in a position of power, authority and control, family/community members, co-workers, including supervisors, strangers.</td>
</tr>
<tr>
<td>Sexual exploitation</td>
<td>Any abuse of a position of vulnerability, differential power, or trust for sexual purposes; this includes profiting momentarily, socially or politically from the sexual exploitation of another (IASC); Sexual exploitation is one of the purposes of trafficking in persons (performing in a sexual manner, forced undressing and/or nakedness, coerced marriage, forced childbearing, engagement in pornography or prostitution, sexual extortion for the granting of goods, services, assistance benefits, sexual slavery).</td>
<td>Anyone in a position of power, influence, control, including humanitarian aid workers, soldiers/officials at checkpoints, teachers, smugglers, trafficking networks.</td>
</tr>
<tr>
<td>Forced prostitution (also referred to as sexual exploitation)</td>
<td>Forced/coerced sex trade in exchange for material resources, services and assistance, usually targeting highly vulnerable women or girls unable to meet basic human needs for themselves and/or their children.</td>
<td>Any person in a privileged position, in possession of money or control of material resources and services, perceived as powerful, humanitarian aid workers.</td>
</tr>
<tr>
<td>Sexual harassment</td>
<td>Any unwelcome, usually repeated and unreciprocated sexual advance, unsolicited sexual attention, demand for sexual access or favours, sexual innuendo or other verbal or physical conduct of a sexual nature, display of pornographic material, when it interferes with work, is made a condition of employment or creates an intimidating, hostile or offensive work environment.</td>
<td>Employers, supervisors or colleagues, any person in a position of power, authority, or control.</td>
</tr>
<tr>
<td>Type of act</td>
<td>Description/Examples</td>
<td>Can be perpetrated by</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Sexual violence as a weapon of war and torture</td>
<td>Crimes against humanity of a sexual nature, including rape, sexual slavery, forced abortion or sterilisation or any other forms to prevent birth, forced pregnancy, forced delivery, and forced child rearing, among others. Sexual violence as a form of torture is defined as any act or threat of a sexual nature by which severe mental or physical pain or suffering is caused to obtain information, confession or punishment from the victim or third person, intimidate her or a third person or to destroy, in whole or in part, a national, ethnic, racial or religious group.</td>
<td>Often committed, sanctioned and ordered by military, police, armed groups or other parties in conflict.</td>
</tr>
</tbody>
</table>

**Physical Violence**

<table>
<thead>
<tr>
<th>Type of act</th>
<th>Description/Examples</th>
<th>Can be perpetrated by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical assault</td>
<td>Beating, punching, kicking, biting, burning, maiming or killing, with or without weapons; often used in combination with other forms of sexual and gender-based violence.</td>
<td>Spouse, intimate partner, family member, friend, acquaintance, stranger, anyone in position of power, members of parties to a conflict.</td>
</tr>
<tr>
<td>Trafficking, slavery</td>
<td>Selling and/or trading in human beings for forced sexual activities, forced labour or services, slavery or practices similar to slavery, servitude or removal of organs.</td>
<td>Any person in a position of power or control.</td>
</tr>
</tbody>
</table>

**Emotional and Psychological Violence**

<table>
<thead>
<tr>
<th>Type of act</th>
<th>Description/Examples</th>
<th>Can be perpetrated by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abuse/Humiliation</td>
<td>Non-sexual verbal abuse that is insulting, degrading, demeaning; compelling the victim/survivor to engage in humiliating acts, whether in public or private; denying basic expenses for family survival.</td>
<td>Anyone in a position of power and control; often perpetrated by spouses, intimate partners or family members in a position of authority.</td>
</tr>
<tr>
<td>Confinement</td>
<td>Isolating a person from friends/family, restricting movements, deprivation of liberty or obstruction/restriction of the right to free movement.</td>
<td>Anyone in a position of power and control; often perpetrated by spouses, intimate partners or family members in a position of authority.</td>
</tr>
</tbody>
</table>
### Harmful Traditional Practices

<table>
<thead>
<tr>
<th>Type of act</th>
<th>Description/Examples</th>
<th>Can be perpetrated by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female genital mutilation (FGM)</td>
<td>Cutting of genital organs for non-medical reasons, usually done at a young age; ranges from partial to total cutting, removal of genitals, stitching whether for cultural or other non-therapeutic reasons; often undergone several times during lifetime, i.e., after delivery or if a girl/woman has been victim of sexual assault.</td>
<td>Traditional practitioners, supported, condoned, and assisted by families, religious groups, entire communities and some States.</td>
</tr>
<tr>
<td>Early marriage</td>
<td>Arranged marriage under the age of legal consent (sexual intercourse in such relationships constitutes statutory rape, as the girls are not legally competent to agree to such unions).</td>
<td>Parents, community and State.</td>
</tr>
<tr>
<td>Forced marriage</td>
<td>Arranged marriage against the victim’s/survivor’s wishes; often a dowry is paid to the family; when refused, there are violent and/or abusive consequences.</td>
<td>Parent, family members.</td>
</tr>
<tr>
<td>Honour killing and maiming</td>
<td>Maiming or murdering a woman or girl as punishment for acts considered inappropriate for her gender that are believed to bring shame on the family or community (e.g., pouring acid on a young woman’s face as punishment for bringing shame to the family for attempting to marry someone not chosen by the family), or to preserve the honour of the family (i.e., as a redemption for an offence committed by a male member of the family).</td>
<td>Parent, husband, other family members or members of the community.</td>
</tr>
<tr>
<td>Infanticide and/or neglect</td>
<td>Killing, withholding food, and/or neglecting female children because they are considered to be of less value in a society than male children.</td>
<td>Parent, other family members.</td>
</tr>
<tr>
<td>Denial of education for girls or women</td>
<td>Removing girls from school, prohibiting or obstructing access of girls and women to basic, technical, professional or scientific knowledge.</td>
<td>Parents, other family members, community, some States.</td>
</tr>
</tbody>
</table>

### Socio-Economic Violence

<table>
<thead>
<tr>
<th>Type of act</th>
<th>Description/Examples</th>
<th>Can be perpetrated by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discrimination and/or denial of opportunities, services</td>
<td>Exclusion, denial of access to education, health assistance or remunerated employment; denial of property rights.</td>
<td>Family members, society, institutions and organisations, government actors.</td>
</tr>
<tr>
<td>Social exclusion/ostracism based on sexual orientation</td>
<td>Denial of access to services, social benefits or exercise and enjoyment of civil, social, economic, cultural and political rights, imposition of criminal penalties, discriminatory practices or physical and psychological harm and tolerance of discriminatory practices, public or private hostility to homosexuals, transsexuals or transvestites.</td>
<td>Family members, society, institutions and organisations, government actors.</td>
</tr>
<tr>
<td>Obstructive legislative practice</td>
<td>Denial of access to exercise and enjoy civil, social, economic, cultural and political rights, mainly to women.</td>
<td>Family, community, institutions and State.</td>
</tr>
</tbody>
</table>
When and Where does Sexual and Gender-Based Violence Occur?

Sexual and gender-based violence can occur anywhere, at any time. It is used as a weapon of war; it is perpetrated in the supposed safety of one’s home. Just as the laws and structures that govern a society influence the behaviour of individuals, so, too, can individual attitudes influence the way families, communities and societies respond to certain types of behaviour. The following diagram represents the clear linkages between the individual and the society.

At the individual level, the degree of knowledge, personal security, access to and control of resources, services and social benefits, personal history and attitudes towards gender can influence whether a person will become a victim/survivor or a perpetrator of violence.

The second level, relationship, represents the immediate context in which abuse can occur: between individuals, even within families. At this level, existing power inequalities among individuals begin to reinforce subordinate/privileged positions.

The community level represents the dynamics between and among people that are influenced by socialisation within such local structures as schools, health care institutions, peer groups and work relationships. For refugees, this structure is found in the refugee camp or setting, where the availability of and access to social services and the very layout of the camp can have a direct impact on whether or not incidents of sexual and gender-based violence occur.

Society includes the cultural and social norms about gender roles, attitudes towards children, women and men, the legal and political frameworks that govern behaviour, and the attitude towards using violence as means of resolving conflicts.

It is clear to see that changes in behaviour and attitudes in any one of the areas can have an impact on all of them. Interventions to prevent or respond to sexual and gender-based violence should thus target all levels.

Sexual and gender-based violence occurs in all classes, cultures, religions, races, gender and ages.
Sexual and Gender-Based Violence During the Refugee Cycle

During armed conflict, social structures are disrupted. Women and children face the additional risks of being subjected to sexual and gender-based violence when fleeing the fighting and seeking asylum. Family members are often dispersed during flight, leaving children separated from the rest of their families and women as solely responsible for protecting and maintaining their households. The following chart, adapted from a table developed by S. Purdin, describes the types of violence that can occur during the various phases of the refugee cycle.

<table>
<thead>
<tr>
<th>Phase</th>
<th>Type of Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>During conflict, Prior to flight</td>
<td>Abuse by persons in power; sexual bartering of women; sexual assault, rape, abduction by armed members of parties in conflict, including security forces; mass rape and forced pregnancies.</td>
</tr>
<tr>
<td>During flight</td>
<td>Sexual attack by bandits, border guards, pirates; capture for trafficking by smugglers, slave traders.</td>
</tr>
<tr>
<td>In the country of asylum</td>
<td>Sexual attack, coercion, extortion by persons in authority; sexual abuse of separated children in foster care; domestic violence; sexual assault when in transit facilities, collecting wood, water, etc.; sex for survival/forced prostitution; sexual exploitation of persons seeking legal status in asylum country or access to assistance and resources, resumption of harmful traditional practices.</td>
</tr>
<tr>
<td>During repatriation</td>
<td>Sexual abuse of women and children who have been separated from their families; sexual abuse by persons in power; sexual attacks, rape by bandits, border guards, forced/coerced repatriation.</td>
</tr>
<tr>
<td>During reintegration</td>
<td>Sexual abuse against returnees as a form of retribution; sexual extortion in order to regularise legal status, exclusion from decision-making processes; denial of or obstructed access to resources, right to individual documentation and right to recover/own property.</td>
</tr>
</tbody>
</table>

Sexual and Gender-Based Violence During the Life Cycle

The following table, developed by L. Heise, describes the forms of violence to which women can be subjected to during the different stages of their lives.

<table>
<thead>
<tr>
<th>Phase</th>
<th>Type of Violence Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-birth</td>
<td>Sex-selective abortion; battering during pregnancy; coerced pregnancy.</td>
</tr>
<tr>
<td>Infancy</td>
<td>Female infanticide; emotional and physical abuse; differential access to food and medical care.</td>
</tr>
<tr>
<td>Girlhood</td>
<td>Child marriage; genital mutilation; sexual abuse by family members and strangers; differential access to food, medical care and education.</td>
</tr>
<tr>
<td>Adolescence</td>
<td>Violence during courtship; economically coerced sex (e.g., for school fees); sexual abuse in the workplace; rape; sexual harassment; arranged marriage; trafficking.</td>
</tr>
<tr>
<td>Reproductive age</td>
<td>Physical, psychological and sexual abuse by intimate male partners and relatives; forced pregnancies by partner; sexual abuse in the workplace; sexual harassment; rape; abuse of widows, including property grabbing and sexual cleansing practices.</td>
</tr>
<tr>
<td>Elderly</td>
<td>Abuse of widows, including property grabbing; accusations of witchcraft; physical and psychological violence by younger family members; differential access to food and medical care.</td>
</tr>
</tbody>
</table>
Causes and Consequences of Sexual and Gender-Based Violence

To plan appropriate programmes to prevent and respond to sexual and gender-based violence, it is important to analyse the causes and consequences of such violence in each setting. Understanding the causes will help you to develop effective actions to prevent the violence; understanding the consequences allows you to develop appropriate response packages for victims/survivors.

Causes of Sexual and Gender-Based Violence

The root causes of sexual and gender-based violence lie in a society’s attitudes towards and practices of gender discrimination, which place women in a subordinate position in relation to men. The lack of social and economic value for women and women’s work and accepted gender roles perpetuate and reinforce the assumption that men have decision-making power and control over women. Through acts of sexual and gender-based violence, whether individual or collective, perpetrators seek to maintain privileges, power and control over others.

Gender roles and identities are determined by sex, age, socio-economic conditions, ethnicity, nationality and religion. Relationships between male and female, female and female, and male and male individuals are also marked by different levels of authority and power that maintain privileges and subordination among the members of a society. The disregard for or lack of awareness about human rights, gender equity, democracy and non-violent means of resolving problems help perpetuate these inequalities.

Contributing Risk Factors

While gender inequality and discrimination are the root causes of sexual and gender-based violence, various other factors determine the type and extent of violence in each setting. It is important to understand these factors in order to design effective strategies to prevent and respond to sexual and gender-based violence.

Equal access to and control of material resources and assistance benefits and women’s equal participation in decision-making processes should be reflected in all programmes, whether explicitly targeting sexual and gender-based violence or responding to the emergency, recovery or development needs of the population.

The following chart describes some causes or risk factors that can increase the risks of becoming a victim/survivor or perpetrator of sexual and gender-based violence:
Causes or Risk Factors for SGBV

<table>
<thead>
<tr>
<th>Individual risks</th>
<th>Social norms and culture</th>
<th>Legal framework and practices in host country and/or country of origin</th>
<th>War and armed conflict</th>
<th>Refugee, returnee and internally displaced situations</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Loss of security</td>
<td>• Discriminatory cultural and traditional beliefs and practices</td>
<td>• Discrimination and condone sexual and gender-based violence</td>
<td>• Breakdown of social structures</td>
<td>• Collapse of social and family support structures</td>
</tr>
<tr>
<td>• Dependence</td>
<td>• Religious beliefs</td>
<td>• Lack of legal protection for women’s and children’s rights</td>
<td>• Exertion of political power and control over other communities</td>
<td>• Geographical location and local environment (high crime area)</td>
</tr>
<tr>
<td>• Physical and mental disabilities</td>
<td></td>
<td>• Lack of laws against sexual and gender-based violence</td>
<td>• Ethnic differences</td>
<td>• Design and social structure of camp (overcrowded, multi-household dwellings, communal shelter)</td>
</tr>
<tr>
<td>• Lack of alternatives to cope with changes in socio-economic status</td>
<td></td>
<td>• Lack of trust in the law enforcement authorities</td>
<td>• Socio-economic discrimination</td>
<td>• Design of services and facilities</td>
</tr>
<tr>
<td>• Alcohol, drug use/abuse</td>
<td></td>
<td>• Application of customary and traditional laws and practices that enforce gender discrimination</td>
<td></td>
<td>• Predominantly male camp leadership; gender-biased decisions</td>
</tr>
<tr>
<td>• Psychological trauma and stress of conflict, flight, displacement</td>
<td></td>
<td>• General insensitivity and lack of advocacy campaigns condemning and denouncing sexual and gender-based violence</td>
<td></td>
<td>• Unavailability of food, fuel, income generation, leading to movement in isolated areas</td>
</tr>
<tr>
<td>• Disrupted roles within family and community</td>
<td></td>
<td>• Discriminatory practice in justice administration and law enforcement</td>
<td></td>
<td>• Lack of police protection</td>
</tr>
<tr>
<td>• Ignorance/lack of knowledge of individual rights enshrined under national and international law</td>
<td></td>
<td>• Under-reporting of incidents and lack of confidence in the administration of justice</td>
<td></td>
<td>• Lack of UNHCR/NGO presence in camp</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Lack of willingness to effectively prosecute all cases reported</td>
<td></td>
<td>• Lack of security patrols</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Low number of prosecutions obtained in proportion to the number of cases reported</td>
<td></td>
<td>• Lack of individual registration and identity cards</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Police and courts inaccessible because of remote location of camp</td>
<td></td>
<td>• Hostility of local population (refugees are considered materially privileged)</td>
</tr>
</tbody>
</table>
Consequences of Sexual and Gender-Based Violence

Victims/survivors of sexual and gender-based violence are at high risk of severe health and psycho-social problems, sometimes death, even in the absence of physical assault. The potential for debilitating long-term effects of emotional and physical trauma should never be underestimated.

Understanding the potential consequences of sexual and gender-based violence will help actors to develop appropriate strategies to respond to these after effects and prevent further harm.

A sectoral breakdown is used in the following summary of consequences.

Health

There are serious and potentially life threatening health outcomes with all types of sexual and gender-based violence.

### Fatal Outcomes

- Homicide
- Suicide
- Maternal mortality
- Infant mortality
- AIDS-related mortality

### Non-Fatal Outcomes

<table>
<thead>
<tr>
<th>Acute Physical</th>
<th>Chronic Physical</th>
<th>Reproductive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Injury</td>
<td>Disability</td>
<td>Miscarriage</td>
</tr>
<tr>
<td>Shock</td>
<td>Somatic complaints</td>
<td>Unwanted pregnancy</td>
</tr>
<tr>
<td>Disease</td>
<td>Chronic infections</td>
<td>Unsafe abortion</td>
</tr>
<tr>
<td>Infection</td>
<td>Chronic pain</td>
<td>STIs, including HIV/AIDS</td>
</tr>
<tr>
<td></td>
<td>Gastrointestinal problems</td>
<td>Menstrual disorders</td>
</tr>
<tr>
<td></td>
<td>Eating disorders</td>
<td>Pregnancy complications</td>
</tr>
<tr>
<td></td>
<td>Sleep disorders</td>
<td>Gynaecological disorders</td>
</tr>
<tr>
<td></td>
<td>Alcohol/drug abuse</td>
<td>Sexual disorders</td>
</tr>
</tbody>
</table>
Psycho-Social

<table>
<thead>
<tr>
<th>Emotional &amp; Psychological Consequences</th>
<th>Social Consequences</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Post traumatic stress</td>
<td>- Blaming the victim/survivor</td>
</tr>
<tr>
<td>- Depression</td>
<td>- Loss of role/functions in society (e.g. earn income, child care)</td>
</tr>
<tr>
<td>- Anxiety, fear</td>
<td>- Social stigma</td>
</tr>
<tr>
<td>- Anger</td>
<td>- Social rejection and isolation</td>
</tr>
<tr>
<td>- Shame, insecurity, self-hate, self-blame</td>
<td>- Feminisation of poverty</td>
</tr>
<tr>
<td>- Mental illness</td>
<td>- Increased gender inequalities</td>
</tr>
<tr>
<td>- Suicidal thoughts, behaviour</td>
<td></td>
</tr>
</tbody>
</table>

- Most societies tend to blame the victim/survivor. This social rejection results in further emotional damage, including shame, self-hate and depression.

- As a result of the fear of social stigma, most victims/survivors never report the incident. Indeed, most incidents of sexual and gender-based violence go unreported.

Legal/Justice

- If national laws do not provide adequate safeguards against sexual and gender-based violence, or if practices in the judicial and law enforcement bodies are discriminatory, this kind of violence can be perpetrated with impunity.

- Community attitudes of blaming the victim/survivor are often reflected in the courts. Many sexual and gender-based crimes are dismissed or guilty perpetrators are given light sentences. In some countries, the punishment meted out to perpetrators constitutes another violation of the victim’s/survivor’s rights and freedoms, such as in cases of forced marriage to the perpetrator. The emotional damage to victims/survivors is compounded by the implication that the perpetrator is not at fault.

Safety/Security

- The victim/survivor is insecure, threatened, afraid, unprotected and at risk of further violence.

- When dealing with incidents of trafficking in persons, police and security workers are at risk of retaliation.

- If police and security workers are not sensitive to the victim’s/survivor’s needs for immediate care, dignity and respect, further harm and trauma may result because of delayed assistance or insensitive behaviour.
Key Points to Remember

- Sexual and gender-based violence violates human rights. UNHCR and States share the responsibility for ensuring that refugees and other displaced persons are protected. Preventing and responding to sexual and gender-based violence against refugees is thus part of the overall strategy to protect refugees.

- Women and girls make up the vast majority of victims/survivors of sexual and gender-based violence, although boys and men can also be victims/survivors.

- Gender refers to what it means to be a boy or girl, woman or man, in a particular society or culture.

- A comprehensive prevention and response plan should focus on the roles and needs of both women and men and how both can become agents of change.

- Most acts of sexual and gender-based violence are perpetrated by someone known to the survivor.

- Perpetrators of sexual and gender-based violence are sometimes the very people upon whom survivors depend to assist and protect them.

- Sexual and gender-based violence occurs in all classes, cultures, religions, races, gender and ages. Interventions to prevent or respond to sexual and gender-based violence should target individuals, close relationships, the community and society, in general.

- Understanding the causes of sexual and gender-based violence will help you to develop effective actions to prevent it; understanding the consequences of sexual and gender-based violence allows you to develop appropriate response packages for victims/survivors.

- Gender inequality and discrimination are the root causes of sexual and gender-based violence.

- Equal access to and control of material resources and assistance benefits and women’s equal participation in decision-making processes should be reflected in all programmes, whether explicitly targeting sexual and gender-based violence or responding to the emergency, recovery or development needs of the population.

- The potential for debilitating long-term effects of emotional and physical trauma should never be underestimated.
CHAPTER 2
GUIDING PRINCIPLES

Sexual and gender-based violence is a problem that affects individuals, communities, and institutions. Given its complexities, sexual and gender-based violence is best addressed when multiple sectors, organisations, and disciplines work together, identifying and designing joint strategies to address this human rights violation. All actors involved in developing these strategies should agree to adhere to a set of Guiding Principles and understand that SGBV is a human rights violation. The Guiding Principles that should underpin all programme activities are: engage the refugee community fully; ensure equal participation by women and men, girls and boys in planning, implementing, monitoring and evaluating programmes; ensure co-ordinated, multi-sectoral action by all actors; strive to integrate and mainstream actions; and ensure accountability at all levels. The Guiding Principles that should underpin all actions with individuals are: ensure the physical safety of the victim(s)/survivor(s); guarantee confidentiality; and respect the wishes, the rights, and the dignity of the victim(s)/survivor(s), and consider the best interests of the child, when making any decision on the most appropriate course of action to prevent or respond to an incident of sexual and gender-based violence.

Tackling the complex problem of sexual and gender-based violence requires co-operation among and concerted efforts by multiple sectors, organisations and disciplines. All actors involved in developing strategies to prevent and respond to sexual and gender-based violence should agree to adhere to a set of Guiding Principles that will underpin their work. These Principles can be divided into those which guide the development, implementation and monitoring of programmes and those which govern protection and assistance for individuals who are victims/survivors of violence, whether they are men, women or children. (See Chapter 5 for more specific Guiding Principles related to children).
### Guiding Principles

#### Programme

- Engage the refugee community fully.
- Ensure equal participation by women and men, girls and boys in planning, implementing, monitoring and evaluating programmes.
- Ensure co-ordinated, multi-sectoral action by all actors.
- Strive to integrate and mainstream actions.
- Ensure accountability at all levels.

#### Individual

- Ensure the physical safety of the victim(s)/survivor(s).
- Guarantee confidentiality.
- Respect the wishes, the rights, and the dignity of the victim(s)/survivor(s), and consider the best interests of the child, when making any decision on the most appropriate course of action to prevent or respond to an incident of sexual and gender-based violence.
- Ensure non-discrimination.

Guiding principles enshrined in other documents, such as in codes of conduct, should also be used and shared with all parties involved in the programme.

## Programme Guiding Principles

**Engage the refugee community fully.** The refugee community should be central to all programme activities that address sexual and gender-based violence. Community involvement in decision-making is essential. It requires research to obtain an understanding of gender power relations and other power dynamics at play within the community.

**Ensure equal participation by women and men, girls and boys in planning, implementing, monitoring and evaluating programmes.** A wide range of groups and individuals in the community should participate in all stages of programming for prevention and response to sexual and gender-based violence.

**Strive to integrate and mainstream actions.** Actions to prevent and respond to sexual and gender-based violence should be mainstreamed and integrated into existing programmes and sectors. They should not be established as special programmes or projects, as this undermines their sustainability over the long term.

**Ensure co-ordinated multi-sectoral action by all actors.** Involvement of key sectors (community services, health, protection, security) is crucial if programmes targeting sexual and gender-based violence are to succeed. Actors (governments, NGOs and UNHCR) must be willing to co-ordinate, co-operate and collaborate.

**Ensure accountability at all levels.** All those involved in programmes targeting sexual and gender-based violence should be held accountable for their actions and for accomplishing agreed-upon tasks and responsibilities.
Individual Guiding Principles

Ensure the safety of the victim/survivor and her family at all times. Remember that the victim/survivor may be frightened and need assurance of her individual safety. In all cases, ensure that she is not at risk of further harm by the assailant or by other members of the community. If necessary, ask for assistance from camp security, police, or other law enforcement authorities, field officers, or others. Be aware of the safety and security of the people who are helping the victim/survivor, such as family, friends, community service or sexual and gender-based violence workers, and health care workers.

At all times, respect the confidentiality of the affected person(s) and their families. This means: share only the necessary information, as requested and as agreed by the victim/survivor, with those actors involved in providing assistance. The confidentiality of the perpetrator should also be respected. Information about victims/survivors should never be shared if it includes the individual’s name. Information concerning the victim/survivor should only be shared with third parties after seeking and obtaining the victim’s/survivor’s (or their parents’, in the case of children) explicit consent in writing.

All written information must be maintained in secure, locked files. If any reports or statistics are to be made public, only one officer in the organisation should have the authority to release the information. That person should disclose only general information about the victims/survivors. Any identifying information (name, address, etc.) should be removed.

Staff dealing directly with sexual and gender-based violence cases should sign confidentiality oaths.

Sometimes, interpreters or translators may be needed during interviews with victims/survivors. In these instances, it is advisable to engage translators from outside the community and to establish terms of reference for their work. Since trained, independent interpreters/translators are not always available, organisations should allocate adequate financial and human resources to ensure that quality interpreting/translating services are accessible.

All actions taken will be guided by respect for the wishes, the rights, and the dignity of the victim/survivor.

- Conduct interviews in private settings and with same sex translators, wherever possible.
- Always try to conduct interviews and examinations with staff of the same sex as the victim/survivor (e.g., woman victim/survivor to woman interviewer).
- Be a good listener.
- Maintain a non-judgmental manner.
- Be patient; do not press for more information if the victim/survivor is not ready to speak about her experience.
■ Ask victims/survivors only relevant questions.

■ The status of the virginity of the victim/survivor is not an issue and should not be discussed.

■ Avoid requiring the victim/survivor to repeat the story in multiple interviews.

■ Do not laugh or show any disrespect for the individual or her culture, family or situation.

■ The victim/survivor should be referred to appropriate/relevant actors when there is no qualified individual available to conduct an interview.

■ Ask the victim/survivor separately whether they want their married/unmarried partner to be present during the interview.

If the victim/survivor is a child, the best interests of the child principle should inform decisions about what type of care and support is provided. See Chapter 5 for more details.

Ensure non-discrimination. Every adult or child, regardless of his/her sex, should be accorded equal care and support. Victims/survivors of violence should receive equal and fair treatment regardless of their race, religion, nationality or sexual orientation.

### UNHCR’s Five Commitments to Refugee Women

UNHCR has committed itself to implementing five key commitments that will advance the rights of refugee women, mainstream gender equality, and help prevent and ensure compassionate responses to sexual and gender-based violence. Whilst these five commitments do not constitute an exhaustive list of priorities for refugee women, they nevertheless form critical building blocks for eliminating the vulnerability of refugees to SGBV. The commitments are:

1. Develop integrated country level strategies to address sexual violence, including domestic violence, against refugee women.

2. Register refugee women individually and provide them with relevant documentation to ensure their individual security, freedom of movement and access to essential services. Refugee women and men are to participate equally in the registration process.

3. Ensure that 50 per cent of representatives in all management committees and other bodies representing refugees to UNHCR in urban, rural and camp settings are women.

4. Ensure refugee women’s direct and indirect participation in the management of food and non-food item distribution so that these goods are directly controlled by adult female household members.

5. The provision of sanitary materials to all women and girls of concern to UNHCR should become a standard practice in UNHCR’s assistance programmes.
Multi-Sectoral Approach

The multi-sectoral approach is the framework upon which actions to prevent and respond to sexual and gender-based violence are built. The schematic diagram below represents how different actors work together to respond to the needs of victims/survivors.

<table>
<thead>
<tr>
<th>Protection</th>
<th>International protection entails taking all necessary steps to ensure that refugees are adequately protected and can exercise and enjoy their rights. UNHCR should lead efforts to prevent and respond to sexual and gender-based violence against refugees.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refugee Community Action</td>
<td>Refugees should be actively engaged in designing, planning and implementing all activities, including those intended to prevent and respond to sexual and gender-based violence. It is particularly important to involve men and adolescents, as well as women, in prevention and response activities. Most leadership structures in refugee situations are dominated by men. Male leaders have great influence within the general male population and can thus help spread the message about combating such violence. They can also ensure that issues of sexual and gender-based violence are addressed in local or traditional courts. By involving adolescents, you can begin to change attitudes and assumptions that may underlie sexual and gender-based violence. When all members of the community are involved in prevention and response, the community assumes a greater sense of responsibility and accountability towards those at risk of violence and towards victims/survivors of violence.</td>
</tr>
<tr>
<td>Co-ordination Function</td>
<td>The box at the top of the chart represents the principles and operational norms agreed upon by all actors that guide all actions. These are methods for co-ordination, guiding principles, and systems for referral among and between the various actors.</td>
</tr>
<tr>
<td>Involvement of all Key Actors</td>
<td>The box at the bottom indicates that there are many other actors whose contributions are necessary, but they are not specifically included either in the refugee group or in the sectoral groups. Their roles and responsibilities need to be clearly defined.</td>
</tr>
</tbody>
</table>
Prevention of and response to sexual and gender-based violence involves actions taken by many actors, most of whom represent one of four key sectors: health, psychosocial, safety and security, and legal/justice.

**Health** actors include: health facility staff, doctors, nurses, midwives, traditional birth attendants, community health workers, traditional health practitioners, health managers, administrators and co-ordinators, host country health ministry officials and staff.

**Psycho-social** actors include: staff and volunteers in the community, members of the community, NGOs implementing SGBV programme activities, educational staff, refugee groups, vocational training staff, income generation and micro-credit personnel, and host country social services/welfare ministry officials and staff.

**Safety and security** actors include: police, security forces, security and field officers from UNHCR and NGOs, refugee security workers, and refugee leaders/community members.

**Legal/justice** actors include: protection staff of UNHCR and human rights organisations, host country judges and other officers of the court, legislators and lawmakers, community leaders, including sub-committees of refugee Committees overseeing community-initiated policing and sanctions, law enforcement bodies, NGOs and advocacy groups working to improve national laws and policies concerning sexual and gender-based violence.

**Key Points to Remember**

*All actors should adhere to the following guiding principles:*

**Programme**

- Engage the refugee community fully.
- Ensure equal participation by women and men, girls and boys in planning, implementing, monitoring and evaluating programmes.
- Ensure co-ordinated multi-sectoral action by all actors.
- Strive to integrate and mainstream actions.
- Ensure accountability at all levels.

**Individual**

- Ensure the physical safety of the victim(s)/survivor(s).
- Guarantee confidentiality.
- Respect the wishes, the rights, and the dignity of the victim(s)/survivor(s), and consider the best interests of the child, when making any decision on the most appropriate course of action to prevent or respond to an incident of sexual and gender-based violence.
- Ensure non-discrimination.

*Use a multi-sectoral approach in all efforts to prevent or respond to sexual and gender-based violence.*
CHAPTER 3
PREVENTING SEXUAL AND GENDER-BASED VIOLENCE

Only by identifying factors that contribute to and influence the type and extent of sexual and gender-based violence can you develop appropriate and effective prevention strategies. Prevention activities are aimed at potential perpetrators, potential survivors, and those who may assist them. Activities must therefore target the refugee population, humanitarian aid staff, host country nationals, and government authorities. As with all programmes to combat sexual and gender-based violence, prevention strategies are most effective when all sectors, including refugees, are involved in designing, implementing and evaluating them.

Effective prevention strategies will include actions that focus on five key objectives: transforming socio-cultural norms, with an emphasis on empowering women and girls; rebuilding family and community structures and support systems; designing effective services and facilities; working with formal and traditional legal systems to ensure that their practices conform to international human rights standards; and monitoring and documenting incidents of sexual and gender-based violence.

Preventing sexual and gender-based violence involves identifying and removing those factors that make certain members of the refugee community vulnerable to this kind of violence and designing a range of strategies that improve protection for all refugees. These strategies will be most effective when they are designed, implemented and monitored by all sectors involved in protecting and assisting refugee communities and by the refugees, themselves.

To PREVENT sexual and gender-based violence, you must identify, understand and address its CAUSES and CONTRIBUTING FACTORS.

First, identify factors and issues that apply to your setting by conducting a needs assessment/situation analysis (see Chapter 6 for more details).

A needs assessment/situation analysis will enable you to:

- Become informed about the refugee and host country or community culture, protection traditions, customs and gender/power relations.

- Identify areas where the people of concern are likely to be exposed to sexual and gender-based violence, e.g. at distribution points, detention centres, border points, bars serving alcohol, etc.
Co-ordinate with organisations focusing on health, psycho-social, security, and legal services in the host country, NGOs, and UN agencies to develop prevention measures jointly.

Only by identifying factors that contribute to and influence the type and extent of sexual and gender-based violence can you develop appropriate and effective prevention strategies. Factors that can affect individuals, groups and institutions include:

- Demographic composition of the population (it is useful to have a statistical breakdown by age and gender).
- Social and cultural norms in the refugee community.
- Structure of family and community support systems before and after displacement.
- Knowledge, attitudes, behaviour of persons in leadership and decision-making positions.
- Services and facilities, including the physical environment, site layout, access to services.
- Legal framework, judicial practice and tradition, both formal and informal.

As with all aspects of sexual and gender-based violence programming, the refugee community must be centrally involved in identifying these factors and designing strategies to address them.

Prevention activities are aimed at potential perpetrators, potential survivors, and those who may assist them. Activities, therefore, should target the refugee population, humanitarian aid staff, host country nationals, and government authorities.

Prevention also includes continuous programme monitoring and evaluation and compiling and analysing data from sexual and gender-based violence incident reports.

Effective prevention strategies will include actions that focus on five key objectives:

- Transforming socio-cultural norms, with an emphasis on empowering women and girls.
- Rebuilding family and community structures and support system.
- Designing effective services and facilities.
- Working with formal and traditional legal systems to ensure that their practices conform to international human rights standards.
- Monitoring and documenting incidents of sexual and gender-based violence.
Transforming Socio-Cultural Norms

As discussed in Chapter 1, the causes of sexual and gender-based violence are rooted in socio-cultural norms of gender inequality and discrimination. Preventing sexual and gender-based violence thus requires changes in gender relations within the community - that is, the socially prescribed roles, responsibilities, expectations, limitations, opportunities and privileges assigned to persons in the community based on their sex.

Prevention activities targeting socio-cultural norms seek to influence changes in knowledge, attitudes, and behaviour. Goals to aim for in each of these areas include:

<table>
<thead>
<tr>
<th>Knowledge:</th>
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<tbody>
<tr>
<td>Understanding human rights; appreciating reproductive responsibilities and domestic work; accepting alternative gender roles; using non-violent methods to express anger and frustration; being aware of services and support available for victims/survivors and perpetrators.</td>
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<table>
<thead>
<tr>
<th>Community Attitudes:</th>
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<tbody>
<tr>
<td>Believing in equal human rights for all at both the community and the individual levels; respecting the worth of each individual’s contribution to the community; involving all in decision-making processes; being supportive of victims/survivors of sexual and gender-based violence; showing zero tolerance for persons who abuse their power.</td>
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<table>
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<tr>
<th>Behaviour:</th>
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<tbody>
<tr>
<td>Solving problems non-violently; treating all persons, regardless of their gender or gender roles, with respect; reporting all incidents of sexual and gender-based violence, denouncing both the perpetrator and the act, and supporting the victim/survivor.</td>
</tr>
</tbody>
</table>

Because they have been displaced and their daily routines disrupted, most refugees have already begun to experience changes in traditional gender roles. Sexual and gender-based violence prevention programmes can support positive transformations in gender relations within a community over the long-term. Preventive actions can also contribute to ending harmful traditional practices, such as female genital mutilation.

**STRATEGY**

**Develop Information, Education, Communication (IEC) Campaigns**

Develop and conduct awareness campaigns to promote changes in community attitudes, knowledge, and behaviour. Topics can include:

- gender;
- human rights including women and children’s rights;
- sexual and gender-based violence;
- gender roles and expectations in the community;
- support services available for survivors, and how to access them; and
Conflict resolution and peace building.

Target messages to specific community groups, including women, men, youth, children, religious groups, schools, businessmen/women, leaders/elders, traditional health practitioners, and others.

IEC methods should be designed and conducted with the active involvement of the refugee community. A range of techniques should be employed to encourage community mobilisation. These should focus on building confidence, trust and consensus among community members to embrace the issues being promoted. Refugees should be trained so they can be effective in leading these campaigns. Where applicable, new information technologies, including the Internet, can be used as part of IEC campaigns. Wherever possible, involve those staff members who have expertise in public information and mass information in designing and disseminating IEC messages.

Effective means of getting your message across include:

- printed posters and pamphlets;
- poster contests;
- drama, song and dance;
- radio discussions;
- public service announcements;
- video presentations;
- slogans printed on T-shirts;
- training workshops; and
- informal discussions.

When designing an IEC strategy, keep in mind any language barriers that may exist and the level of literacy among the population.

STRATEGY:

Strengthen Community Networks

The refugee community should play a significant role in designing, implementing and evaluating strategies to prevent sexual and gender-based violence. Humanitarian actors should work with different sectors of the refugee community – women’s groups, youth groups, health workers, teachers, refugee leaders etc. – to identify volunteers from the community who will help run these activities. Efforts should be made to ensure a gender balance in the recruitment of community volunteers. These individuals can work as community/peer educators, counsellors, and, together, as crisis intervention teams.

NGOs, UNHCR, and host government authorities should provide volunteers with regular training and/or technical support.
STRATEGY:
Ensure Gender Balance in the Leadership Structure and in Decision-Making

Refugee women must be involved in decision-making and leadership. A real gender balance in the community’s leadership structure will ensure that the needs of women, men, girls and boys are addressed and that males and females will enjoy equal access to and control of resources and benefits.

Sometimes it may be necessary to provide separate spaces for discussions according to sex and age. This allows for freer discussions from which important information about sexual and gender-based violence within the community may emerge. Allow for separate meetings, when appropriate or necessary; but ensure that women participate fully when decisions that affect the community are being debated and made. In situations where the culture of the refugee community is resistant to allowing women and children to participate in the same meetings with men, ensure that the views of women and children inform decisions that are taken by men. At the same time, try to build constituencies among those men who support women’s participation with the aim of encouraging a gradual change of attitude among all men within the community.

STRATEGY:
Empower Women

Although men and boys can be targets of sexual and gender-based violence, it is more often women and girls who are subjected to this particular violation of their basic human rights. In most cultures, women are regarded as subordinate to, and are rendered dependent upon, men. These unequal power relations leave women at a double disadvantage: women are at greater risk of physical and psychological abuse; and, if subjected to such abuse, they generally have few options for redress and/or economic self-sufficiency.

- The local legal system may not consider sexual and gender-based violence a crime.
- A woman’s report of violence may be ignored or mocked.
- A woman may choose not to report the incident for fear of retribution or further sexual violence against herself or family members.
If the perpetrator is her husband, she may feel trapped into staying with him, and possibly suffering more abuse, because she cannot provide for herself and her children.

You can begin to change women’s roles in society and women’s perceptions of themselves by offering activities that promote their independence and economic self-reliance and their leadership and decision-making abilities. These activities can include:

- Offering literacy programmes.
- Providing vocational training.
- Developing income generating and micro-credit projects.
- Ensuring balanced representation of women on refugee management and assistance delivery committees.
- Applying a gender balanced approach when providing employment opportunities to refugees.
- Providing equal access to education for refugee girls.
- Supporting women’s groups and associations.
- Offering leadership training.

In addition to promoting women’s role in the community’s leadership structure and decision-making processes, refugee women should also be encouraged to mobilize and establish networks to advocate for equal rights within the community.

See also:
- Guidelines on the Protection of Refugee Women (UNHCR 1991)

STRATEGY: Get Men Involved

- Focusing prevention and response strategies only on women ignores the fact that men perpetrate most incidents of sexual and gender-based violence. Men must therefore be part of the solution to this problem. Men must take a decisive stand against sexual and gender-based violence before real progress can be made.

- Men in leadership positions have the power and authority to influence change. They can act as role models for others.

- Men must be made to understand that perpetrators of crimes related to sexual and gender-based violence will be punished. This, in turn, will adversely affect their families and their communities.

Help establish and support groups of men who are committed to ending sexual and gender-based violence in their community. These groups can reinforce the idea that sexual and gender-based violence is not only a “women’s issue”. Important lessons can be learned from those who work with men in family planning programmes. When men are seen to be working to prevent sexual and gender-based violence, they give the issue the credibility that can convince other men to join them.
Be sensitive to the fact that men and boys can also be victims/survivors of sexual and gender-based violence. Create the space and conditions that allow men to discuss this issue and to work towards ending this kind of violence. Be aware that male victims/survivors will be much more reluctant to talk openly about sexual and gender-based violence than women will be.

Start early: provide training to parents about gender, equality and the dangers of violence so they can pass these messages on to their young children. Classes on sexual and reproductive health, human rights and gender awareness should be offered to adolescents in schools or through other community-based programmes.

See also:
- Prevention and Response to Sexual and Gender-Based Violence in Refugee Situations: Inter-Agency Lessons Learned Conference Proceedings (UNHCR 2001)
- Population Reports: Ending Violence Against Women (John Hopkins University School of Public Health 1999)

STRATEGY:
Engage Children and Youth

Changing knowledge, attitudes and behaviour is easier when you begin early.

- Encourage parents who have been trained in human rights, gender awareness and non-violent conflict resolution to pass these messages on to their children.
- Train teachers so they can incorporate these subjects into their curricula.
- Establish and support youth and children’s groups involved in peer education and awareness raising about sexual and gender-based violence.
- Encourage the formation of girls’ groups in schools to provide mutual support and advice and counselling to younger girls.
- Incorporate discussions about gender, relationships and sexual and Gender-based violence into activities already underway in the community, such as in education and vocational programmes and in HIV/AIDS campaigns that target youth.
- Design imaginative ways to re-shape children’s thinking about what it means to be a boy or girl through such media as drama, poetry and art.
- Give children and youth opportunities to express their needs and concerns.

See also:
- Refugee Children: Guidelines on Protection and Care (UNHCR 1994)
Re-Building Family and Community Support Systems

When populations flee conflict, their family and community support systems frequently break down. Families are often separated during conflict and while fleeing. Most refugees are children and women living without husbands and extended families. Out of necessity, many refugee women probably have assumed some traditional “male” roles in order to provide for themselves and their families. Male refugees may feel powerless, confused and resentful: their traditional role as provider and protector of the family has been temporarily usurped by the humanitarian organisations that provide food and shelter.

Community-based structures that determine moral and social standards and behaviour are also often weakened or destroyed during flight. In this climate, sexual and gender-based violence can flourish. It is important, then, to try to re-establish, as quickly as possible, those structures and systems that uphold respect for the equal rights of all members of the community.

STRATEGY:
Develop Social and Recreational Programmes

When designing a site for refugees, allocate enough space for sports, recreation and social activities and for the buildings that will accommodate them. Work with refugees, particularly women and girls, to develop recreational and social activities. Schools provide more than education; they also can protect children against sexual and gender-based violence. Therefore, ensure that girls and boys have equal access to education.

STRATEGY:
Encourage Resumption of Religious and Spiritual Activities

During site planning, allocate land for churches, mosques and other houses of worship. Encourage community members to resume religious and spiritual activities. Religious leaders should be targeted as partners for dissemination of messages on women and children’s rights and on prevention of sexual and gender-based violence within the community.

See also:
Creating Conditions to Improve Accountability Systems

During your situation analysis, identify power relations within the refugee community and among those who provide assistance to refugees. Persons with power include potential perpetrators, those who are in a position to influence social and cultural norms, and/or those who provide assistance to survivors of sexual and gender-based violence. Important questions to ask are:

- Who is making decisions for the community?
- Whom do humanitarian aid organisations consult and include when planning, implementing, monitoring and evaluating interventions?
- Who receives the assistance?
- Who controls the resources in the community and in the family?

**STRATEGY:**

*Raise Awareness*

Staff of all organisations should receive regular training and sensitisation on human rights, gender, relevant national and international laws and policies, and guidelines on prevention of sexual and gender-based violence. Regularly scheduled “refresher” workshops should be offered. Include UN staff, NGOs, host government authorities and other partners in these sessions.

Provide human rights education and gender awareness training to the community, police, courts, and national and international humanitarian actors.

**STRATEGY:**

*Ensure Compliance with Standards of Accountability and Codes of Conduct*

No humanitarian worker should be permitted to abuse his/her power. Responsibilities, expectations, norms, and standards for staff should be written into codes of conduct and job descriptions, and there must be sanctions imposed when humanitarian staff do not comply with these standards and duties.

*Codes of Conduct are preventative tools. They are a demonstration of a resolve to self-police and to set and uphold proper standards and discourage behaviours that can re-victimise vulnerable members of our populations of concern, violate human rights, undermine the mandate and bring the organisation into disrepute.*

*Ruud Lubbers, United Nations High Commissioner for Refugees, 2002*

Through information and education activities, inform the refugee community about standards for humanitarian interventions and about any codes of conduct that may be applicable. Create a system through which incidents of abuse by humanitarian staff can be reported and investigated in confidence. Those who report such
incidents and survivors of the incidents must be guaranteed confidentiality. Be sure that members of the refugee community know where to go to report such incidents. Investigations into reports of abuse by humanitarian workers must begin promptly and should be conducted professionally. (See Appendix 1 for UNHCR’s Code of Conduct and Appendix 1.1 for the IASC Core Principles of a Code of Conduct).

Designing Effective Services and Facilities

A carefully designed camp layout and access to basic needs can help prevent sexual and gender-based violence. When designing camp facilities and planning services for refugees:

- Avoid overcrowding and multi-household dwellings.

- Provide interim separate housing for unaccompanied children until a foster care arrangement has been identified.

- Provide housing to female-headed households without adult male family members.

- Try to ensure that unrelated families do not share communal living and sleeping space.

- Be sure that essential items, such as food, water and cooking fuel, are either given directly to women or are distributed through women. Make sure that these items are easily accessible so that women do not have to go into isolated areas to collect them.

- Locate latrines a safe distance from living spaces and ensure clear demarcation of male and female facilities.

- Be sure the area is well lit, especially on paths used by women to access services and facilities.

- Ensure that locks are fitted on latrine doors and that privacy is assured for women and girls in communal wash areas.

- Encourage women to be equal participants in camp leadership and decision-making structures.

- Arrange for police protection and security patrols in the camp and ensure that police receive regular training so they are effective partners in preventing sexual and gender-based violence.

- Be sure there is a regular UNHCR and/or NGO presence in the camp.

- Ensure that all refugees are registered.

- Advocate to ensure that governments provide identity documents to refugees.

- Be aware of the local population’s attitudes towards refugees. Some members of the host community may regard refugees as materially privileged, since they are receiving aid, and may be resentful.
STRATEGY:
Register All Refugees

When only male heads of households are registered and issued ration cards, women may be forced to remain in abusive relationships for fear of losing access to food and other assistance. It is therefore essential to register refugees individually and to provide every individual with the appropriate, individual registration cards. When it is not possible to provide separate documents to each family member, adult women should be given high priority for receiving the documents needed to establish eligibility for assistance.

See also:
- UNHCR EXCOM Conclusion on Registration of Refugees and Asylum-Seekers No.91 (LII) (UNHCR 2001)
- Guidelines on the Protection of Refugee Women (UNHCR 1991)

STRATEGY:
Inform Refugees about their Rights, Entitlements and Benefits

Refugees should be aware of their rights, benefits, and responsibilities. Through community meetings and/or printed materials, using words and/or pictures, you should inform refugees about:

- The services, benefits and rights to which every refugee is entitled.
- The way to access and/or participate in the delivery of assistance and services, and the regulations governing access and participation.
- The reporting mechanisms, counselling and advice centres that are available to individuals who have been subjected to sexual and gender-based violence.
- The national laws that protect the rights guaranteed under international human rights law and the constitution of the country in which they are living.
- The legal procedures and administrative mechanisms for reporting complaints about or incidents of sexual and gender-based violence.
- The actors who deliver assistance and services, their roles and responsibilities towards the community, and future programme plans.
- The government representatives, humanitarian agencies, human rights and women’s groups, and civil society associations working in the area.
- Existing UNHCR policies and guidelines that enhance the protection of women and children against sexual and gender-based violence.

Be sure this information is disseminated to all members of the refugee community: men, women, youth and children, both literate and illiterate, through the medium they understand. The message should be
disseminated through established channels that are most accessible and convenient for different groups within the community, such as women’s committee meetings, youth committee meetings, etc.

**STRATEGY:**

Include the Community when Planning, Designing and Implementing Activities

Programmes to prevent sexual and gender-based violence will only be successful when the community is actively involved in all stages of their development, from identifying and discussing the problem at the outset, to monitoring and evaluating activities designed to prevent such violence. The community is best equipped to identify causes of sexual and gender-based violence, to advise how best to disseminate information about the problem, and to know what preventive measures will work.

- Seek the participation of male and female refugee leaders, influential community members, such as elders or religious leaders, and any other interested refugees in the first meetings after an emergency.

- Listen to the refugees. Allow them to speak freely about their needs and concerns, even if this means holding separate discussions for different groups of refugees. Women may not feel free to talk in front of men; adolescents may not feel free to talk in front of adults.

- Consider and use recommendations made by refugees for:
  - Designing the camp layout.
  - Allocating housing.
  - Distributing food and non-food items.
  - Creating specific measures to prevent sexual and gender-based violence.
  - Establishing reporting and referral systems.

Life in camps often creates immense frustration and boredom among refugees. Work with the refugees to develop safe channels through which they can direct their energy, such as recreational and sports activities. Rules governing drinking clubs, guesthouses and related social activities in the camp should minimise protection risks. Working with the local authorities, consider measures to prevent alcohol abuse. Organise education campaigns on how alcohol abuse can lead to sexual and gender-based violence.
You may need to adapt prevention strategies somewhat so they are effective when working with returnee populations and urban caseloads. Unlike camp-based populations, which are restricted to a limited space, returnees are often dispersed within the community. To be sure these populations are protected against sexual and gender-based violence:

- Mobilise women from returnee and urban caseloads to form associations and support networks that can play a lead role in prevention activities.
- Target prevention programmes not only at returning refugees but also at leaders and community representatives residing in areas to which refugees are returning.
- Convene awareness raising and rights awareness training on preventing sexual and gender-based violence to build the capacity of established local organisations and associations in the returnee areas.

**STRATEGY:**
Create Gender-Balanced Distribution Systems

Distribution systems for food and non-food items must be carefully planned and monitored to prevent corruption, abuse and exploitation. All available channels should be employed to inform refugees, especially women and children, of their entitlements. Equal access to and control of resources by both heads of household helps ensure that all members of the family enjoy these resources, reduces gender inequalities by empowering women, and can reduce the risks of domestic violence. Consider the possibility of providing women with separate ration cards, if practical. Women should be encouraged to play a central role in the management, distribution and monitoring of food assistance delivery. This will help to ensure that all family members benefit from the food rations provided, and can also act to prevent exploitation of women through the illegal practice of sex for food. Ensure an equal representation of female staff during the distribution process. Refugee women’s committees should be involved in monitoring distribution and post-distribution activities. Non-refugee aid workers should always be present at the distribution sites to monitor the process.

**STRATEGY:**
Implement Reproductive Health Programmes

Most activities addressing sexual and gender-based violence implemented by the health sector will focus on responding to such violence and assisting victims/survivors. However, the health sector can help prevent sexual and gender-based violence by:

**Screening health care patients** to identify those most at risk of sexual and gender-based violence and to prevent further trauma and harm to victims/survivors.

**Implementing reproductive health activities**, including discussions about gender, relationships, and sexual and gender-based violence, that target men and adolescents as well as women (awareness raising about HIV/AIDS prevention should also be included as part of this effort).

**Engaging traditional birth attendants as partners** in reproductive health activities. Traditional birth attendants can be a valuable source of information and can help disseminate prevention and protection messages.
STRATEGY:
Implement Security and Safety Programmes

Security affects several levels of society: the home, the refugee/displaced setting, the local community, and the national environment. In principle, the primary responsibility for ensuring the security of refugees or displaced persons rests with the host government. But in situations of failed, marginalised or collapsed states, humanitarian actors must often step in to protect refugees and displaced persons. To ensure refugee security, it is important to:

- Empower both male and female community leaders and the refugee guard networks in camp settings.
- Sensitise and increase the capacity of the local police to discharge its responsibilities effectively.
- Create a camp layout that reduces women’s exposure to attacks.
- Recruit a number of female security personnel to work with the police or with other relevant law enforcement agencies posted in or near the camps.
- Ensure safe movement for refugee women when they collect firewood or water or trade or engage in other income generating activities.
- Establish community guard units, drawn from the refugee community, and ensure that an adequate number of women are included in those units.
- Analyse incident data and discuss security risks and issues with all actors and the community.
- Resolve identified problems by, for example, constructing fencing, improving lighting, using radios.
- Work with refugees to prevent further risk and danger to victims/survivors by designing plans to protect survivors immediately after an incident (e.g. by relocation, establishing a “protected” area in the camp, creating safe houses, etc.)
- Ensure regular police patrols in high-risk areas.
- Determine whether perpetrators should be moved from the community in order to assure a victim’s/survivor’s safety and to prevent a re-occurrence of the crime.
STRATEGY:  
Be Sensitive to the Host Population

Many host populations live in conditions of relative deprivation and may resent the services and assistance that are provided to the refugees living among them or nearby. Hold discussions with the local population about the refugees - why they are there, how long they may stay, why they need assistance - to prevent tensions from developing between the two groups. When possible, extend programmes and services to the local population, as well. Health services are often the most appropriate services to extend and are generally well appreciated.

STRATEGY:  
Mainstream Gender Issues into All Stages of Programme Planning and Implementation

All humanitarian actors, including UN agencies, NGOs, host governments, and other implementing partners must apply a gender analysis when planning programmes. Those programmes must be gender sensitive, taking into account the particular needs of both men and women. UNHCR staff should ensure that Country Operations Plans reflect the gender/age sensitive priorities of the office.

International and non-governmental organisations should accelerate efforts to reach gender equity (women and men comprising fifty per cent each of total staff) at senior levels and in field operations. This will contribute to ensuring that gender issues are addressed throughout their programming.

Influencing the Formal and Informal Legal Framework

The extent of sexual and gender-based violence within a community is sometimes influenced by the existence of laws that proscribe such violence or the extent to which laws in the host country and country of origin are enforced. Sexual and gender-based violence can be perpetrated with impunity where:
Laws and policies support gender discrimination and condone sexual and gender-based violence.

There is limited legal protection for women’s rights.

There are no laws against sexual and gender-based violence.

Poor administration of justice has resulted in a lack of trust in law enforcement authorities.

Law enforcement and judicial practice reinforce gender-based discriminatory practices.

As a first step, familiarise yourself with both the formal and traditional or customary legal systems in the host country and country of origin. Determine whether there are laws and policies in place that protect against gender discrimination and sexual and gender-based violence. Determine how those laws can be strengthened. Network with human rights and women’s rights organisations in the country.

STRATEGY: Work with Traditional Legal Systems

Traditional or customary legal systems, usually administered by elders, operate in many refugee communities. The rules, procedures, and decisions of these groups reflect the society’s norms, beliefs, and attitudes. These groups may pass judgements in sexual and gender-based violence cases, including incidents of domestic violence. In situations where such tribunals or committees pass judgements that are offensive to international human rights standards relating to the rights of victims, you should take steps to educate the members of such bodies about existing international human rights standards.

Target these groups for awareness raising campaigns and training programmes on human rights and gender. Suggest that strengthening respect for the human rights of all persons and ensuring that sexual and gender-based violence is not tolerated will benefit the community as a whole. As the elders who administer justice in these systems hold great authority within the community, their attitudes will also influence the attitudes of others. Encourage participation by women and youth in these traditional structures. Such committees should be encouraged to report cases of sexual and gender-based violence to the formal legal system, where such violence is considered to be criminal behaviour.

STRATEGY: Work with National Justice Systems

Establish relations with local magistrates, judges and courts. Offer training programmes on international human rights law. Invite national judicial officers and civil society rights advocates to address the issue of human rights protection under national law, and criminal and civil procedures relating to sexual and gender-based violence. In countries where the judicial authorities are constrained by lack of resources, build networks with judges, prosecutors and police to ensure that national laws are upheld.
When courts are not accessible, such as in remote locations, consider using mobile courts funded by UNHCR or other agencies. In some areas, the availability of such courts has led to increased reporting of sexual and gender-based violence, more convictions, and greater community awareness about the legal system.

STRATEGY:
Strengthen National Laws and Policies that Protect Human Rights

Work with national human rights organisations, such as female lawyers’ groups and civil society organisations, to lobby for improvements in host country laws and policies against sexual and gender-based violence. A national legal framework that proscribes sexual and gender-based violence is essential for creating a successful legal prevention strategy.

Network with organisations that advocate for legislative reform to address the problem of sexual and gender-based violence and other rights violations against refugees. Ensure that host country laws, procedures and policies do not discriminate against refugees.

In collaboration with other UN agencies and civil society groups, encourage the host State to accede to and ratify international human rights instruments. By doing so, the legal status of refugee victims/survivors of sexual and gender-based violence will be improved.

See also:
- Protecting Refugees: A Field Guide for NGOs (UNHCR 1999)

STRATEGY:
Develop Appropriate Sanctions for Perpetrators

Strong penal sanctions against convicted perpetrators of sexual and gender-based violence can act as a deterrent. Refugees who perpetrate these acts have to be treated the same way as nationals would be treated: with due process safeguards and penal sanctions. Penalties for convicted perpetrators of sexual and gender-based violence should, in general, respect the fundamental principle of non-refoulement, or no forced return to the country of origin.

Wherever possible, sanctions should also incorporate efforts to support rehabilitation of perpetrators through, for example, education/awareness raising on human rights and gender, and victim compensation.
Monitoring and Documenting Incidents of Sexual and Gender-Based Violence

In order to develop effective prevention measures, it is essential to have a clear picture of the problem in your particular setting. Monitoring incidents of sexual and gender-based violence should be the responsibility of all actors: health, protection, psycho-social and security personnel and members of the refugee community. (See Chapter 7 for more details on monitoring and evaluation.) During the initial stages of programme planning, be sure to dedicate financial and human resources to monitoring and evaluation.

Data on the incidence of sexual and gender-based violence should be compiled and analysed each month by one central agency. Protection officers should take the lead in ensuring that data on these human rights violations are maintained in the same manner that data on other rights violations is compiled and stored.

To ensure that the information collected is consistent and useful, arrange a meeting with all actors to define terms (to ensure that all actors label the same type of violence with the same name) and to determine methods for counting incidents. Information collected should include such relevant facts as the type of incident, location where the incident occurred, demographics about the perpetrator and the victim/survivor, and potential risk factors. The monthly reports should answer the following questions:

- What happened this month?
- What preventive strategy worked? What didn’t work? Why?
- What should be done next, in light of this month’s report?

Agree with all partners on what reporting methods and report formats will be used and how and to whom the reports will be distributed (see Appendix 2 for a sample Incident Report Form).

Convene multi-sectoral meetings, which should include refugees, to review the data. In these meetings, identify factors that may contribute to sexual and gender-based violence and design plans to eliminate those factors (see Chapter 6 for more details.)

By closely monitoring cases of sexual and gender-based violence you will be able to evaluate the success of your prevention strategies, consolidate learning, inform advocacy efforts and gather reliable, consistent statistical data to help monitor trends and produce comparative analyses.

See also:

- How To Guide: Monitoring and Evaluation of Sexual Gender Violence Programmes, Tanzania (UNHCR 2000)
Key Points to Remember

When trying to influence changes in socio-cultural knowledge, attitudes and behaviour:
- Develop information, education and communication campaigns.
- Recruit community volunteers.
- Ensure gender balance in the leadership structure and in decision-making.
- Empower women.
- Get men involved.
- Engage children and youth.

When family and/or community support systems have collapsed:
- Develop social and recreational programmes.
- Work with religious and other community leaders to promote the re-establishment of social values that uphold equal rights and respect for all community members.

When trying to change the attitudes and behaviour of persons in power:
- Adopt a non-confrontational and non-judgmental attitude.
- Raise awareness about human rights and gender.
- Develop accountability systems, including implementation of codes of conduct.

When designing services and facilities for refugees:
- Ensure that all key service providers are involved, i.e. protection, community services, health, security, police and relevant authorities and refugees themselves.
- Provide registration cards to all adult refugees (male and female).
- Inform refugees about their rights, entitlements and benefits.
- Include the community when designing, planning and implementing activities.
- Create gender balanced distribution systems.
- Implement reproductive health programmes.
- Implement security and safety programmes.
- Be sensitive to the host population.
- Mainstream gender issues into all stages of programme planning and implementation.
When trying to influence formal and traditional legal systems:

- Familiarise yourself with both the formal and traditional legal systems in the host country and country of origin.
- Work with the administrators of traditional legal systems to encourage change.
- Work with personnel from the national justice system to increase refugee confidence in the legal system.
- Strengthen national laws and policies that protect human rights.

When monitoring incidents of sexual and gender-based violence:

- Compile and analyse data on sexual and gender-based violence each month.
- Define terms and determine methods for counting incidents among all actors.
- Agree with all partners on what reporting methods and report formats will be used.
- Convene multi-sectoral meetings, which should include refugees, to review the data.
CHAPTER 4
RESPONDING TO SEXUAL AND GENDER-BASED VIOLENCE

It is essential to understand the consequences of sexual and gender-based violence in order to design effective programmes for supporting victims/survivors. These consequences vary, depending on the form of violence perpetrated.

All members of the refugee community should be aware of how and where to report incidents of sexual and gender-based violence. If the victim/survivor does not report the incident, adequate support cannot be provided. The community should take the lead in designing ways to support victims/survivors. Response actions include: developing community education and awareness activities; training actors in how to respond to victims’/survivors’ needs; establishing referral, reporting, monitoring and evaluation mechanisms; empowering refugee communities to respond; developing a response to the health/medical needs of victims/survivors; planning to meet the psycho-social needs of victims/survivors; developing a security and safety response; establishing a legal/justice response; identifying the roles of other potential actors; and developing a plan to work with perpetrators. The guiding principles on confidentiality, physical security and respecting the wishes, the rights and the dignity of the survivors, should be upheld in every activity.

It is essential to identify and understand the consequences of the various types of sexual and gender-based violence in order to develop appropriate responses. (See Chapter 1 for a list of the consequences of sexual and gender-based violence.) These consequences can be grouped into four main areas: health, psycho-social, safety/security, and legal/justice. Responses to sexual and gender-based violence should therefore focus principally on these four priority areas.

To RESPOND to the needs of victims/survivors of sexual and gender-based violence, you must understand the CONSEQUENCES of such violence.
### Summary of Some Main Consequences of Sexual and Gender-Based Violence

<table>
<thead>
<tr>
<th>HEALTH</th>
<th>EMOTIONAL/PSYCHOLOGICAL/SOCIAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Injury, disability, death</td>
<td>Anger, fear, resentment, self-hate</td>
</tr>
<tr>
<td>STIs and AIDS</td>
<td>Shame, insecurity, loss of ability to function in</td>
</tr>
<tr>
<td>Reproductive health disorders</td>
<td>family and society</td>
</tr>
<tr>
<td>Problem pregnancy, difficult labour</td>
<td>Depression</td>
</tr>
<tr>
<td>Miscarriage</td>
<td>Sleep and/or eating disorders</td>
</tr>
<tr>
<td>Unwanted pregnancy</td>
<td>Mental illness</td>
</tr>
<tr>
<td>Unsafe abortions</td>
<td>Social isolation</td>
</tr>
<tr>
<td>Depression à chronic illness</td>
<td>Suicide</td>
</tr>
<tr>
<td>Shock</td>
<td>Blaming the victim</td>
</tr>
<tr>
<td>Infection, chronic infections</td>
<td>Isolating/rejecting the victim</td>
</tr>
<tr>
<td>Excessive bleeding</td>
<td>Strain on community resources and supports</td>
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</table>

<table>
<thead>
<tr>
<th>LEGAL/PROTECTION</th>
<th>SECURITY/COMMUNITY ENVIRONMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strain on already overburdened police and</td>
<td>Victim/Survivor feels insecure, threatened,</td>
</tr>
<tr>
<td>court systems</td>
<td>afraid</td>
</tr>
<tr>
<td>Inadequate laws governing various forms of</td>
<td>Climate of fear and insecurity, either among</td>
</tr>
<tr>
<td>sexual and gender-based violence may</td>
<td>the entire community or only among women</td>
</tr>
<tr>
<td>translate into lack of judicial remedies for</td>
<td>Community could feel inadequate or powerless for</td>
</tr>
<tr>
<td>victim/survivor; no penal sanctions for</td>
<td>not preventing the violence through forming watch/</td>
</tr>
<tr>
<td>perpetrator</td>
<td>security groups</td>
</tr>
<tr>
<td>Inappropriate judicial responses that further</td>
<td>Community resorts to vigilante ‘justice’ to</td>
</tr>
<tr>
<td>traumatis the victim/survivor, such as early</td>
<td>protect itself against suspected perpetrators</td>
</tr>
<tr>
<td>and forced marriage to the perpetrator</td>
<td>Social workers and victims/survivors are</td>
</tr>
<tr>
<td>Poor reporting of incidents as a result of</td>
<td>ostracised</td>
</tr>
<tr>
<td>lack of confidence in a dysfunctional judicial system</td>
<td></td>
</tr>
<tr>
<td>Increased incidence of repeat offences against the same victim/survivor or other women or girls in the community</td>
<td></td>
</tr>
</tbody>
</table>

The actions required to respond to the needs of victims/survivors of sexual and gender-based violence are summarised on the following page. As with prevention strategies, these actions are most effective when they are designed through a multi-sectoral approach, including the involvement of the refugee community. When refugees/returnees are dispersed in urban settings, a greater number of actors may be needed to organise appropriate response packages.
Developing Community Education and Awareness Activities

Launch public information campaigns about sexual and gender-based violence that reflect the cultural sensitivities, ethics and particular circumstances that prevail in your setting. Topics covered in these campaigns could include: how and where to seek assistance if sexually attacked; the importance of reporting the incident and seeking assistance as soon as possible; the national and international laws that prohibit sexual and gender-based violence; and the penalties associated with acts of sexual violence. To spread these messages, you can use pamphlets, newsletters and posters; entertainment, such as songs and drama; presentations at community meetings, religious services, or other gatherings; radio and other mass media; and videos.

Training Actors in How to Respond to the Needs of Victims/Survivors

While engaging the community in discussions about sexual and gender-based violence and encouraging community members to report cases, the actors involved in responding to victims’/survivors’ needs must be getting ready to provide a service.

All staff involved in providing care should be sensitive to gender and receive training on gender issues. Priority training for sexual and gender-based violence should focus on the following:

- **Health staff** should conduct initial medical examinations and provide treatment and follow-up services.
- **Psycho-social/community counsellors** must be able to provide psycho-social support and relevant referrals.
■ **Security personnel** must be able to provide a safe haven for a victim/survivor who feels threatened and afraid.

■ **Legal/protection staff** should be able to support the victim/survivor in pursuing a case against the perpetrator, if she so decides.

If the victim/survivor reports an incident and there is no service or the care is not provided in a timely, compassionate and confidential manner, then her trust in the services is destroyed and others will not report.

**If the victim/survivor does not inform someone of the incident, adequate support cannot be provided.**

### Establishing Referral, Reporting, Monitoring and Evaluation Mechanisms

*Figures 6.1*

*Magnitude of the problem of sexual violence*

A clear referral system should be established in each setting so the victim/survivor knows where to go to receive assistance and receives that assistance in a timely manner.

This system, which should be developed by both humanitarian workers and members of the community, should be familiar to all members of the community and to all actors involved in providing services to victims/survivors. Inter-agency reporting and referral procedures should be written and translated into the appropriate local languages.

As the diagram below shows, most cases of sexual and gender-based violence go unreported:

*Source: World report on violence and health: WHO 2002*
All actors should agree to a single reporting system.

One important element of an effective reporting system is the use of a common sexual and gender-based violence Incident Report form. This form should be translated as needed and all actors should be trained in how to use it. See Chapter 7 for details on how to develop a common reporting system and on what information should be included on sexual and gender-based violence Incident Report forms. See Appendix 2 for a sample Incident Report form.

Actors should develop a mechanism to monitor and evaluate response actions and the effectiveness of reporting and referral systems.

The purpose of a monitoring system is to ensure that response interventions are developing as planned. Evaluation helps actors to identify good practices, the effectiveness of response actions, and whether there are victim/survivor needs that are not being met. All actors should be involved in developing these monitoring and evaluation mechanisms. See Chapter 7 for details on how to develop effective monitoring, reporting and evaluation mechanisms.
Empowering Refugee Communities to Respond

Working with the community is essential in developing sustainable programmes and actions.

Those programmes developed jointly by humanitarian actors and refugee communities have proven to be the most effective. To engage the community:

- Build knowledge and understanding of gender relations and sexual and gender-based violence within the refugee community through awareness campaigns.
  
  These campaigns should target all members of the population: men, women and children from all ethnic and religious groups. Men involved in peer counselling and awareness raising can help influence traditional courts’ attitudes towards victims/survivors, help develop community-based security systems that both respond to and prevent sexual and gender-based violence, and can help other men understand how such violence hurts the entire community.

- Maintain and strengthen existing social support networks.

- Support the role of women as equal decision-makers and community leaders.
  
  Female community leaders have played a critical role in encouraging victims/survivors to come forward and seek assistance. When trained as awareness campaign promoters or peer counsellors, female community leaders ensure that gender issues, including sexual and gender-based violence, are raised and examined.

- Provide safe shelter and immediate emergency assistance to victims/survivors.

- Escort victims/survivors to seek social, medical and legal assistance.

- Ensure the safety of the victim/survivor, the perpetrator, their families, and the community.
  
  Response activities should also be targeted at perpetrators. Victims/survivors of domestic violence will most often choose to remain with the perpetrator for economic reasons. If the perpetrator is not helped, he is likely to continue abusing.

- Co-ordinate within the refugee community and with other actors to promote effective prevention and response activities.

- Advocate to involve refugees in deciding what services should be provided, at what location, by whom, and in what language(s).
  
  In refugee camps, services can be provided at “drop-in centres”, women’s centres, community or youth centres, or other locations where victims/survivors feel comfortable enough to report the incident. Services should be provided at a location where confidentiality and the dignity of the victim/survivor can be maintained.

- Advocate for culturally sensitive services.
Advocate for the rights of victims/survivors and for the rights of women in general.

Most host governments do not allow refugees to be involved in political activities, such as advocating for changes in the law. This limits the ability of refugees to form women’s social movements to advocate on their own behalf. Establishing links with NGOs in the host nation that are involved in advocacy work enables the refugee population to benefit from public advocacy without violating the laws of the host country.

Developing a Response to the Health/Medical Needs of Victims/Survivors

The type of violence and the length of time between the incident and the time the victim/survivor arrives at the health facility will determine the type of care that can be provided.

It is most important for the survivor to visit the health facility as early as possible after the incident so as to receive the best possible care.

Provide comprehensive health care that is easily accessible.

- Medical examination and treatment should be performed by trained staff, ideally from the same sex as those in need of the service. Appropriate protocols and adequate equipment, supplies, and medicine should be used to:
  - prevent disease (sexually transmitted infections and others);
  - prevent unwanted pregnancy;
  - treat injuries;
  - collect forensic evidence;
  - provide counseling and treatment for psychological trauma;
  - screen health care patients for sexual and gender-based violence.
- Refer and provide transport to appropriate levels of care, when needed.
- Provide follow-up care.
- Provide medical evidence (testify where appropriate) in court proceedings arising from a victim/survivor opting to seek legal redress.
- Collaborate with traditional health practitioners to identify, report, refer and provide adequate primary level support to victims/survivors.
- Document, collect and analyse data.
Monitor health care services, including equal access for women, men and adolescents and quality of service provided.

Monitor the health needs of victims/survivors.

Identify and design strategies to address contributing factors, such as alcoholism.

Advocate on behalf of victims/survivors.
  - for protection, security, safety;
  - for changes in host country laws and policies that may conflict with victim/survivor rights and/or needs.

Collaborate with health facility staff, traditional health practitioners, and the community on training and sensitisation.

See also:
- Clinical Management of Survivors of Rape (UNHCR/WHO 2002)
- Prevention and Response to Sexual and Gender-Based Violence in Refugee Situations: Inter-Agency Lessons Learned Conference Proceedings (UNHCR 2001)
- A Practical Approach to Gender-Based Violence: A Programme Guide for Health Care Providers and Managers (UNFPA 2001)
- Inter-Agency Field Manual on Reproductive Health in Refugee Situations (Inter-Agency 1999)

Planning to Meet the Psycho-Social Needs of Victims/Survivors

After an incident of sexual and gender-based violence, the victim/survivor may experience many different emotional and psychological responses, including fear, shame, guilt, depression and anger. She may adopt strong defence mechanisms, such as forgetting, denial and deep repression of the traumatic event she survived. Family members may also experience a variety of emotions and need to receive support during this traumatic period.

Victims/survivors should be treated with empathy and care.

Community-based activities are most effective in helping to relieve trauma. These activities may include:

- Identifying and training traditional, community-based support workers.

- Developing women’s support groups or support groups specifically designed for victims/survivors of sexual violence and their families.

- Establishing “drop-in” centres where victims/survivors can receive confidential and compassionate care, information and counselling.
In addition, psycho-social workers should:

- offer crisis counselling (listening, emotional support, reassurance) for victims/survivors and their families, with referrals for longer-term emotional support;
- encourage the resumption of positive traditional healing or cleansing practices used successfully in the home country in response to traumatic or painful events;
- advocate on behalf of victims/survivors with health care providers, police/security forces, the legal/justice system, and other service providers;
- develop group activities for victims/survivors and other women that focus on building support networks, reintegrating into communities, building skills and confidence and promoting economic empowerment. Launch income generation and micro-credit projects to help (re-)establish a sense of self-sufficiency.

See also:

- How to Guide: A Community-Based Response to Sexual Violence Against Women, Ngara, Tanzania (UNHCR 1997)
- Mental Health of Refugees (UNHCR/WHO 1996)

Developing a Security and Safety Response

In some cases, a victim/survivor may be in need of a safe place to go after the incident. She may not be able to return to her home if, for example, the perpetrator is a member of the family, a neighbour or members of her community. The family and the community must take the lead in providing safe spaces and security for victims/survivors.

- Design strategies and options for the immediate protection of victims/survivors, such as relocation, establishing a safe zone in a camp, and offering safe spaces. Creating safe houses should be a last resort, since, if located away from the community and run by operational partners, they can further isolate the victim/survivor.
- Involve refugee elders in assisting victims/survivors.
- Analyse incident data and communicate with all actors and the community about security risks and issues.
- Ensure the rule of law prevails by maintaining an effective law enforcement presence and ensuring fair and rapid trials of perpetrators.
- Engage the community in all aspects of community policing. Be sure that female refugees are part of the community police force and/or neighbourhood watch.
- Consider alternative solutions to protect the victim/survivor, including relocation to another camp or resettlement, where appropriate.
■ Ensure trained female police officers are part of all refugee security contingents.

■ Conduct training sessions for police and security officers on sexual and gender-based violence.

See also:
- Prevention and Response to Sexual and Gender-Based Violence in Refugee Situations: Inter-Agency Lessons Learned Conference Proceedings (UNHCR 2001)

Establishing a Legal/Justice Response

**Establish a system with local authorities so that those victims/survivors who wish to seek legal redress for the crimes committed against them can do so in a timely manner.**

This involves creating and maintaining strong working relationships with local law enforcement agencies, such as the police, the judiciary, and public prosecutors. In addition, work with the community’s traditional courts to ensure that victims/survivors receive appropriate redress.

**Know the applicable legal regime.**

■ The protection officer should know the relevant national law on the following issues:

■ What is the applicable national law and procedures? What are the legal definitions of the various forms of sexual and gender-based violence? Is domestic violence a penal offence, distinct from common assault/battery offences?

■ If the country’s constitution incorporates a bill of rights, can the relevant provisions be invoked to address certain forms of sexual and gender-based violence?

■ What are the laws concerning abortion? If abortion is generally illegal, are there any special circumstances (exceptions), for example, when a woman becomes pregnant as a result of rape, when the life of the woman is endangered, or when there are reasons related to the psychological welfare of the woman, under which it may be allowed? What is the evidentiary requirement to satisfy the special circumstances?

**Know how to handle a complaint of sexual and gender-based violence.**

■ Staff dealing with the victim/survivor who decides to seek legal redress must be sensitive and compassionate. At the same time, they have to provide full information about the legal process in the country of asylum.

■ The survivor/victim should be informed about what to expect from the legal process. Protection and community services staff should collaborate to ensure that the complainant is adequately informed
of her rights, the procedures and time involved in the legal process. They should be prepared to answer any queries the complainant may have. The complainant should be counselled on the nature of the crime under the law, the time it may take to investigate and prosecute the crime, the possible outcomes from the judicial process, the roles of UNHCR and collaborating agencies in the process.

- Protection staff should also counsel the victim/survivor on what reproductive health services are available, including access to counselling and procedures to treat injuries, prevent disease and terminate unwanted pregnancy, as authorised under national laws.

- Protection officers should also:
  
  • ensure that the survivor and perpetrator have registration documents and identity cards;
  
  • work closely with local lawyers familiar with national laws and procedures concerning sexual violence;
  
  • ensure that the complaint report is recorded with the local police;
  
  • ensure that the medical report and a statement from the survivor/victim are recorded and communicated to the relevant national authorities (police or prosecutor);
  
  • ensure that crucial witnesses from the refugee community comply with the legal procedures by providing statements and attending court when required;
  
  • in liaison with the security officer and police, ensure that parties to sexual violence are protected against intimidation and other threats to physical security;
  
  • ensure that UNHCR or implementing partners/agency staff accompany all refugee victims/survivors to court hearings.

Know the role of UNHCR and national legal service providers.

- Protection officers should identify local women’s rights organisations and lawyers associations working on issues of sexual and gender-based violence and develop partnerships to address the problem. In areas where UNHCR provides legal aid, it should ensure that qualified legal practitioners represent victims/survivors. Representatives of NGOs working with UNHCR protection staff to provide legal services should:
  
  • provide the complainant with all the necessary information on the legal and criminal procedure with the aim of preparing the complainant and her family members for the court process;
  
  • assist the complainant in applying for legal aid funding, if this assistance is available under the national law (if this assistance is not available, UNHCR should ensure that budgets include an item to cover the costs of legal representation for victims of sexual and gender-based violence);
• accompany the complainant to the police station and court and be present during all interviews and court appearances;

• apply to the court for observer status in all cases in order to be allowed to address the court (this is particularly helpful in cases involving children);

• explore the possibility of conducting the court hearing in camera to protect victims/survivors and their families from further trauma;

• maintain confidential records of all cases and regularly update UNHCR protection staff.

Know the rights of the accused.

The accused is entitled to be treated with the rights accorded to a person whose guilt is not proven. UNHCR has an obligation to the accused to ensure that they have a fair trial and are subjected to humane treatment in the course of interrogation and incarceration. UNHCR protection staff will ensure that the rights of an accused person are respected during investigations and during the trial. In particular, UNHCR should ensure that:

• delays in the trial are minimal;

• the accused is not tortured while in custody;

• the accused is treated humanely while in custody;

• if the accused is treated inhumanely, UNHCR will make representations to the relevant authorities to ensure that they are treated in accordance with the law.

Know applicable sentences and punishment.

UNHCR protection staff should ensure that refugees convicted of sexual and gender-based violence are punished in the same way that nationals would be punished, i.e. in accordance with relevant national sentencing guidelines. UNHCR and its national legal services NGO partner should ensure that perpetrators are sanctioned in a manner that does not discriminate against them because of their refugee status. Sentencing of child offenders should take into account the need to rehabilitate them. Wherever possible, minor offenders should not be jailed in the same facilities as adult offenders.

Know about compensation.

If the victim/survivor seeks compensation in a civil action against the perpetrator, she should be provided with legal assistance to do so. Where UNHCR is unable to provide such assistance, efforts should be made to facilitate a victim’s/survivor’s access to free legal counsel from legal aid clinic or women’s rights organisation within the civil society.

Know alternative ways of resolving disputes.

In some communities, victims/survivors may be more comfortable with seeking recourse from traditional or customary dispute resolution mechanisms. In some instances, victims and their families are pressured
to make use of such processes for fear of being ostracised if they do not. UNHCR protection staff should monitor these procedures to ensure that they are consistent with national laws and international human rights standards. When these alternative structures violate national law, protection staff should conduct training and awareness raising sessions with the community, encouraging community members to adapt their conflict resolution practices so they conform to international human rights standards. Changing these practices make take time, so patience and a non-judgmental attitude are required.

See also:

- Step-by-Step Guide for Protection Officers, Prevention of and Response to Sexual and Gender-Based Violence (UNHCR 1998)
- Refugee Children: Guidelines on Protection and Care (UNHCR 1994)
- Guidelines on the Protection of Refugee Women (UNHCR 1991)

Identifying the Roles of Other Potential Actors

In addition to actors from the health, community services, security and protection sectors, other people have important roles to play in responding to the needs of victims/survivors. All those who work with refugees should know their own responsibilities and those of others involved in providing support to victims/survivors of sexual and Gender-based violence.

Field Staff

- Receive and review sexual and gender-based violence incident reports.
- Ensure safety of victim/survivor and referrals for compassionate, caring assistance from all actors.
- Advocate for victim/survivor and family to receive assistance from all actors, as needed.
- Develop administrative responses to victim/survivor safety needs, such as by dividing the household ration card and allocating separate housing and non-food items to the victim/survivor.
- Maintain records in order to monitor trends in sexual and gender-based violence, analyse problems, and develop strategies for prevention and response.
- Co-ordinate with all other sectors and actors.

Programme Staff

- Assist and support all sectors in establishing a multi-sectoral prevention and response plan.
- Allocate resources to support appropriate activities.
- Receive and review summary reports with data, trends, analysis of prevention and response activities and needs.
- Encourage international NGO partners to allocate resources for supporting prevention and response programmes.
- Co-ordinate with all sectors and actors.

**Head of Office**

- Receive and review reports and analyses of sexual and gender-based violence data, programme activities and outcomes.
- Support UNHCR staff in designing, implementing, monitoring, and evaluating prevention and response strategies.
- Participate in inter-sectoral and inter-agency co-ordination.
- Engage all UNHCR staff, refugees, partners, and host government in programme development.
- Provide high level advocacy and support for prevention and response activities; assist in problem solving and advocate for adequate resources.
- Collaborate with colleagues in other UNHCR offices and other UN agencies to maximise use of available resources and share information.

**Police**

- Receive the complaint and conduct investigations, following the legal and criminal procedures as laid out in the law.
- In accordance with the standard police procedures, arrest the accused person(s), conduct investigations, prepare charges, serve summons to and ensure that all potential witnesses appear in court.
- Advocate, when necessary, for the expeditious investigation and prosecution of cases of sexual and gender-based violence.
- Explain the legal and criminal process to the victim/survivor.
- Be sensitive to the victim’s/survivor’s needs for privacy, confidentiality and respect.
- Participate in legal and rights awareness education campaigns conducted by protection staff for the benefit of the refugee community.
Courts

- Prepare the weekly case register indicating which matters involve refugees as parties (complainant or accused).
- In accordance with standard procedures, administer legal proceedings in cases of sexual and gender-based violence, such as admitting cases, presiding at hearings and trials, summoning witnesses, passing judgements and sentences.
- Participate in workshops and awareness raising initiatives organised by protection staff.

Developing a Plan For Working with Perpetrators

Working with perpetrators of violence is difficult but necessary. Perpetrators’ human rights, including their own safety, must be respected. If the perpetrator is also a refugee, he is deserving of international protection. The multi-sectoral team should develop plans for working with perpetrators.

- Consult with national authorities on what actions are taken locally to work with violators of sexual and gender-based violence.

- Engage security personnel and police, including community security guards, to work with and monitor the actions of known perpetrators.

- Where possible, separate perpetrators from the rest of the community.
Key Points to Remember

*The community should take the lead in designing ways to support victims/survivors.*

**Develop community education and awareness activities**
- Launch public information campaigns about sexual violence aimed at all members of the community.

**Establish referral and reporting mechanisms**
- A clear referral system should be established in each setting so the victim/survivor knows where to receive assistance and receives that assistance in a timely manner.

**Empower the refugee community to respond**
- Working with the community is essential in developing sustainable, effective response strategies.

**Develop a response to the health/medical needs of victims/survivors**
- Provide health care, referrals and follow-up care that are easily accessible.

**Respond to the psycho-social needs of victims/survivors**
- Victims/survivors should be treated with empathy and care.

**Develop a security and safety response**
- The victim/survivor must be provided with security after the incident and the community must take the lead in providing her with a safe space.

**Establish a legal/justice response**
- Establish a system with local authorities so that those victims/survivors who wish to seek legal redress for the crimes committed against them can do so in a timely manner.

**Identify the roles and responsibilities of other potential actors**
- Field, programme and management staff can play crucial roles in responding to the needs of victims/survivors.

**Develop a plan for working with perpetrators**
- Perpetrators’ human rights, including their own safety, must be respected.
CHAPTER 5
SPECIAL CONSIDERATIONS FOR REFUGEE CHILDREN

While the principles and guidelines discussed in other chapters also apply to refugee children, there are other specific issues that should be considered when working with refugee children. Refugee children face specific forms of sexual and gender-based violence: harmful traditional practices, trafficking, child prostitution, sexual violence within the family and sexual exploitation, abuse and violence by persons having unhindered access to children.

Certain groups of refugee children are particularly at risk of sexual and gender-based violence. They are: unaccompanied and separated children, children in detention, child soldiers, adolescents, mentally and physically disabled children, working children, girl mothers, children born to rape victims/survivors, boys as victims/survivors, and child perpetrators.

When working with refugee children, be familiar with the Convention on the Rights of the Child (1989), which sets comprehensive standards for the protection of the rights of all children. In addition to the Guiding Principles defined in Chapter 2, four other principles should underpin your work with refugee children: the right to life, survival and development; the best interests of the child; non-discrimination; and participation.

The Convention on the Rights of the Child (CRC) defines a child as a person under the age of 18, unless the relevant national laws state an earlier age of adulthood. This means that the CRC can be applied to everyone up to 18 years of age, unless it is shown that she/he is an adult under national law.

Refugee children may find themselves at particular risk of sexual and gender-based violence given their level of dependence, their limited ability to protect themselves, and their limited power and participation in decision-making processes. Because they have had relatively little experience of life, children are also more easily exploited and coerced than adults. Depending on their level of development, they may not fully comprehend the sexual nature of certain behaviours, and they are unable to give informed consent. Additional ethnic, gender, cultural, economic and social factors may also increase refugee children’s risk of becoming victims of sexual and gender-based violence.

Sexual and gender-based violence has devastating effects on the development and physical and mental health of children.
As discussed in Chapter 1, sexual abuse can take a variety of forms, many of which can be targeted against children. Specific acts of gender-based violence, such as harmful traditional practices, are often perpetrated during a person’s childhood. Those who perpetrate acts of sexual and gender-based violence against refugee children may be people the child knows and trusts, people performing the role of caregiver or other children. Be aware that the child’s perception of events might be distorted by this fact.

When working with refugee children, familiarise yourself with the CRC. The Convention comprehensively details the basic human rights of children, everywhere, including refugee children. These rights include the right to be protected from sexual abuse and exploitation. The CRC thus offers protection to refugee children even in States that are not party to any refugee instrument. The Optional Protocol to the CRC on the Sale of Children, Child Prostitution and Child Pornography (2000) relates to the issues of trafficking, selling and abducting children.

Guiding Principles

The following are universally recognised principles, as spelled out in the CRC, that are particularly relevant when working with refugee children:

- **The right to life, survival and development:** This right must be guaranteed by adopting measures to safeguard life. The “survival and development” principle applies not only to a child’s physical survival and development, but also to a child’s mental and emotional development. Early marriage, for example, threatens the rights of both the child-mother and her baby to life and to full survival and development (Art.6, CRC).

- **Non-discrimination:** Every child within a State’s jurisdiction, regardless of his/her gender and immigration status, holds all the rights of the CRC. This principle thus includes refugee children (Art.2, CRC).

- **The best interests of the child:** This important principle should be applied both to decisions relating to individual children and to broader policy matters and decisions relating to groups of children. In each and every decision affecting children, the various possible solutions must be considered and due weight given to the child’s best interests (Art.3, CRC).

- In deciding policy, such as the allocation of budgets, a full analysis on how a certain course of action may affect children is required. The policy does not necessarily have to be based on what is best for children, but if any conflicts are identified, the decision-makers must make “the best interests” of children “a primary consideration”.

- In determining an individual child’s best interests, decision-makers need to consider both the objective standards deemed to be in the child’s best interests and subjective opinions, which take into consideration the child’s views. The decision about how to establish a child’s best interests can often be difficult, and no single answer may be obviously and indisputably correct. There are many factors that have to be considered, such as age, sex, cultural background, general environment and past experiences of the child. Any interpretation of the principle must be made in the spirit of the CRC and must give due regard to expert advice, from both a legal and child development perspective.
Participation: The significance of this article is that children have the right to influence decisions that will affect their lives, and that their views must be given “due weight”. This principle should apply in all asylum proceedings, in planning for individual children, and in overall programme planning (Art.12, CRC). The older the child the greater the weight that should be given to her opinion in making decisions that affect her.

The guiding principles are all relevant in determining what the best interests of a child are in a particular situation. In some situations, the child’s best interests may not be the same as the child’s stated wishes and opinions and may need to override them.

See also:

- UNHCR Resettlement Handbook (UNHCR 2002)
- Refugee Children: Guidelines on Protection and Care (UNHCR 1994)

Groups of Refugee Children at Particular Risk of Sexual and Gender-Based Violence

- Unaccompanied and separated children.
- Children in detention.
- Child soldiers.
- Adolescents.
- Mentally and physically disabled children.
- Working children.
- Girl mothers.
- Children born to rape victims/survivors.
- Boys as victims/survivors.
- Child perpetrators.
Unaccompanied and Separated Children

The terms “unaccompanied child” or “separated child” should be used instead of “orphan”. For UNHCR, a child is an orphan only when both parents are confirmed to be dead. Labeling children as orphans requires careful verification and tends to encourage adoption rather than focusing action on family tracing and increasing community support.

- Unaccompanied and separated refugee children face a greater risk of sexual exploitation, abuse, military recruitment, abduction, trafficking and detention since they may not have a trusted adult to protect and assist them. In emergency situations, refugee children may be living with an extended family member, therefore “accompanied”, but they may still face risks similar to those faced by unaccompanied refugee children.

- Be aware that the group of unaccompanied and separated children may also include child-headed households, in which older siblings care for younger children.

- Be aware that children orphaned by AIDS also fall within the group of unaccompanied and separated children. Before becoming an orphan, children affected by AIDS may have to care for a dying parent. This often involves assuming adult responsibilities, abandoning school and looking after siblings. Children who are then orphaned by AIDS, especially girls, are often marginalised and stigmatised and are often denied equal access to services offered to other refugees. They are thus at particular risk of sexual abuse and exploitation. As the number of children orphaned by AIDS increases, there will likely be an increase in the number of children forced into prostitution or forced to work “in the streets” or in domestic services.

Children in Detention

Children who are detained or are otherwise deprived of their liberty may be highly vulnerable to sexual violence and abuse and must be treated in a manner that takes their age specific needs into consideration.

Sexual abuse reportedly occurs in many detention and prison facilities and institutions, especially where inmates share common cells. In such situations, children may be targeted for abuse because of their special qualities as children, for example, because of a belief that they are free of HIV/AIDS or because of the value many cultures place on virgins. It is thus essential to ensure that child detainees are separated from adult detainees unless it is considered in the child’s best interests not to do so.

Child Soldiers

A child soldier is any person under 18 years of age who forms part of an armed force in any capacity and those accompanying such groups other than purely as family members as well as girls recruited for sexual purposes and forced marriage.

United Nations Secretary-General Report to the Security Council, 2000

Refugee children become child soldiers in many ways: some are conscripted, some are pressganged, some join as a way to survive or to
protect their families, while others are forcibly abducted, including girls, who are taken for sexual purposes.

**Recruitment often takes different forms for boys and girls:** boys are used in combat and other military activities, whereas girls are more frequently used for sexual slavery and forced labour.

Children in or close to conflict zones and unaccompanied and separated children face an even greater risk of military recruitment, either by State or non-State entities. UNHCR advocates against the use of military recruitment. Sexual abuse of boys, and particularly of girls, during their military recruitment can have significant socio-cultural implications that can adversely affect prospects for family reunification or social reintegration after they are demobilised. Children, especially girls, are often overlooked in formal demobilisation procedures. It is essential, however, to advocate for the inclusion of girls in any demobilisation activities.

### Adolescents

The definition of “adolescent” may change from culture to culture and should be adapted to suit the specific refugee situation. Whether an adolescent has assumed roles and responsibilities of an adult is also a reflection of the culture and the refugee situation.

The protection and assistance needs of adolescents may not be as obvious as those of children, but they are vitally important as adolescents are at particular risk of sexual and gender-based violence and their needs are often inadequately addressed.

Adolescents, especially girls, are more at risk of sexual abuse and exploitation as perpetrators may consider them to be free of sexually transmitted diseases. Hence adolescent girls and boys are also at risk of contracting HIV/AIDS and other sexually transmitted diseases. Girls may sustain unwanted and potentially dangerous pregnancies due to rape. Adolescents often have less access to information about reproductive health care than adults, as they are frequently not targeted for such information.

### Mentally and Physically Disabled Children

Children with mental and/or physical disabilities are often “hidden” away by the family and they become “invisible”, unable to access existing support structures. Excluded, and often unable to escape perpetrators, they run a greater risk of suffering sexual abuse. These children require special consideration when designing programmes to prevent and respond to sexual violence and exploitation.

### Working Children

Children working in domestic services, usually girls or children working and/or living on the street (“street children”), may be particularly at risk of sexual abuse and exploitation. Unaccompanied and separated children and children in child-headed households may be under pressure to seek paid work. Employers who have bought children for labour (bonded labour) often exert enormous power over the children, rendering those children particularly vulnerable to abuse and exploitation.
Girl Mothers

When working with girl mothers, it is important to maintain a non-judgmental attitude at all times.

Girl mothers are often at risk of sexual exploitation if they are unable to meet their own and their children’s basic needs because of poverty. Girl mothers and girls who are pregnant as a result of sexual abuse and/or exploitation may face isolation, discrimination and stigmatisation and may not have access to basic services. All of these factors could put them at further risk of sexual abuse and exploitation.

It is important to ensure that girl mothers resume school attendance or other socio-economic activities that prevent their further exposure to other forms of sexual and gender-based violence.

Children Born to Rape Victims/Survivors

Children who are the products of rape may be mistreated, or even abandoned, by their mothers and families. These children are at particular risk of abuse and exploitation and must be closely monitored. It is important to ensure that the family and the community do not stigmatise either the child or the mother. Foster placement and, later, adoption, should be considered if the child is rejected, neglected or otherwise mistreated.

Boys as Victims/Survivors

Sexual abuse of boys is under-recognised, under-reported, and under-treated. Given certain cultural restrictions, myths or taboos concerning homosexuality, and/or extreme shame, boys are even less likely than girls to report if they have been sexually abused. Communities may refuse or be reluctant to accept that boys can be victims; boys may believe they have to “tough it out” in silence.

Child Perpetrators

Children can be perpetrators of sexual and gender-based violence since, like adults, they can take advantage of unequal power relations among themselves. Coercing an unwilling girl or boy to engage in sexual acts is a form of sexual abuse. Regardless of his/her willingness, the younger child may be unable to understand what is going on and to give informed consent. This, too, is sexual abuse.

Both the victim’s trauma and the perpetrator’s need for rehabilitation must be addressed. The perpetrator may also be a victim of sexual abuse and exploitation and is entitled to help and support. While it is true that most perpetrators have histories of sexual abuse, it is not true that most victims become child abusers themselves. Most of those who sexually abuse in adolescence usually don’t abuse as adults if they get help when they are young.

Juvenile offenders must be protected from suffering abuse while they are in prison. This can be achieved through fast-track hearings and monitoring. They should also be assisted in their psycho-social rehabilitation. Laws and procedures that ensure proper safeguards for
juvenile offenders must be promoted where they do not exist and properly implemented where they do.

See also:

- Inter-Agency Guiding Principles on Unaccompanied and Separated Children (Inter-Agency 2003)
- Optional Protocol to the CRC on the Involvement of Children in Armed Conflict (2000)
- Revised Guidelines on Applicable Criteria and Standards Relating to the Detention of Asylum-Seekers (UNHCR 1999)
- Inter-Agency Field Manual on Reproductive Health in Refugee Situations (Inter-Agency 1999)
- Refugee Children: Guidelines for Protection and Care (UNHCR 1994)
- Protocol Additional to the Geneva Convention of 1949 and Relating to the Protection of Victims of International Armed Conflict (1977)

Specific Forms of Sexual and Gender-Based Violence Used Against Children

Children can be victims/survivors of most forms of sexual and Gender-based violence discussed in Chapter 1. However, children are often victims of the following forms of violence:

- Harmful traditional practices.
- Trafficking.
- Child prostitution.
- Sexual violence within the family.
- Sexual exploitation, abuse and violence by persons having unhindered access to children.

Harmful Traditional Practices

When traditional practices are beneficial, refugee communities should be encouraged to maintain them as a way of preserving their identity and culture. However, some traditional practices are harmful to the health, well-being and development of children. These practices are condemned internationally because of the grave health risks they may entail and because they violate various human rights. Harmful traditional practices often take place during childhood, when a child is powerless to oppose these. Harmful traditional practices that affect children, mostly girls, include female genital mutilation, child marriage, son preference, dowry-related violence, forced marriages (e.g. after...
the crime of rape) and belief in witchcraft (e.g. whereby sex with a child is thought to provide benefits for the family).

**Trafficking**

Refugee children, particularly unaccompanied and separated children, are at risk of being forcibly or deceptively trafficked, often for commercial sexual exploitation. Trafficking of a child means the recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation. It is not necessary to show that force, deception or coercion was used for trafficking to have occurred.

The Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, Supplementing the United Nations Convention Against Transnational Organised Crime, 2000 excludes the possibility of “consent” to trafficking by any person under the age of 18. In many cases, trafficking may involve giving payment or benefits to win the consent of the person(s) who have control over the child. Trafficked children may face serious consequences after their escape and/or upon return, including reprisals or retaliation from trafficking rings or individuals, the possibility of being re-trafficked, physical punishment or further deprivation of liberty, ostracism from the community or family, or severe discrimination.

**Child Prostitution**

Child prostitution means the use of a child in sexual activities for remuneration. The offering, obtaining, procuring or providing of a child for prostitution should be fully covered under the criminal or penal law of a State. By its very definition, child prostitution is sexual exploitation. Once refugee children are engaged in prostitution they are also at risk of further sexual and gender-based violence.

Poverty and social inequality put refugee children at an increased risk of sexual exploitation, particularly prostitution. Children, especially girls, are particularly vulnerable, given that their virginity, perceived innocence and physical immaturity may be highly valued by perpetrators.

**Sexual Violence Occurring within the Family**

Child abuse and exploitation within the family present a complex protection challenge since the person who is responsible for protecting and caring for the child, in many cases a male relative, is doing neither. Sexual violence within the family is almost always seen as a private matter that should not involve outsiders; as a result, an abused child may be blamed for the incident and be further victimised. While it is impossible to offer blanket guidance to apply to all cases, identification, confidential reporting of allegations, involving health workers, teachers and community leaders, and investigation of the incident(s) are essential for developing a protection plan for the child. It might be helpful or even necessary to work with the parent who is not abusing the child and to remove the abuser from the household while the situation is under investigation.

Even when they are not themselves directly targeted, children in families in which one or more members have survived or are
experiencing sexual and gender-based violence face other difficulties. Since children’s psychological and emotional well-being may be threatened if they have witnessed such violent events, they should be offered counselling services. In addition, traumatic events can sometimes compromise an adult’s ability to care for her/his children, so the parents and children in such a family should be monitored closely.

**Sexual Exploitation, Abuse and Violence by Persons Having Unhindered Access to Children**

When persons outside the immediate family have unhindered access to children in isolated environments, sexual exploitation, abuse and violence may occur. Such persons might include teachers, religious instructors, caretakers, humanitarian aid workers and others having access to children in schools, during after-school and religious activities, sports, day-care etc. As a first step it is important to identify these potential sources of risk. Strategies to address these risks might include close screening of employees and volunteers, reducing opportunities for spending time alone with children without any other adults being present, close monitoring and supervision, use of buildings with visibility of all spaces and increased parent involvement in activities.

**See also:**

- Choose With Care (ECPAT Australia 2001)
- Convention concerning the Prohibition and immediate Action for the Elimination of the Worst Forms of Child Labour, C 182 (1999)
- UN Declaration on the Elimination of Violence against Women (1994)

**Special Considerations in Preventing Sexual and Gender-Based Violence Against Children**

In addition to the strategies to prevent sexual and gender-based violence discussed in Chapter 3, a child-centred situation analysis will help to identify particular areas of risk and resources and ensure a multi-sectoral approach. The role of the refugee community in protecting refugee children should be explored and supported.
Transforming Socio-Cultural Norms

STRATEGY: Develop Information, Education, Communication (IEC) Campaign

- Awareness raising campaigns on the issue of sexual and gender-based violence against children should be based on the CRC and its two Optional Protocols and should target all partners, including the refugee community and military and peacekeeping forces.

- Advocacy should be based on traditional norms and values for the protection of children where these exist and should simultaneously challenge preconceived assumptions based on gender stereotypes (e.g., addressing the issue of boys as victims/survivors). Any response initiative should be based on a thorough understanding of local norms, customs and taboos related to sexual behaviour.

- Public health campaigns about “safer sex” and transmission of HIV/AIDS may help dispel myths circulating in the refugee population, such as the assumption that sex with a virgin girl cures HIV/AIDS. These campaigns should target men and boys.

- Strategies to prevent harmful traditional practices unavoidably conflict with strong cultural norms and should be highly sensitive to them. A thorough understanding of the nature and extent of the particular practice, its roots and the social consequences it entails are required. Education and information that focus on the detrimental effects on the health and development of children, rather than on the legal or human rights aspects of the practice, are more likely to succeed and should be targeted at both male and female religious leaders, traditional leaders, tribal elders, political leaders, traditional birth attendants, other health workers and refugee children, women and men. Local groups that challenge such harmful traditional practices should be supported, since they can initiate and lead community-based activities aimed at eliminating these practices. Alternative income generating activities may have to be identified for those carrying out such harmful practices, and the community’s respect for them must be maintained. The importance of educating girls and women cannot be underestimated, as the incidence of harmful traditional practices is linked to illiteracy.

STRATEGY: Engage Children and Youth

Refugee children should be encouraged to participate in developing and implementing programmes on sexual exploitation, abuse and violence. Where appropriate and after a careful consideration of their best interests, child victims/survivors could be consulted or invited to participate.

STRATEGY: Work with Boys

Working with boys is essential to ensure that they are aware of and understand the equal rights of girls. This could include e.g. their support
of their sisters’ access to education, and promoting positive attitudes and respect towards girls in the classroom and playground.

**Re-building Family and Community Support Systems**

**STRATEGY:**

**Ensure Access to Education**

Ensuring that all refugee children have access to primary and basic education and where possible secondary and vocational education will help reduce the risk of exploitation. Special programmes tailored to the needs of girls who have dropped out of school, will also reduce this risk. Educating children on their rights, through various forms of social and life skills training, will help young people to make better life choices and help them protect themselves from exploitation. Equal participation of girls in school should be actively promoted.

The community should be involved in recruiting and managing teaching staff and educators whom they feel they can trust, as teachers can also be sexual abusers. Specific measures to promote the recruitment of female teachers should be encouraged. Carefully selected educators should be involved in monitoring children for signs of sexual and gender-based violence. Girls should be provided with suitable clothing and sanitary materials. Furthermore, the establishment of after school clubs for girls might offer peer counselling and support.

**Creating Conditions to Improve Accountability Systems**

**STRATEGY:**

**Assess Persons with Access to Refugee Children**

Assessing the knowledge, attitudes, and behaviours of all people who have access to refugee children may reveal exploitation in unexpected situations, such as in schools and child-care centres. Training such staff and monitoring their work are important elements in any prevention strategy.

**Designing Effective Services and Facilities**

**STRATEGY:**

**Register Each Child**

Registration and documentation, including birth registration, is vital for every individual refugee, especially for unaccompanied and separated children, as they are prerequisites for securing rights and access to services. Registration also helps in identifying and monitoring groups at particular risk, supporting access to juvenile justice, preventing military recruitment and deterring traffickers.
STRATEGY: Ensure Access to Services

Ensure that children have access to the same food rations and services as the rest of the population and consider additional support if required, for example, by building special shelters to accommodate child-headed households.

STRATEGY: Trace Families

The needs of unaccompanied and separated children should be promptly addressed through family tracing, securing appropriate and monitored forms of temporary care, and family re-unification, if it is in the best interests of the child.

STRATEGY: Include Children when Planning, Designing and Implementing Activities

Refugee children, especially adolescents, should be consulted in planning the camp/settlement, including the location of schools and recreational facilities, and in planning housing allocations and other relevant programmes and activities.

See also:

- Action for the Rights of Children (ARC) Foundations: Community Mobilisation (UNHCR, OHCHR, UNICEF, Save the Children 2001)
- UNHCR Executive Committee Conclusion on Registration of Refugees and Asylum-Seekers, No.91 (LII) (2001)

Special Considerations in Responding to Sexual and Gender-Based Violence Against Children

A response to sexual and gender-based violence should include the actions and services described in Chapter 4. Additional issues to consider when working with children are also discussed in Action for the Rights of Children, Critical Issues: Abuse and Exploitation (UNHCR, OHCHR, UNICEF, Save the Children, 2001).

Consider the best interests of the child. Children who are victims/survivors of sexual abuse need speedy access to medical care and psychological support. They may also need access to legal services. All actions should be consistent with the principle of the child’s best interests. The child’s own expressions of her wishes and feelings will be instrumental in determining her best interests.
Establish Child-Friendly Referral, Reporting, Monitoring and Evaluation Mechanisms

It is important to have child-friendly, visible and widely publicised reporting mechanisms run by experienced and knowledgeable staff and/or refugees. Mainstream reports of sexual and gender-based violence within reporting processes that address other violations of children’s rights, rather than creating a separate process to handle reports of sexual and gender-based violence against children.

Monitoring children at risk, such as unaccompanied and separated children in temporary care arrangements, those in foster families, street children, children in detention, child mothers, and disabled children, is essential for providing protection against sexual and gender-based violence.

Interviewing the Child

The person interviewing the child should be highly skilled and well trained, able to deal with overwhelming emotion and experienced in enabling children to talk about extremely difficult issues. Understanding the culture of the child is vital; for this reason, it is preferable that those working with refugee children share the same language and cultural background.

In general, it is recommended to use interviewers who are of the same sex as the child. However, cultural and social factors must also be taken into account when determining the sex of the interviewer. In many societies, for example, boys will not speak to other males about homosexual abuse, but may be more comfortable speaking to a woman.

Creating a Safe Environment

Determine who should be present during the interview and examination. It is possible that a family member is the perpetrator, even if the child denies it. It may be preferable to have the parent or guardian wait outside during the interview and examination and have an independent, trusted person present instead. Ask the child, when no one else is present, if she/he wants a parent or guardian to be present during the interview and respect the child’s wishes. For further guidance, see the sections on Interviewing Skills and Preparing and Conducting an Interview in Working with Unaccompanied Children: A Community-Based Approach.

Be aware that there are other ways to collect information, including through games, storytelling, drama and asking the child to draw pictures. These methods require skilled observation and analysis by specialists or staff who have received the appropriate training.
Interviewing Techniques

- Sit at eye level and maintain eye contact, if culturally appropriate.
- Assure the child she/he is not in any trouble and make every effort to ensure the child’s physical integrity.
- Introduce yourself (and the interpreter) and explain carefully what the interview is about, what kind of questions will be asked and why. This is done to minimise the child’s possible misperception and fear, which may distort the child’s responses.
- Assure the child it is acceptable to respond to any questions with “I don’t know” and to ask questions.
- Ask a few questions about neutral topics, such as school, friends, whom the child lives with, favourite activities, and let the child talk for a few minutes. This will allow time for the child to become more relaxed and enable you to listen and learn about how the child communicates.
- If a child is unable to talk about a particular event, but can answer other questions, refrain from asking about the event for a while.
- Be patient; go at the child’s pace.
- Ask open-ended questions to get information about the incident in the child’s own words. Ask yes-no questions only to clarify details.
- Be prepared to recognise when the child’s limits have been reached.
- The interview should be concluded with a discussion about more normal present day events to restore a sense of security.

Developing a Response to the Health/Medical Needs of Victims/Survivors

NEVER coerce, restrain or force a frightened, resistant child to complete an interview or examination. Restraint, force, coercion, and manipulation are often part of sexual abuse, and if used by those attempting to help, will only heighten the child’s fear and anxiety, and worsen the psychological impact of the abuse.

In addition to creating a safe and trusting environment, prepare the child for the exam and encourage the child to ask questions about anything the child is concerned about or does not understand at any time during the examination.

With adequate preparation, most children will be able to relax and participate in the exam.

It is possible that the child has pain and cannot relax for that reason. Explain what will happen during the exam, using terms a child can understand.

It is often helpful to have a doll or other toy on hand to demonstrate procedures and positions. Show the child the equipment/supplies, such as gloves, swabs, etc., and allow the child to use these on the doll.

Girls who have been abused may face health complications associated with self-administered abortions, unwanted pregnancies and miscarriages. They may also have children of their own and thus may be in need of special care. Child victims/survivors who have been demobilised may also have been infected with sexually transmitted diseases, including HIV/AIDS.
Girls who have undergone female genital mutilation need special care, especially during pregnancy, delivery and the period after the delivery.

Appropriate medical and psychological support should be given to girl mothers prior to and following the delivery, including guidance on child rearing.

Planning to Meet the Psycho-Social Needs of Victims/Survivors

A professional trained to work with children is required when responding to a child’s need for psycho-social support. This professional should preferably be of the same ethnic background as the child or at least have good cross-cultural skills. The professional’s role could be either to provide treatment directly to the child or to advise and support members of the family or community who will do so.

The rehabilitation of child victims/survivors, including children who have undergone military recruitment, requires particular attention. Accelerated learning and rapid education programmes are key to enabling victims/survivors to overcome the abuses they have suffered and to build new futures for themselves.

It may be necessary to offer additional assistance and psychological support to girl mothers. This can include helping the girl mother to resume her education and finding income generating activities to meet her and her child’s basic needs, even if she still lives with or near her family. The other members of her family will also need advice in how to provide appropriate support to the girl mother and her child.

Developing a Security and Safety Response

A child should not be separated from family and/or community for treatment, unless it is done to protect a child from abuse or neglect.

It is crucial to be able to respond quickly when cases of harmful traditional practices are reported. In these instances, the most fundamental rights of the child, including the rights to life, liberty and physical integrity, may be violated. When the physical safety of a child is threatened, local solutions should be sought, including placing the child in the care of a shelter outside the community. If local solutions are not available, resettlement may have to be considered to guarantee the child’s safety.

Establishing a Legal/Justice Response

All reports of sexual and gender-based violence against children must be investigated thoroughly. Workers must use patience and special care with these reports. The child may deny the abuse for many reasons, including fear of the perpetrator. Inappropriate or insensitive intervention can cause further distress to the child and can discourage others from seeking help. Where possible, staff should be trained in working with children. It may be useful to obtain assistance from colleagues who are more familiar with refugee children. Translators or interpreters may also be required. Ensure that the local police have staff trained in dealing with child victims/survivors of sexual and gender-based violence and child perpetrators. When cases involving
children go to trial, ensure that child-friendly judicial procedures are put in place.

**Involving the Family and the Community**

**Services targeting the family:** When children have been sexually abused, it will sometimes be necessary to counsel the family too in order to ensure that the child is believed, supported and assisted in returning to a normal life. Family members may also need help: parents may feel guilty that they have failed to protect their child. Extreme caution must be taken when the perceived loss of honour of the child might result in the family’s rejection of the child. In some cultures, judicial or common law responses may require that the family force the girl to marry the perpetrator. In these cases, actions to prevent further physical and psycho-social damage to the victim/survivor should be undertaken immediately. Relocation of the victim/survivor should be considered, if necessary.

**Services targeting the community:** Extreme care must be taken not to stigmatise the child victim/survivor. To the extent possible, the existing community support structures and child welfare systems should provide support and protection.

Some forms of harmful traditional practices, such as early and forced marriage and female genital mutilation, happen very early in a girl’s life. It is important to help develop an understanding, both among families and within the community, on the harmful consequences of these practices, both for the individual child and for the community, as a whole.

**See also:**

- Clinical Management of Survivors of Rape (WHO/UNHCR 2002)
- Resettlement Handbook (UNHCR 2002)
- Inter-Agency Field Manual on Reproductive Health in Refugee Situations (Inter-Agency 1999)
- Working with Unaccompanied Children: A Community-Based Approach (UNHCR 1996)
Key Points to Remember

All interventions to prevent and respond to sexual and gender-based violence against children must be guided by the following four principles:

- The right to life, survival and development.
- Non-discrimination.
- The best interests of the child.
- Participation.

Be aware that the following groups of children are at particular risk of sexual and gender-based violence:

- Unaccompanied and separated children.
- Children in detention.
- Child soldiers.
- Adolescents.
- Mentally and physically disabled children.
- Working children.
- Girl mothers.
- Children born to rape victims/survivors.
- Boys as victims/survivors.
- Child perpetrators.

Specific forms of sexual and gender-based violence used against children include:

- Harmful traditional practices.
- Trafficking.
- Child prostitution.
- Sexual violence in the family.
- Sexual exploitation, abuse and violence by persons having unhindered access to children.

When developing activities to prevent sexual and gender-based violence against children:

- Develop information, education, communication campaigns.
- Engage children and youth.
Ensure access to education.
Assess persons with access to children.
Establish monitoring mechanisms.
Register each child.
Ensure access to services.
Trace families.
Include children when planning, designing and implementing activities.

When responding to sexual and gender-based violence against children:
Establish child-friendly referral, reporting, monitoring and evaluation mechanisms.
Create a safe environment in which to interview and examine the child.
Prepare the child well for the medical examination.
Ensure that those who interview, examine and counsel the child are professionals trained in working with children.
Involving the family and the community
Mobilise services targeting the family.
Support existing community structures to protect the child.
CHAPTER 6
FRAMEWORK FOR ACTION

The programmes to prevent and respond to sexual and gender-based violence that are most successful are those that have been designed through consultations with the refugee community, and that are based on multi-sectoral and inter-agency collaboration. To design effective programmes, the team needs to develop a common action plan. The components of such an action plan are detailed below.

Developing an Action Plan

Successful programmes are those that have been designed through consultations with the refugee community, especially with women and adolescents, and those that are based on multi-sectoral and inter-agency collaboration within the given setting. Some of the steps required for developing an action plan should be undertaken simultaneously; some may be taken after monitoring and evaluating existing strategies to prevent and respond to sexual and gender-based violence.

### Develop an Action Plan

- Identify and engage actors.
- Develop a common understanding of sexual and gender-based violence and agree on the scope of action.
- Conduct a situation analysis: gather information to gain an understanding of needs, problems, services available, and refugee community strengths and weaknesses.
- Agree on a set of guiding principles.
- Define the roles and responsibilities of all actors.
- Develop goals and objectives; define activities, objectives, outputs and indicators; identify resources needed.
- Agree on monitoring and evaluation systems, including mechanisms for reporting, referrals and co-ordination.
- Design a plan for maintaining the well-being of staff and volunteers.

### Identify and Engage Actors

Begin the process by identifying the relevant actors and inviting them to a discussion meeting or a series of meetings. Depending on the number of people, languages, and culture of participation, you may choose to have a series of meetings or discussions with focus groups organised along same sex, age group and ethnic group lines, rather than just one meeting. These discussions should invite participation; therefore a moderate size group of between 15 and 20 persons is preferable to a larger gathering. Over the course of the process, the
participation of women, men, youth, leaders and members of special interest groups within the community is likely to yield the best results.

Key actors will likely include representatives from at least the following:

- Refugee leaders, both male and female.
- Refugee women’s and youth groups.
- Refugee groups and individuals who are influential in the community (e.g. members of religious or traditional organisations, educators or other professionals).
- Representatives from the host communities.
- Host government authorities from: refugee liaison/oversight, police and security forces, court and criminal justice system, ministries of health, social services, women, family, and child welfare.
- Health care providers.
- Community services agencies.
- Counselling groups, crisis centre personnel.
- National and international partner NGOs, including camp management personnel.
- National lawyers knowledgeable about laws related to sexual and gender-based violence in the country.
- UNHCR head of office and field staff, protection, community services, security, and programme officers/assistants.
- UN agencies.

It would be helpful if participants at the meetings have copies of these Guidelines to read and study in advance. If this is not possible, consider conducting a session - prior to the meeting - for those unable to read and study the Guidelines in advance. That way, all participants arrive at the meeting equally prepared.

During the first meeting with actors you can include:

- A half-day training and awareness raising workshop about human rights, gender, sexual and gender-based violence, and protection issues.
- Presentations about specific aspects of sexual and gender-based violence made by key individuals. These will serve both to inform and to foster collaboration and co-ordination. Examples:
  - chief of police describes police procedures for responding to reports of rape, domestic violence, and other forms of sexual and gender-based violence;
  - health centre representative outlines health care responses available, protocols in use, and/or needs for health facility procedures and staff training;
• protection officer gives information on relevant international human rights standards and data from any incident reports received in the previous year/month/quarter;

• national lawyer briefs the group on relevant national laws and procedures;

• refugee representative describes community perspectives on sexual and gender-based violence and how incidents might have been handled in the refugees’ country of origin.

Discussion of these Guidelines, particularly the Situation Analysis (see below) section, and how it can be used.

Deciding on a “lead agency” for sexual and gender-based violence (the lead agency is also described below under Co-ordination). This organisation will be responsible for convening meetings, distributing reports, and following up on inter-agency and multi-sectoral action plans.

Discussion about and agreement on a collaborative plan for gathering information, analysing the situation and meeting again to discuss findings and begin planning strategies for prevention and response.

Develop a Common Understanding of Sexual and Gender-Based Violence and Agree on the Scope of Action

It is important for all actors to reach a common understanding of sexual and gender-based violence concepts and terminology and to agree on standard reporting mechanisms. This will help in the development of a coherent approach, in information sharing and in joint monitoring and evaluation among actors.

Clear and consistent terminology will help you to collect data properly, analyse the situation, monitor trends, compare data over time and ensure effective follow-up. The use of consistent terminology around the world can allow for comparisons to be made among different refugee settings and can provide valuable data for programme planning and development that have previously been unavailable.

Conduct a Situation Analysis

A situation analysis is the basis for defining problems, needs, and availability of resources and for specifying goals, objectives, activities and intended outcomes. Since no one organisation is solely responsible for sexual and gender-based violence programmes, multiple organisations and individuals should be involved in developing the situation analysis. Engaging all actors will also help build community-based support and interest in the programme from the earliest stages.
Information gathering involves reviewing available records, talking with people, asking questions, and listening. It is important to learn about problems and unmet needs as well as community strengths, special characteristics, and other issues such as cultural, institutional and personal barriers to assistance that are specific to your setting. Understanding the dynamics of the community will allow you to plan appropriately.

Effective programmes to prevent and respond to sexual and gender-based violence are based on a detailed analysis of the power relations between men and women, women and women, men and men, and adult and child to ensure that interventions will achieve the desired result and that inequalities are not perpetuated or exacerbated.

Depending on available resources and expertise, methods for gathering information could include:

- Individual interviews.
- Site visits and tours.
- Discussion meetings.
- Focus groups.
- Surveys.
- Reviewing and compiling available records and data.
Information should be gathered from an array of knowledgeable sources, including:

| Refugee community | Individual women, men, adolescents  
Groups and organisations of women, men, adolescent boys and girls  
Religious leaders and groups  
Elders and community leaders  
Camp leadership committees, section leaders and committees  
Schools  
Groups of businessmen and women, petty traders  
Security workers  
Traditional health practitioners |
|-------------------|------------------------------------------------------------------------------------------------|
| Humanitarian aid agencies | Health personnel, including health centre and community health services personnel  
Water/sanitation personnel  
Construction and housing personnel  
Food and non-food distribution personnel  
Community services personnel  
Education personnel  
Camp management personnel  
Training and income generation personnel |
| UNHCR and other UN agencies | Heads of offices  
Programme officers and assistants  
Protection officers and assistants  
Community services officers and assistants  
Field officers and assistants  
Gender, women and child officers and assistants  
Security and field staff safety officers and assistants  
National staff in all sectors |
| Host government institutions | Police officers  
Justice system personnel  
Health, social welfare, women, family and children ministries staff |
| National NGOs and individual practitioners | Rape crisis and/or sexual and gender-based violence service and advocacy groups  
Female lawyers groups  
Human rights advocacy groups  
Lawyers |
Agree on a Set of Guiding Principles

Refer to Chapter 2 for more details on guiding principles. It is important for the team to discuss openly the principles that should guide their work. All actors must agree on these principles and understand how they influence their work.

Guiding Principles for All Actors

Programme

- Engage the refugee community fully.
- Ensure equal participation by women and men, girls and boys in planning, implementing, monitoring and evaluating programmes.
- Ensure co-ordinated, multi-sectoral action by all actors.
- Strive to integrate and mainstream actions in UNHCR programming at all levels.
- Ensure accountability at all levels.

Individual

- Ensure the physical safety of the victim(s)/survivor(s).
- Guarantee confidentiality.
- Respect the wishes, the rights, and the dignity of the victim(s)/survivor(s), and consider the best interests of the child, when making any decision on the most appropriate course of action to prevent or respond to an incident of sexual and gender-based violence.
- Ensure non-discrimination.

Define the Roles and Responsibilities for all Actors

Since there are a variety of actors representing different agencies and sectors in every setting, it is important that the roles and responsibilities of each are clear. In some cases, a particular task or function may be undertaken by more than one person. However, the team should clearly identify the person who is ultimately responsible for carrying out the task, reporting on it and being held accountable if the task is not completed.

In refugee situations, UNHCR should take the lead in co-ordinating the multi-sectoral approach involving all relevant actors.

Agree on Monitoring and Evaluation Systems, Including Co-ordinated Reporting and Referral Mechanisms

Mechanisms should be developed to monitor and evaluate prevention and response interventions. These should be co-ordinated by all actors and with the involvement of the community, especially refugee women, men and youth. Ongoing monitoring ensures that prevention and response interventions are developing as planned. Evaluations help to identify the protection impact of prevention and response strategies on refugee women, men, boys and girls. See Chapter 7 for more details on developing monitoring and evaluation mechanisms. It is important for all actors to agree on the purpose of monitoring and evaluation mechanisms and to identify the objectives, outputs and indicators for each intervention. The plan of action should also indicate the financial and human resources needed for monitoring and evaluating interventions.
Create Mechanisms for Reporting, Referrals and Co-ordination

It is crucial for actors to co-ordinate reporting and referral systems. Common referral systems must be developed for health care, counselling, security and legal needs. An effective reporting system should be developed as part of a monitoring mechanism. This includes developing a common sexual and gender-based violence Incident Report form and a mechanism for sharing information about incidents of sexual and gender-based violence. This information sharing strategy should identify how problems concerning prevention and response activities will be discussed and resolved among actors.

A common reporting system will help create or enhance reliable statistical records that allow actors, including host country authorities, to measure the scope of the problem, any changes in the environment that may affect the incidence of sexual and gender-based violence, and the protection impact of interventions. A common report form will facilitate referrals and co-ordination and, most important, will ensure that the victim/survivor is not interviewed repeatedly. See Chapter 4 for a sample reporting/referral system and Chapter 7 for guidance on how to develop a common reporting system.

Maintain confidentiality at all stages of information sharing and analysis.

Co-ordination involves, amongst other activities:

Establishing and continually reviewing methods for reporting and referrals among and between different actors. Referral networks should focus on providing prompt and appropriate services to victims/survivors.

Sharing written information among actors while respecting the principle of confidentiality.

Convening regular meetings of key actors:

- Monthly camp-level meetings to discuss camp-specific information, data, and activities.
- Monthly regional (e.g. field office, sub office, district level) meetings to discuss and review information, data, and activities occurring in the region.
- Quarterly country-level meetings to discuss and review information, data, and activities countrywide.

Participants at co-ordination meetings should:

- Share information within and between sectors, organisations and the refugee community.
- Identify gaps in services and strategies for improving and strengthening current activities; oversee the implementation of the strategies identified.
- Seek guidance and assistance from colleagues; offer constructive feedback, problem solving ideas, and debriefings after particularly complex or difficult cases.
Agree to the roles and responsibilities of all those involved with the planning, implementation and monitoring of prevention and response activities.

Plan and schedule staff training, community education and awareness raising activities.

Build shared ownership of sexual and gender-based violence programmes and effective partnerships among all actors involved.

Draw up common training plans.

The designated “lead agency” is responsible for encouraging participation and co-ordination and for convening meetings.

Maintain the Well-being of Staff and Volunteers

Staff and volunteers working in sexual and gender-based violence programmes, particularly those working as counsellors and advocates for victims/survivors, must be aware of two risks to their own well-being: a lack of security and the potentially harmful effects of “secondary trauma” and burnout.

Safety and Security

Anyone receiving a report of sexual and gender-based violence and attempting to assist the victim/survivor is at risk of retaliation by the perpetrator and, sometimes, by the community. Sexual and gender-based violence is potentially deadly for the victim/survivor; anyone perceived as helping the victim/survivor may also become a target.

Experience around the world has shown that some perpetrators do assault and inflict harm on those who assist victims/survivors. This is especially true in cases of domestic violence, when a counsellor or other staff/volunteer advocates with the police on behalf of the victim/survivor. In most of these cases, the perpetrator has been the husband or intimate partner of the victim/survivor. In many countries, armed police have been injured or killed when responding to reports of domestic violence.

Managers and supervisors must monitor staff security and take prompt action to protect staff in the event of threats or acts of violence. Any such incidents or threats to refugee staff should be reported to UNHCR protection officers immediately and appropriate protective measures taken. Organisations must establish policies and practices aimed at reducing staff/volunteer risk and maximising safety and security.

Establish a policy that only national or international staff (who do not live in the camp), not refugee staff, should advocate with police and security forces on behalf of individual victims/survivors. This may not be feasible in emergencies, however.

Engage refugee leaders and influential community members in your activities. If the community is integrally involved in the programme, they will understand the services, concerns and risks and will be better able to help create preventive and protection strategies.
Engage law enforcement and judicial bodies in designing and implementing the safety and security plan.

**Secondary Trauma and Burnout**

Secondary trauma refers to the emotional stress experienced by those who are repeatedly exposed to descriptions of severe psychological and physical abuse. Burnout is emotional exhaustion. Both secondary trauma and burnout are common among workers in sexual and gender-based violence programmes.

Symptoms of secondary trauma and burnout include:

- Sleeping or appetite problems.
- Unaccountable physical ailments and health problems.
- Highly charged emotional responses to situations or frustrations, or unemotional and flat responses to situations or frustrations.
- Job performance problems.
- Withdrawal from fellow workers, family, friends, community activities.
- Comments and behaviour indicating that she/he feels indispensable and irreplaceable in the work with victims/survivors; over-identification with victims/survivors, sometimes called a “hero complex”.
- Placing her/himself at physical risk to help a victim/survivor, rather than ask for assistance and support.

Prevention is the best way to address staff burnout. Strategies that should be employed in all programmes include:

- Discussions and debriefings after particularly serious or disturbing cases.
- Opportunities to relieve stress, such as physical exercise, team building activities, informal sharing about the joys and frustrations of the work.
- Training workshops to improve skills, build confidence and encourage professional boundaries.
- Regularly scheduled supervision to monitor the worker’s performance, provide support, and assess her/his emotional state.
- Taking a vacation/break from work.
- Peer stress counselling.
Key Points to Remember

To develop an action plan:

- Identify and engage actors.
- Develop a common understanding of sexual and gender-based violence and agree on the scope of action.
- Conduct a situation analysis: gather information to gain an understanding of needs, problems, services available, and refugee community strengths and weaknesses.
- Agree on a set of guiding principles.
- Define roles and responsibilities of all actors.
- Develop goals and objectives; define activities and indicators; identify resources needed.
- Agree on monitoring and evaluation systems that involve the community.
- Build mechanisms for reporting, referrals and co-ordination.
- Design a plan for maintaining the well-being of staff and volunteers.
CHAPTER 7
MONITORING AND EVALUATION

Monitoring and evaluation mechanisms are essential for developing effective programmes to prevent and respond to sexual and gender-based violence. They enhance accountability, one of the Guiding Principles described in Chapter 2, and are part of the Framework for Action described in Chapter 6. These mechanisms are most effective when developed by all sectors, including the refugee community, working together.

Members of the multi-sectoral team should take the following six actions when developing a monitoring or evaluation system:
- determine the purposes of the monitoring and evaluation mechanisms and assess information needs;
- ensure prevention and response interventions have clearly defined objectives, outputs and indicators;
- establish co-ordinated and common reporting tools;
- determine methods for obtaining information on indicators;
- assign responsibilities for information gathering, determine time frame and frequency of data collection, and allocate resources;
- establish mechanisms for sharing information and incorporating results into prevention and response planning.

Defining Monitoring and Evaluation

Monitoring and evaluation are two distinct, but interrelated, activities.

**Monitoring** is the ongoing review, conducted by the multi-sectoral team, of prevention and response interventions to determine whether they are developing according to plan and budgetary requirements and whether any adjustments may be needed so they achieve their intended goals. Effective monitoring includes a co-ordinated reporting system.

**Evaluation** is an analysis of the relevance, effectiveness and efficiency of the multi-sectoral team’s prevention and response strategies. Evaluation systematically assesses the protection impact of the policies, programmes, practices, partnerships and procedures on refugee women, men, boys and girls. Evaluation criteria can include the sustainability of prevention and response activities, co-ordination and consistency, and the effectiveness of monitoring and reporting systems.
Purposes of Monitoring and Evaluation Mechanisms

**Comprehensive monitoring and evaluation mechanisms:**

- Help actors to determine the protection impact of prevention and response activities.
- Assess the quality of prevention and response interventions and whether they are achieving their objectives.
- Can highlight changes in the environment that affect rates of sexual and gender-based violence.
- Identify good practices, derive lessons from operational experience and can help improve performance.
- Can encourage team building, foster transparency and enhance accountability to refugee women, men and youth and to donors.

**Effective monitoring answers these questions:**

- Are we achieving what we intend? How? Why or why not?
- What are the obstacles to implementation?
- Are we co-ordinating effectively?
- What are the implementation gaps? How are we going to address them?

**Effective evaluation answers these questions:**

- What did we do?
- What did we achieve?
- Did we achieve what we intended?
- What have we learned?
- Are we fully addressing the causes of sexual and gender-based violence? If not, what are the gaps?
- Are we fully addressing the consequences of sexual and gender-based violence? If not, what are the gaps?
- What else is needed?
Types of Monitoring and Evaluation Mechanisms

Monitoring and evaluations can vary in scope, depth and focus. They can be directed at policy, a function, a programme, at practices (such as reporting, referral, planning or budget practices) or at a specific intervention.

Monitoring and evaluation mechanisms apply to all levels of prevention and response interventions, including those aimed at the individual, community or social/legal/political structures. Monitoring and evaluation can also be applied to sectors, i.e. to the sum of prevention and response activities mechanisms in the areas of health, psycho-social, safety/security and legal/justice.

Monitoring and evaluations can be conducted at any stage of an operation. Monitoring is most effective when done on an ongoing basis; programme evaluations are best conducted annually. Evaluations conducted at an early stage of an operation can provide information for a situation analysis. Monitoring done throughout an operation can enable managers to ensure that agreed actions are proceeding as intended. Evaluations conducted at the end of an operation help to assess what was accomplished and to identify good practices.

See also:
- Real-time Humanitarian Evaluations: Some FAQs (UNHCR 2002)

Designing Monitoring and Evaluation Systems for Programmes Targeting Sexual and Gender-Based Violence

As the Guiding Principles described in Chapter 2 suggest, it is important to encourage wide participation in designing monitoring and evaluation systems. A multi-sectoral approach, including participation by the refugee community, enhances learning, builds ownership and promotes transparency among the actors involved. This is especially important when discussing the purpose of monitoring and evaluation and how the information will be used, analysed and affect ongoing planning.

Actors must recognise that some groups face obstacles to participating in this process. Refugee women and children, for example, often lack the authority to share their opinions in these kinds of settings. Special arrangements may be needed to ensure that refugee youth, and especially groups at risk (see Chapter 5), are involved in designing these systems. The situation analysis recommended in Chapter 2 will highlight some of these issues. Once all actors are alerted to these potential obstacles, they can work to overcome them.
There are six actions that should guide the development of a monitoring or evaluation system:

1. Determine the purposes of the monitoring and evaluation mechanisms and assess information needs.
2. Ensure prevention and response interventions have clearly defined objectives, outputs and indicators.
3. Establish co-ordinated and common reporting tools.
4. Determine methods for obtaining information on indicators.
5. Assign responsibilities for information gathering, determine time frame and frequency of data collection and allocate resources.
6. Establish mechanisms for sharing information and incorporating results into prevention and response planning.

See also:
- Planning and Organising Useful Evaluations (UNHCR 1998)

ACTION 1:
Determine the Purposes of the Monitoring and Evaluation Mechanisms and Assess Information Needs

The multi-sectoral team should discuss and agree on the purposes of a monitoring and evaluation system. This will determine what reporting systems are needed, how often these mechanisms are used, and how they will influence ongoing prevention and response planning.

To assist in developing a consensus on the purposes of a monitoring and evaluations mechanisms, it may be useful to determine the information needs of each actor/sector. This information needs assessment can be developed in the form of a matrix and can be organised according to sector or according to the actors involved.
### Example:

<table>
<thead>
<tr>
<th>Multi-sectoral team actors</th>
<th>• Information needs</th>
</tr>
</thead>
</table>
| Beneficiary group/target population | • Impact on well being  
• Problems in accessing services  
• Ability to participate and affect decision-making |
| Field staff | • Results of activities  
• Problems affecting activities/group performance  
• Progress according to work plan  
• Assessed risk factors for sexual and gender-based violence |
| Co-ordinators/supervisors | • What are the results?  
• What are the problems encountered by field staff?  
• What is the progress according to work plan?  
• Performance of field staff |
| Project management | • Effectiveness and efficiency of strategies  
• Have expected results been achieved?  
• Positive and negative effects on men and women  
• Implementation progress  
• External factors influencing performance  
• Internal weaknesses affecting results  
• Efficient and effective use of resources |
| Funding agencies/partner organisations | • Extent to which the objectives/goals have been reached  
• Project strategies  
• External factors influencing project performance  
• Sustainability of project results at target group and institutional level |

### ACTION 2:
Ensure Prevention and Response Interventions have Clearly Defined Objectives, Outputs and Indicators

Each intervention should have clear objectives which should be operationalised in outputs, impact and performance indicators. These objectives, outputs and indicators provide a systematic way of describing the protection impact of sexual and gender-based violence prevention and response interventions. Indicators also suggest what data should be collected and what reporting mechanisms are needed.

**To establish objectives:**

Objectives should refer to the desired result and protection impact of each programme intervention that contributes to the achievement of the programme goal.
**Example:** A situation analysis determines that food items are not being distributed equitably. Some groups are not receiving adequate resources and this has increased the risk of sexual and gender-based violence and sexual exploitation.

The objective would be to review current food distribution processes with the aim of reducing the risk of sexual and gender-based violence and ensuring greater gender equality.

**Note:** Objectives should be described in terms of the positive changes that will occur in the condition of the refugee population. They can aim for improved co-ordination, improved mechanisms for response, increased awareness of the community or better partnerships for gender equality with men.

**To establish outputs:**

Outputs are specific and concrete achievements. To help identify desired outputs, describe what needs to be done to achieve the objectives.

**Example:** If the objective is to increase women’s representation on food distribution committees, one output might be to review and change the terms of reference of food distribution committees to ensure women’s representation.

**To establish performance and impact indicators:**

Indicators are measurement tools that help to define what will be evaluated or monitored and record the achievement of intended results. Both **qualitative** and **quantitative** indicators are needed for assessing the protection impact of prevention and response interventions. Quantitative indicators are those that can be easily monitored over time and through reporting forms. Qualitative indicators help to highlight good practices, outline the difficulties encountered and identify gaps in prevention and response measures.

UNHCR works with two types of indicators: impact and performance indicators.

**Impact indicators** are used to help measure change in welfare and behaviour as well as changes in systems and institutions. Impact indicators tend to be more qualitative, measuring the intended changes to people’s judgments and perceptions about a subject. Impact indicators relate to objectives.

**Example:** If the objective is to increase women’s participation on food distribution committees, an impact indicator might be that women on the food distribution committees perceive they are making meaningful contributions to the decision-making process.

**Performance indicators** tend to be more quantitative. Performance indicators relate to outputs.

**Example:** If the output is to review and change the terms of reference of food distribution committees to ensure women’s participation, the performance indicator might be that women’s participation on the food distribution committees increases from 30 to 50 per cent.
All indicators should be disaggregated by sex and age. Wherever possible, indicators should specify other aspects of the target population, including ethnic group, location (urban or rural areas, camps), or by risk groups.

See also:
- Project Planning in UNHCR: A Practical Guide on the use of Objectives, Outputs and Indicators (UNHCR 2002)

ACTION 3:
Establish Co-ordinated and Common Reporting Tools

Reporting tools provide systematic and consistent ways of gathering information on the above indicators. It is important to develop reporting tools common to all organisations within sectors (e.g. all health providers should collect the same set of minimum information).

The multi-sectoral team should begin by identifying all current reporting, record keeping systems, data summary sheets, and monitoring and evaluation systems used by the different actors and in each sector.

In considering existing reporting tools, such as the monthly health NGO/community services/ UNHCR protection reports, sitreps, annual protection reports, and country operations plans, the team should assess the initial reporting situation and what changes are needed to include information on sexual and gender-based violence prevention and response activities. It is important that these various reports describe the progress made, the challenges and problems that remain and the monitoring and evaluation mechanisms in place.

All reporting tools discussing the protection impact of prevention and response mechanisms should be gender- and age-sensitive. This means identifying the different impacts of interventions on refugee women, girls, men and boys.

Sample Reporting Tools

The Incident Report Form and the Monthly Sexual and Gender-Based Violence Report Form

The Incident Report Form is an important reporting tool that should be used by all actors. When any incident of sexual and gender-based violence is reported to any actor, there should be a standard format used to record such incidents. Another reporting tool is the Monthly Sexual and Gender-Based Violence Report Form. This reporting mechanism is important for tracking the changes in the environment that affect the incidence of sexual and gender-based violence. This report also provides insights into the factors that may perpetuate these acts of violence at the community level. For the monthly report form, keep in mind that data must be compiled for each individual camp/setting; totals provided for the field office, regionally or countrywide are also useful. For sample forms, see Appendices 2 and 3.
### Data Elements of Sexual and Gender-Based Violence Reports

It is essential that certain information be collected in reports. To be effective, all actors must agree on the terminology used so that reporting forms are comparable. All reporting mechanisms must ensure the confidentiality of the victim/survivor and perpetrator.

**Data Elements for Monthly Report Forms:**

- Total number of incident reports.
- Types of sexual and gender-based violence perpetrated.
- Number, age and sex of victims/survivors.
- Number, age and sex of perpetrators.
- Number of incidents by location (e.g. house, market, outside camp [indicating where outside the camp]).
- Number of rape victims/survivors receiving health care within two days of incident.

**Data Elements for Legal Form:**

- Number of cases reported to the protection officer.
- Number of cases reported to the police.
- Number of cases taken to trial.
- Number of cases dismissed.
- Number of acquittals/convictions.
- Types of sexual and gender-based violence perpetrated.
- Number of rape cases seen within two days by health services.
- Number of cases in which forensic medical evidence was prepared.
- Percentage increase/decrease of number of rape cases by month.
- Percentage increase/decrease of sexual and gender-based violence incidents by month.
- Additional observations.

**Data Elements for Situation Reports:**

- Sexual and gender-based violence concerns, issues, and incidents.
- Status of co-ordination and planning.
- Prevention interventions by sector.
- Response interventions by sector.
- Staff/beneficiary capacity training.
- Protection impact: monitoring and evaluation activities.

See Appendix 4 for a sample Medical History and Examination form.
The Sexual and Gender-Based Report Rate

The sexual and gender-based violence report rate is the number of all sexual and gender-based violence incident reports received in any given period as compared to the total population. To calculate the report rate per 10,000 persons for the month, year or other designated time period:

\[
\frac{\text{Number of incidents reported during designated time period}}{\text{Total population during designated time period}} \times 10,000 = \text{Incident reports per 10,000 persons during the time period}
\]

Comparing the report rate over a period of time allows the team to identify trends. In most settings, it is expected that the report rate will increase over time. Increases in report rates can be indications that victims/survivors are aware of assistance available and that they trust the services and are therefore willing to make reports. It is important to remember that incidents of sexual and gender-based violence go largely unreported. For that reason, increases in the numbers/rates of reports could be a sign of programme success.

**ACTION 4:**
Determine Methods for Obtaining Information on Indicators

After establishing the report mechanisms, you can begin to identify what methods will be used to obtain information on the indicators not captured by the report forms. When determining these methods, it is important to consider whether the indicator is qualitative or quantitative.

**Quantitative data** can be obtained through surveys and government/implementing partners’ records. Information might also be found through statistical figures on the targeted population. It is important to assess what sources of information are available to the multi-sectoral team from the different actors.

**Qualitative data** can be obtained through interviews, focus groups and by using participatory methods during field assessments.

The views of refugee women, boys and girls should be surveyed through the monitoring and evaluation mechanisms. This qualitative information is important for identifying protection gaps and strengthening prevention and response mechanisms.

**ACTION 5:**
Assign Responsibilities for Information Gathering, Determine Time Frame and Frequency of Data Collection, and Allocate Resources

**Assign responsibilities:**

It is important to assign responsibilities for the different parts of the monitoring and evaluation systems.
Time frames:

A time frame for all reporting tools should be established. Time frames should also be developed for all other monitoring and evaluation mechanisms. The team should choose time frames that are appropriate to the intervention or programme. Monitoring could be done monthly, using the Sexual and Gender-Based Violence Monthly Report Form; more comprehensive reports could be done annually.

Determine resources and budget:

Operation plans and budgets may not allocate sufficient resources for developing and implementing monitoring and evaluation mechanisms. Thus, it is important to determine how much staffing time is required to keep the reporting up to date and to conduct the analysis required. Also consider staff capacities in these areas and whether additional training is needed to develop skills for monitoring and evaluation (e.g. skills in data collection and analysis, field-level implementation of monitoring and evaluation processes and conducting participatory evaluations).

For participatory community-based evaluations, it may be necessary to hire additional staff with the relevant expertise and to consider requirements for ensuring community access to evaluation sessions. These requirements could include interpreters, transportation and childcare. Guidance on community-based evaluations can be obtained from UNHCR’s Evaluation and Policy Unit.

ACTION 6: Establish Mechanisms for Sharing Information and Incorporating Results into Prevention and Response Planning

One of the purposes of the monitoring and evaluation mechanisms is to improve performance. To achieve this objective, a consensus should be reached on how information will be shared among and between actors. It is also important to decide which actors are responsible for follow-up and how the results of any monitoring or evaluation mechanism will affect programme planning.

Information sharing strategies include:

- Regular (monthly or bi-monthly) camp/community-level meetings to discuss results of monitoring/evaluation/reporting, assess protection impact, review incident report data, analyse data collection results and survey results from the community, co-ordinate activities, plan next monitoring session, identify obstacles and solutions.

- Monthly field office/sub office/district-level meetings to discuss monthly sexual and gender-based violence report, protection impact of interventions, data collected during interventions, review progress towards indicators as provided by camp/community-level monitoring, and progress towards achieving objectives.

- Regular (perhaps quarterly) country-level meeting to review reports from camp/community-level meetings, field office meetings, data collected on interventions, consider evaluations, and discuss funding issues affecting implementation.
Each meeting will be summarised in a brief written report highlighting the major issues identified, the actions taken and the responsibilities assigned.

Key Points to Remember

**Comprehensive monitoring and evaluation mechanisms:**

- Enhance accountability, one of the guiding principles of interventions to prevent and respond to sexual and gender-based violence.
- Are part of the Framework for Action.
- Are most effective when developed by all sectors, including the refugee community, working together.

**Members of the multi-sectoral team should be guided by six actions when developing monitoring and evaluation systems:**

- Determine the purposes of the monitoring and evaluation mechanisms and assess information needs.
- Ensure prevention and response interventions have clearly defined objectives, outputs and indicators.
- Establish co-ordinated and common reporting tools.
- Determine methods for obtaining information on indicators.
- Assign responsibilities for information gathering, determine time frame and frequency of data collection and allocate resources.
- Establish mechanisms for sharing information and incorporating results into prevention and response planning.
CHAPTER 8
GENDER-RELATED PERSECUTION:
Addressing Sexual and Gender-Based Violence in Refugee Status Determination

This Chapter provides guidance on how gender-related refugee claims should be adjudicated during refugee status determination. It transcribes the UNHCR Guidelines on Gender-Related Persecution issued in 2002, providing practical advice on how the 1951 Refugee Convention caters to all persons fleeing persecution, without any distinction premised on their socially defined gender roles.

UNHCR and States should ensure that government authorities, legal counsellors and protection officers who are involved in refugee status determination under the 1951 Convention relating to the Status of Refugees or under the 1950 Statute establishing the Office of the United Nations High Commissioner for Refugees are familiarised with the Guidelines on Gender-Related Persecution contained in this Chapter.

Strongly condemns persecution through sexual violence, which not only constitutes a gross violation of human rights, as well as, when committed in the context of armed conflict, a grave breach of humanitarian law, but is also a particularly serious offence to human dignity.

Supports the recognition as refugees of persons whose claim to refugee status is based upon a well-founded fear of persecution, through sexual violence, for reasons of race, religion, nationality, membership of a particular social group or political opinion.

Recommends that in procedures for the determination of refugee status, asylum-seekers who may have suffered sexual violence be treated with particular sensitivity.

Extracts from ExCom Conclusion No. 73 (XLIV) (1993)

Sexual and gender-based violence may bear on the refugee status determination process both for the applicant who is a victim or survivor, and for the applicant or refugee status holder who is a perpetrator. These guidelines focus on the interpretation of the refugee definition from a gender perspective, suggesting some procedural practices to ensure that due consideration is given to women claimants in refugee status determination procedures. They also provide relevant information to ensure that the interviewer or decision-maker has the knowledge to understand and recognise gender-related claims for asylum.

When rape or other forms of sexual violence are committed for reasons of race, religion, nationality, political opinion or membership of a particular social group, it may be considered persecution under the definition of the term refugee in the 1951 Convention relating to Status of Refugees and the Statute of the Office of UNHCR. Particular sensitivity is required in cases where the asylum-seeker may have suffered sexual and gender-based violence. Protection officers,


These Guidelines are intended to provide legal interpretative guidance for governments, legal practitioners, decision-makers and the judiciary, as well as UNHCR staff carrying out refugee status determination in the field.

Gender-Related Persecution within the Context of Article 1A(2) of the 1951 Convention and/or its 1967 Protocol relating to the Status of Refugees

I. Introduction

1. “Gender-Related Persecution” is a term that has no legal meaning per se. Rather, it is used to encompass the range of different claims in which gender is a relevant consideration in the
determination of refugee status. These Guidelines specifically focus on the interpretation of the refugee definition contained in Article 1A(2) of the 1951 Convention relating to the Status of Refugees (hereinafter “1951 Convention”) from a gender perspective, as well as propose some procedural practices in order to ensure that proper consideration is given to women claimants in refugee status determination procedures and that the range of gender-related claims are recognised as such.

2. It is an established principle that the refugee definition as a whole should be interpreted with an awareness of possible gender dimensions in order to determine accurately claims to refugee status. This approach has been endorsed by the General Assembly, as well as the Executive Committee of UNHCR’s Programme.1

3. In order to understand the nature of gender-related persecution, it is essential to define and distinguish between the terms “gender” and “sex”. Gender refers to the relationship between women and men based on socially or culturally constructed and defined identities, status, roles and responsibilities that are assigned to one sex or another, while sex is a biological determination. Gender is not static or innate but acquires socially and culturally constructed meaning over time. Gender-related claims may be brought by either women or men, although due to particular types of persecution, they are more commonly brought by women. In some cases, the claimant’s sex may bear on the claim in significant ways to which the decision-maker will need to be attentive. In other cases, however, the refugee claim of a female asylum-seeker will have nothing to do with her sex. Gender-related claims have typically encompassed, although are by no means limited to, acts of sexual violence, family/domestic violence, coerced family planning, female genital mutilation, punishment for transgression of social mores, and discrimination against homosexuals.

4. Adopting a gender-sensitive interpretation of the 1951 Convention does not mean that all women are automatically entitled to refugee status. The refugee claimant must establish that he or she has a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion.

1 In its Conclusions of October 1999, No. 87 (n), the Executive Committee “not[ed] with appreciation special efforts by States to incorporate gender perspectives into asylum policies, regulations and practices; encourage[d] States, UNHCR and other concerned actors to promote wider acceptance, and inclusion in their protection criteria of the notion that persecution may be gender-related or effected through sexual violence; further encourage[d] UNHCR and other concerned actors to develop, promote and implement guidelines, codes of conduct and training programmes on gender-related refugee issues, in order to support the mainstreaming of a gender perspective and enhance accountability for the implementation of gender policies.” See also Executive Committee Conclusions: No.39, Refugee Women and International Protection, 1985; No.73, Refugee Protection and Sexual Violence, 1993; No.77(g), General Conclusion on International Protection, 1995; No.79(o), General Conclusion on International Protection, 1996; and No.81(t), General Conclusion on International Protection, 1997.
II. SUBSTANTIVE ANALYSIS

A. BACKGROUND

5. Historically, the refugee definition has been interpreted through a framework of male experiences, which has meant that many claims of women and of homosexuals, have gone unrecognised. In the past decade, however, the analysis and understanding of sex and gender in the refugee context have advanced substantially in case law, in State practice generally and in academic writing. These developments have run parallel to, and have been assisted by, developments in international human rights law and standards, as well as in related areas of international law, including through jurisprudence of the International Criminal Tribunals for the former Yugoslavia and Rwanda, and the Rome Statute of the International Criminal Court. In this regard, for instance, it should be noted that harmful practices in breach of international human rights law and standards cannot be justified on the basis of historical, traditional, religious or cultural grounds.

6. Even though gender is not specifically referenced in the refugee definition, it is widely accepted that it can influence, or dictate, the type of persecution or harm suffered and the reasons for this treatment. The refugee definition, properly interpreted, therefore covers gender-related claims. As such, there is no need to add an additional ground to the 1951 Convention definition.

7. In attempting to apply the criteria of the refugee definition in the course of refugee status determination procedures, it is important to approach the assessment holistically, and have regard to all the relevant circumstances of the case. It is essential to have both a full picture of the asylum-seeker’s personality, background and personal experiences, as well as an analysis and up-to-date knowledge of historically, geographically and culturally specific circumstances in the country of origin. Making generalisations about women or men is not helpful and in doing so, critical differences, which may be relevant to a particular case, can be overlooked.

8. The elements of the definition discussed below are those that require a gender-sensitive interpretation. Other criteria (e.g. being outside the country of origin) remain, of course, also directly relevant to the holistic assessment of any claim. Throughout this document, the use of the term “women” includes the girl-child.


B. WELL-FOUNDED FEAR OF PERSECUTION

9. What amounts to a well-founded fear of persecution will depend on the particular circumstances of each individual case. While female and male applicants may be subjected to the same forms of harm, they may also face forms of persecution specific to their sex. International human rights law and international criminal law clearly identify certain acts as violations of these laws, such as sexual violence, and support their characterisation as serious abuses, amounting to persecution. In this sense, international law can assist decision-makers to determine the persecutory nature of a particular act. There is no doubt that rape and other forms of gender-related violence, such as dowry-related violence, female genital mutilation, domestic violence, and trafficking, are acts which inflict severe pain and suffering – both mental and physical – and which have been used as forms of persecution, whether perpetrated by State or private actors.

10. Assessing a law to be persecutory in and of itself has proven to be material to determining some gender-related claims. This is especially so given the fact that relevant laws may emanate from traditional or cultural norms and practices not necessarily in conformity with international human rights standards. However, as in all cases, a claimant must still establish that he or she has a well-founded fear of being persecuted as a result of that law. This would not be the case, for instance, where a persecutory law continues to exist but is no longer enforced.

11. Even though a particular State may have prohibited a persecutory practice (e.g. female genital mutilation), the State may nevertheless continue to condone or tolerate the practice, or may not be able to stop the practice effectively. In such cases, the practice would still amount to persecution. The fact that a law has been enacted to prohibit or denounce certain persecutory practices will therefore not in itself be sufficient to determine that the individual’s claim to refugee status is not valid.

12. Where the penalty or punishment for non-compliance with, or breach of, a policy or law is disproportionately severe and has a gender dimension, it would amount to persecution. Even if the law is one of general applicability, circumstances of punishment or treatment cannot be so severe as to be disproportionate to the objective of the law. Severe punishment for women who, by breaching a law, transgress social mores in a society could, therefore, amount to persecution.

13. Even where laws or policies have justifiable objectives, methods of implementation that lead to consequences of a substantially prejudicial nature for the persons concerned, would amount to persecution. For example, it is widely accepted that family planning constitutes an appropriate response to population

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4 See UNHCR’s Handbook, paragraph 51.
5 See below at paragraph 18.
6 Persons fleeing from prosecution or punishment for a common law offence are not normally refugees, however, the distinction may be obscured, in particular, in circumstances of excessive punishment for breach of a legitimate law. See UNHCR’s Handbook, paragraphs 56 and 57.
pressures. However, implementation of such policies, through the use of forced abortions and sterilisations, would breach fundamental human rights law. Such practices, despite the fact that they may be implemented in the context of a legitimate law, are recognised as serious abuses and considered persecution.

**Discrimination Amounting to Persecution**

14. While it is generally agreed that ‘mere’ discrimination may not, in the normal course, amount to persecution in and of itself, a pattern of discrimination or less favourable treatment could, on cumulative grounds, amount to persecution and warrant international protection. It would, for instance, amount to persecution if measures of discrimination lead to consequences of a substantially prejudicial nature for the person concerned, e.g. serious restrictions on the right to earn one’s livelihood, the right to practice one’s religion, or access to available educational facilities.7

15. Significant to gender-related claims is also an analysis of forms of discrimination by the State in failing to extend protection to individuals against certain types of harm. If the State, as a matter of policy or practice, does not accord certain rights or protection from serious abuse, then the discrimination in extending protection, which results in serious harm inflicted with impunity, could amount to persecution. Particular cases of domestic violence, or of abuse for reasons of one’s differing sexual orientation, could, for example, be analysed in this context.

**Persecution on Account of One’s Sexual Orientation**

16. Refugee claims based on differing sexual orientation contain a gender element. A claimant’s sexuality or sexual practices may be relevant to a refugee claim where he or she has been subject to persecutory (including discriminatory) action on account of his or her sexuality or sexual practices. In many such cases, the claimant has refused to adhere to socially or culturally defined roles or expectations of behaviour attributed to his or her sex. The most common claims involve homosexuals, transsexuals or transvestites, who have faced extreme public hostility, violence, abuse, or severe or cumulative discrimination.

17. Where homosexuality is illegal in a particular society, the imposition of severe criminal penalties for homosexual conduct could amount to persecution, just as it would for refusing to wear the veil by women in some societies. Even where homosexual practices are not criminalised, a claimant could still establish a valid claim where the State condones or tolerates discriminatory practices or harm perpetrated against him or her, or where the State is unable to protect effectively the claimant against such harm.

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7 See UNHCR’s Handbook, paragraph 54.
Trafficking for the Purposes of Forced Prostitution or Sexual Exploitation as a Form of Persecution

18. Some trafficked women or minors may have valid claims to refugee status under the 1951 Convention. The forcible or deceptive recruitment of women or minors for the purposes of forced prostitution or sexual exploitation is a form of gender-related violence or abuse that can even lead to death. It can be considered a form of torture and cruel, inhuman or degrading treatment. It can also impose serious restrictions on a woman’s freedom of movement, caused by abduction, incarceration, and/or confiscation of passports or other identity documents. In addition, trafficked women and minors may face serious repercussions after their escape and/or upon return, such as reprisals or retaliation from trafficking rings or individuals, real possibilities of being re-trafficked, severe community or family ostracism, or severe discrimination. In individual cases, being trafficked for the purposes of forced prostitution or sexual exploitation could therefore be the basis for a refugee claim where the State has been unable or unwilling to provide protection against such harm or threats of harm.

Agents of Persecution

19. There is scope within the refugee definition to recognise both State and non-State actors of persecution. While persecution is most often perpetrated by the authorities of a country, serious discriminatory or other offensive acts committed by the local populace, or by individuals, can also be considered persecution if such acts are knowingly tolerated by the authorities, or if the authorities refuse, or are unable, to offer effective protection.

C. THE CAUSAL LINK (“for reasons of”)

20. The well-founded fear of being persecuted must be related to one or more of the Convention grounds. That is, it must be “for reasons of” race, religion, nationality, membership of a particular social group, or political opinion. The Convention ground must be a relevant contributing factor, though it need not be shown to be the sole, or dominant, cause. In many jurisdictions the causal link (“for reasons of”) must be explicitly established (e.g. some Common Law States) while in other States causation is not treated as a separate question for analysis, but is subsumed within the holistic analysis of the refugee definition. In many Gender-Related claims, the difficult issue for a decision-maker

8 For the purposes of these Guidelines, “trafficking” is defined as per article 3 of the United Nations Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children, supplementing the United Nations Convention against Transnational Organised Crime, 2000. Article 3(1) provides that trafficking in persons means “the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.”

9 Trafficking for other purposes could also amount to persecution in a particular case, depending on the circumstances.

10 See UNHCR’s Handbook, paragraph 65.
may not be deciding upon the applicable ground, so much as the causal link: that the well-founded fear of being persecuted was for reasons of that ground. Attribution of the Convention ground to the claimant by the State or non-State actor of persecution is sufficient to establish the required causal connection.

21. In cases where there is a risk of being persecuted at the hands of a non-State actor (e.g. husband, partner or other non-State actor) for reasons which are related to one of the Convention grounds, the causal link is established, whether or not the absence of State protection is Convention related. Alternatively, where the risk of being persecuted at the hands of a non-State actor is unrelated to a Convention ground, but the inability or unwillingness of the State to offer protection is for reasons of a Convention ground, the causal link is also established.11

D. CONVENTION GROUNDS

22. Ensuring that a gender-sensitive interpretation is given to each of the Convention grounds is important in determining whether a particular claimant has fulfilled the criteria of the refugee definition. In many cases, claimants may face persecution because of a Convention ground which is attributed or imputed to them. In many societies a woman’s political views, race, nationality, religion or social affiliations, for example, are often seen as aligned with relatives or associates or with those of her community.

23. It is also important to be aware that in many gender-related claims, the persecution feared could be for one, or more, of the Convention grounds. For example, a claim for refugee status based on transgression of social or religious norms may be analysed in terms of religion, political opinion or membership of a particular social group. The claimant is not required to identify accurately the reason why he or she has a well-founded fear of being persecuted.

Race

24. Race for the purposes of the refugee definition has been defined to include all kinds of ethnic groups that are referred to as “races” in common usage.12 Persecution for reasons of race may be expressed in different ways against men and women. For example, the persecutor may choose to destroy the ethnic identity and/or prosperity of a racial group by killing, maiming or incarcerating the men, while the women may be viewed as propagating the ethnic or racial identity and persecuted in a different way, such as through sexual violence or control of reproduction.

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11 See Summary Conclusions – Gender-Related Persecution, no.6.
12 See UNHCR’s Handbook, paragraph 68.
Religion

25. In certain States, the religion assigns particular roles or behavioural codes to women and men respectively. Where a woman does not fulfil her assigned role or refuses to abide by the codes, and is punished as a consequence, she may have a well-founded fear of being persecuted for reasons of religion. Failure to abide by such codes may be perceived as evidence that a woman holds unacceptable religious opinions regardless of what she actually believes. A woman may face harm for her particular religious beliefs or practices, or those attributed to her, including her refusal to hold particular beliefs, to practise a prescribed religion or to conform her behaviour in accordance with the teachings of a prescribed religion.

26. There is some overlap between the grounds of religion and political opinion in gender-related claims, especially in the realm of imputed political opinion. While religious tenets require certain kinds of behaviour from a woman, contrary behaviour may be perceived as evidence of an unacceptable political opinion. For example, in certain societies, the role ascribed to women may be attributable to the requirements of the State or official religion. The authorities or other actors of persecution may perceive the failure of a woman to conform to this role as the failure to practice or to hold certain religious beliefs. At the same time, the failure to conform could be interpreted as holding an unacceptable political opinion that threatens the basic structure from which certain political power flows. This is particularly true in societies where there is little separation between religious and State institutions, laws and doctrines.

Nationality

27. Nationality is not to be understood only as “citizenship”. It also refers to membership of an ethnic or linguistic group and may occasionally overlap with the term “race”. Although persecution on the grounds of nationality (as with race) is not specific to women or men, in many instances the nature of the persecution takes a gender-specific form, most commonly that of sexual violence directed against women and girls.

Membership of a Particular Social Group

28. Gender-related claims have often been analysed within the parameters of this ground, making a proper understanding of this term of paramount importance. However, in some cases, the emphasis given to the social group ground has meant that other applicable grounds, such as religion or political opinion, have been over-looked. Therefore, the interpretation given to this ground cannot render the other four Convention grounds superfluous.

13 See UNHCR’s Handbook, paragraph 74.
14 For more information, see UNHCR’s Guidelines on International Protection: “Membership of a particular social group” within the context of Article 1A(2) of the 1951 Convention and/or its 1967 Protocol relating to the Status of Refugees (HCR/GIP/02/02. 7 May 2002).
29. Thus, a particular social group is a group of persons who share a common characteristic other than their risk of being persecuted, or who are perceived as a group by society. The characteristic will often be one which is innate, unchangeable, or which is otherwise fundamental to identity, conscience or the exercise of one’s human rights.

30. It follows that sex can properly be within the ambit of the social group category, with women being a clear example of a social subset defined by innate and immutable characteristics, and who are frequently treated differently than men. Equally, this definition would encompass homosexuals, transsexuals, or transvestites.

31. The size of the group has sometimes been used as a basis for refusing to recognise ‘women’ generally as a particular social group. This argument has no basis in fact or reason, as the other grounds are not bound by this question of size. There should equally be no requirement that the particular social group be cohesive or that members of it voluntarily associate, or that every member of the group is at risk of persecution. It is well-accepted that it should be possible to identify the group independently of the persecution, however, discrimination or persecution may be a relevant factor in determining the visibility of the group in a particular context.

Political Opinion

32. Under this ground, a claimant must show that he or she has a well-founded fear of being persecuted for holding certain political opinions (usually different from those of the Government or parts of the society), or because the holding of such opinions has been attributed to him or her. Political opinion should be understood in the broad sense, to incorporate any opinion on any matter in which the machinery of State, government, society, or policy may be engaged. This may include an opinion as to gender roles. It would also include non-conformist behaviour which leads the persecutor to impute a political opinion to him or her. In this sense, there is not as such an inherently political or an inherently non-political activity, but the context of the case should determine its nature. A claim on the basis of political opinion does, however, presuppose that the claimant holds or is assumed to hold opinions not tolerated by the authorities or society, which are critical of their policies, traditions or methods. It also presupposes that such opinions have come or could come to the notice of the authorities or
relevant parts of the society, or are attributed by them to the
claimant. It is not always necessary to have expressed such an
opinion, or to have already suffered any form of discrimination or
persecution. In such cases the test of well-founded fear would
be based on an assessment of the consequences that a
claimant having certain dispositions would have to face if he or
she returned.

33. The image of a political refugee as someone who is fleeing
persecution for his or her direct involvement in political activity
does not always correspond to the reality of the experiences of
women in some societies. Women are less likely than their male
counterparts to engage in high profile political activity and are
more often involved in ‘low level’ political activities that reflect
dominant gender roles. For example, a woman may work in
nursing sick rebel soldiers, in the recruitment of sympathisers, or in
the preparation and dissemination of leaflets. Women are also
frequently attributed with political opinions of their family or male
relatives, and subjected to persecution because of the activities
of their male relatives. While this may be analysed in the context
of an imputed political opinion, it may also be analysed as being
persecution for reasons of her membership of a particular social
group, being her “family”. These factors need to be taken into
account in gender-related claims.

34. Equally important for gender-related claims is to recognise that a
woman may not wish to engage in certain activities, such as
providing meals to government soldiers, which may be
interpreted by the persecutor(s) as holding a contrary political
opinion.
III. PROCEDURAL ISSUES

35. Persons raising gender-related refugee claims, and survivors of torture or trauma in particular, require a supportive environment where they can be reassured of the confidentiality of their claim. Some claimants, because of the shame they feel over what has happened to them, or due to trauma, may be reluctant to identify the true extent of the persecution suffered or feared. They may continue to fear persons in authority, or they may fear rejection and/or reprisals from their family and/or community.

36. Against this background, in order to ensure that gender-related claims, of women in particular, are properly considered in the refugee status determination process, the following measures should be borne in mind:

i. Women asylum-seekers should be interviewed separately, without the presence of male family members, in order to ensure that they have an opportunity to present their case. It should be explained to them that they may have a valid claim in their own right.

ii. It is essential that women are given information about the status determination process, access to it, as well as legal advice, in a manner and language that they understand.

iii. Claimants should be informed of the choice to have interviewers and interpreters of the same sex as themselves, and they should be provided automatically for women claimants. Interviewers and interpreters should also be aware of and responsive to any cultural or religious sensitivities or personal factors such as age and level of education.

iv. An open and reassuring environment is often crucial to establishing trust between the interviewer and the claimant, and should help the full disclosure of sometimes sensitive and personal information. The interview room should be arranged in such a way as to encourage discussion, promote confidentiality and to lessen any possibility of perceived power imbalances.

20 This Part has benefited from the valuable guidance provided by various States and other actors, including the following guidelines: Considerations for Asylum Officers Adjudicating Asylum Claims from Women (Immigration and Naturalization Service, United States, 26 May 1995); Refugee and Humanitarian Visa Applicants: Guidelines on Gender Issues for Decision Makers (Department of Immigration and Humanitarian Affairs, Australia, July 1996); Guideline 4 on Women Refugee Claimants Fearing Gender-Related Persecution: Update (Immigration and Refugee Board, Canada, 13 November 1996); Position on Asylum Seeking and Refugee Women, (European Council on Refugees and Exiles, December 1997); Gender Guidelines for the Determination of Asylum Claims in the UK (Refugee Women’s Legal Group, July 1998); Gender Guidelines for Asylum Determination (National Consortium on Refugee Affairs, South Africa, 1999); Asylum Gender Guidelines (Immigration Appellate Authority, United Kingdom, November 2000); and Gender-Based Persecution: Guidelines for the investigation and evaluation of the needs of women for protection (Migration Board, Legal Practice Division, Sweden, 28 March 2001).


22 See also Executive Committee Conclusion No. 64, Refugee Women and International Protection, 1990, [a] (iii): Provide, wherever necessary, skilled female interviewers in procedures for the determination of refugee status and ensure appropriate access by women asylum-seekers to such procedures, even when accompanied by male family members.
v. The interviewer should take the time to introduce him/herself and the interpreter to the claimant, explain clearly the roles of each person, and the exact purpose of the interview. The claimant should be assured that his/her claim will be treated in the strictest confidence, and information provided by the claimant will not be provided to members of his/her family. Importantly, the interviewer should explain that he/she is not a trauma counsellor.

vi. The interviewer should remain neutral, compassionate and objective during the interview, and should avoid body language or gestures that may be perceived as intimidating or culturally insensitive or inappropriate. The interviewer should allow the claimant to present his/her claim with minimal interruption.

vii. Both ‘open-ended’ and specific questions which may help to reveal gender issues relevant to a refugee claim should be incorporated into all asylum interviews. Women who have been involved in indirect political activity or to whom political opinion has been attributed, for example, often do not provide relevant information in interviews due to the male-oriented nature of the questioning. Female claimants may also fail to relate questions that are about ‘torture’ to the types of harm which they fear (such as rape, sexual abuse, female genital mutilation, ‘honour killings’, forced marriage, etc.).

viii. Particularly for victims of sexual violence or other forms of trauma, second and subsequent interviews may be needed in order to establish trust and to obtain all necessary information. In this regard, interviewers should be responsive to the trauma and emotion of claimants and should stop an interview where the claimant is becoming emotionally distressed.

ix. Where it is envisaged that a particular case may give rise to a gender-related claim, adequate preparation is needed, which will also allow a relationship of confidence and trust with the claimant to be developed, as well as allowing the interviewer to ask the right questions and deal with any problems that may arise during an interview.

x. Country of origin information should be collected that has relevance in women’s claims, such as the position of women before the law, the political rights of women, the social and economic rights of women, the cultural and social mores of the country and consequences for non-adherence, the prevalence of such harmful traditional practices, the incidence and forms of reported violence against women, the protection available to them, any penalties imposed on those who perpetrate the violence, and the risks that a woman might face on her return to her country of origin after making a claim for refugee status.
The type and level of emotion displayed during the recounting of her experiences should not affect a woman’s credibility. Interviewers and decision-makers should understand that cultural differences and trauma play an important and complex role in determining behaviour. For some cases, it may be appropriate to seek objective psychological or medical evidence. It is unnecessary to establish the precise details of the act of rape or sexual assault itself, but events leading up to, and after, the act, the surrounding circumstances and details (such as, use of guns, any words or phrases spoken by the perpetrators, type of assault, where it occurred and how, details of the perpetrators (e.g. soldiers, civilians) etc.) as well as the motivation of the perpetrator may be required. In some circumstances it should be noted that a woman may not be aware of the reasons for her abuse.

Mechanisms for referral to psycho-social counselling and other support services should be made available where necessary. Best practice recommends that trained Psycho-social counsellors be available to assist the claimant before and after the interview.

Evidentiary Matters

37. No documentary proof as such is required in order for the authorities to recognise a refugee claim; however, information on practices in the country of origin may support a particular case. It is important to recognise that in relation to gender-related claims, the usual types of evidence used in other refugee claims may not be as readily available. Statistical data or reports on the incidence of sexual violence may not be available, due to under-reporting of cases, or lack of prosecution. Alternative forms of information might assist, such as the testimonies of other women similarly situated in written reports or oral testimony, of non-governmental or international organisations or other independent research.

IV. METHODS OF IMPLEMENTATION

38. Depending on the respective legal traditions, there have been two general approaches taken by States to ensure a gender-sensitive application of refugee law and in particular of the refugee definition. Some States have incorporated legal interpretative guidance and/or procedural safeguards within legislation itself, while others have preferred to develop policy and legal guidelines on the same for decision-makers. UNHCR encourages States who have not already done so to ensure a gender-sensitive application of refugee law and procedures, and stands ready to assist States in this regard.
APPENDIX 1
UNHCR Code Of Conduct

Introduction

UNHCR’s capacity to ensure the protection of and assistance to refugees and other persons of concern depends on the ability of its staff to uphold and promote the highest standards of ethical and professional conduct. We, the staff members of UNHCR, are personally and collectively responsible for maintaining these standards. Managers have a particular responsibility to uphold these standards, to set a good example, and to create a working environment that supports and empowers staff.

It is recognised that UNHCR’s work often puts its staff in positions of power in relation to its beneficiaries. Staff have an obligation not to abuse this power.

This Code of Conduct is intended to serve as an illustrative guide for staff to make ethical decisions in their professional lives, and at times in their private lives. It is a moral code that does not have the force of law. It is designed to assist staff to better understand the obligations placed upon their conduct by the Charter of the United Nations and the Staff Regulations and Rules, which remain the only legal instruments that determine acceptable conduct in UNHCR. Signing the Code does not take away any acquired rights of UNHCR Staff.

While acknowledging that local laws and customs may differ from one country to another, the Code of Conduct is based on international legal standards. For example, children are defined as those under the age of 18. Guidance on appropriate interpretation can be found in the Notes to the Code of Conduct.

The Code applies to all UNHCR staff members, who will be requested to sign it. Persons holding a UNHCR consultant contract and interns will also receive the Code and be requested to confirm that they uphold its standards as far as applicable to their status. Governmental and non-governmental organisations and companies which, through their employees, work for UNHCR, will be requested to make the principles contained in the Code known to those persons in an appropriate manner.

All UNHCR staff are responsible for encouraging, advocating and promoting the dissemination of the Code of Conduct. They also have a role in implementing, monitoring and enforcing its standards. Staff are also urged to encourage partners to adhere to these standards and to join UNHCR staff in upholding them.
CORE VALUES AND GUIDING PRINCIPLES

UNHCR staff are committed to the following fundamental values and principles:

• As staff working within the United Nations system, we will ensure that our conduct is consistent with and reflects the values enshrined in the Charter of the United Nations: respect for fundamental human rights, social justice and human dignity, and respect for the equal rights of men and women. We will assist UNHCR to actively promote adherence to the principles of international refugee law, international human rights law and international humanitarian law. We will be guided by the core values of the United Nations system, including professionalism, integrity and respect for diversity, and will maintain an international perspective at all times.

• As UNHCR staff, our primary commitment is to ensure the protection of and assistance to refugees and other persons of concern, in accordance with the mandate of the Office. We are committed to supporting the fullest possible participation of refugees and other persons of concern – as individuals, families and communities – in decisions that affect their lives.

• We will respect the dignity and worth of every individual, will promote and practise understanding, respect, compassion and tolerance, and will demonstrate discretion and maintain confidentiality as required. We will aim to build constructive and respectful working relations with our humanitarian partners, will continuously seek to improve our performance, and will foster a climate that encourages learning, supports positive change, and applies the lessons learned from our experience.

• We will show respect for all persons equally without distinction whatsoever of race, gender, religion, colour, national or ethnic origin, language, marital status, sexual orientation, age, socio-economic status, disability, political conviction, or any other distinguishing feature. We will strive to remove all barriers to equality.

• We will respect the cultures, customs and traditions of all peoples, and will strive to avoid behaving in ways that are not acceptable in a particular cultural context. However, when the tradition or practice is considered by the relevant organ of the United Nations to be directly contrary to an international human rights instrument or standard, we will be guided by the applicable human rights instrument or standard.

Commitment to UNHCR Code of Conduct

As a staff member of UNHCR, I commit myself to:

1. Treat all refugees and other persons of concern fairly, and with respect and dignity.

I will always seek to understand the difficult experiences that refugees and other persons of concern to UNHCR have faced and survived, as well as the disadvantaged position in which they – particularly on the basis of gender, age or disability – may find themselves in relation to those who hold power or influence over aspects of their lives.
I will always seek to care for and protect the rights of children, and act in a manner that ensures that their best interests shall be the paramount consideration.

If my job involves direct work with refugees or other persons of concern, I will meet with them regularly, in order to fully understand their experiences and needs, and to explain the role of UNHCR and the scope of its work.

I will keep myself informed about UNHCR’s policies, objectives and activities and about refugee concerns, and will do my utmost to support the Office’s protection and assistance work.

2. **Uphold the integrity of UNHCR, by ensuring that my personal and professional conduct is, and is seen to be, of the highest standard.**

I will demonstrate integrity, truthfulness, dedication and honesty in my actions. I will be patient, respectful and courteous to all persons with whom I deal in an official capacity, including refugees and other persons of concern, representatives of operational and implementing partners, governments and donors.

I will observe local laws, will meet all my private legal and financial obligations, and will not seek to take personal advantage of any privileges or immunities that have been conferred on me in the interest of the United Nations. I will do my utmost to ensure that the conduct of members of my household does not reflect unfavourably on the integrity of UNHCR.

3. **Perform my official duties and conduct my private affairs in a manner that avoids conflicts of interest, thereby preserving and enhancing public confidence in UNHCR.**

My actions will be free of any consideration of personal gain, and I will resist any undue political pressure in decision-making. I will neither seek nor accept instructions regarding the performance of my duties from any government, including my national authorities, or from any authority external to the United Nations.

In accordance with Staff Regulations and Rules, I will not accept any honour, decoration, favour gift, remuneration, from any government; nor will I accept these from any other source external to the United Nations without prior authorisation. I will not engage in any outside occupation or employment without prior authorisation. I will not accept supplementary payments or subsidies from a government or any other source, or participate in certain political activities such as standing for or holding public office.

I will avoid assisting private persons or companies in their undertakings with UNHCR where this might lead to actual or perceived preferential treatment. I will never participate in activities related to procurement of goods or services, or in human resource activities, where a conflict of interests may arise.
4. **Contribute to building a harmonious workplace based on team spirit, mutual respect and understanding.**

I will show respect to all colleagues, regardless of status or position, and will allow all colleagues the opportunity to have their views heard, and to contribute from their knowledge and experience to team efforts. I will communicate openly and share relevant information (subject to confidentiality requirements) with other colleagues, and will endeavour to respond in a timely manner to queries.

I will respect my colleagues’ privacy, and avoid misinformation. I will seek to resolve differences and solve problems when they arise. I will contribute to building constructive dialogue, guided by mutual respect and an open, positive approach, between management and staff representatives.

As a manager/supervisor I will be open to the views of all team members. I will provide timely feedback on the performance of each team member through guidance, motivation and full recognition of their merits.

5. **Promote the safety, health and welfare of all UNHCR staff as a necessary condition for effective and consistent performance.**

I will remain aware of and comply with all instructions designed to protect my health, welfare and safety. I will always consider the safety of staff in operational decisions. If I have doubts regarding an instruction that I consider threatening to my safety or the safety of other persons, I will bring this immediately to the attention of my supervisor.

As a manager/supervisor, I will endeavour to ensure that the health and well-being of staff and their families are not subjected to undue risk. I will promote a healthy work-life balance for staff, and will respect staff entitlements.

6. **Safeguard and make responsible use of the information and resources to which I have access by reason of my employment with UNHCR.**

I will exercise due care in all matters of official business, and not divulge any confidential information about refugees, colleagues and other work-related matters in accordance with the staff regulations and rules and current guidelines.

I will protect, manage and utilise UNHCR human, financial and material resources efficiently and effectively, bearing in mind that these resources have been placed at UNHCR’s disposal for the benefit of refugees and other persons of concern.

7. **Prevent, oppose and combat all exploitation and abuse of refugees and other persons of concern.**

I undertake not to abuse the power and influence that I have by virtue of my position over the lives and well-being of refugees and other persons of concern.
I will never request any service or favour from refugees or other persons of concern in return for protection or assistance. I will never engage in any exploitative relationships – sexual, emotional, financial or employment-related – with refugees or other persons of concern.

Should I find myself in such a relationship with a beneficiary that I consider non-exploitative and consensual, I will report this to my supervisor for appropriate guidance in the knowledge that this matter will be treated with due discretion. I understand that both my supervisor and I have available to us normal consultative and recourse mechanisms on these issues.

I will act responsibly when hiring or otherwise engaging refugees or other persons of concern for private services. I will report in writing on the nature and conditions of this employment to my supervisor.

8. **Refrain from any involvement in criminal or unethical activities, activities that contravene human rights, or activities that compromise the image and interests of UNHCR.**

I will neither support nor take part in any form of illegal, exploitative or abusive activities, including, for example, child labour, and trafficking of human beings and commodities.

As UNHCR is committed to the highest standards of protection and care for children, I am aware that I am expected not to engage in sexual activities with any person under the age of 18. (Further guidance is given in the Notes to this Code of Conduct).

9. **Refrain from any form of harassment, discrimination, physical or verbal abuse, intimidation or favouritism in the workplace.**

I will not engage in or tolerate any form of harassment in the workplace, including sexual harassment and abuse of power.

As a manager/supervisor, I will not solicit favours, loans or gifts from staff, nor will I accept unsolicited ones that are of more than token value.

I recognise that there is an inherent conflict of interest and potential abuse of power in having sexual relations with staff under my supervision. Should I find myself in such a relationship, I will resolve this conflict of interest without delay.
APPENDIX 1.1

Core Principles of a Code of Conduct

Sexual Exploitation and Abuse in Humanitarian Crises

Excerpt from the Plan of Action of the Report of the IASC Task Force on Protection from Sexual Exploitation and Abuse in Humanitarian Crises

A. Core Principles of a Code of Conduct

Humanitarian agencies have a duty of care to beneficiaries and a responsibility to ensure that beneficiaries are treated with dignity and respect and that certain minimum standards of behavior are observed. In order to prevent sexual exploitation and abuse, the following core principles must be incorporated into agency codes of conduct:

- Sexual exploitation and abuse by humanitarian workers constitute acts of gross misconduct and are therefore grounds for termination of employment.

- Sexual activity with children (persons under the age of 18) is prohibited regardless of the age of majority or age of consent locally. Mistaken belief in the age of a child is not a defence.

- Exchange of money, employment, goods, or services for sex, including sexual favours or other forms of humiliating, degrading or exploitative behavior is prohibited. This includes exchange of assistance that is due to beneficiaries.

- Sexual relationships between humanitarian workers and beneficiaries are strongly discouraged since they are based on inherently unequal power dynamics. Such relationships undermine the credibility and integrity of humanitarian aid work.

- Where a humanitarian worker develops concerns or suspicions regarding sexual abuse or exploitation by a fellow worker, whether in the same agency or not, s/he must report such concerns via established agency reporting mechanisms.

- Humanitarian workers are obliged to create and maintain an environment which prevents sexual exploitation and abuse and promotes the implementation of their code of conduct. Managers at all levels have particular responsibilities to support and develop systems which maintain this environment.

* Different considerations will arise regarding the enforcement of some of these principles for humanitarian workers hired from the beneficiary community. While sexual exploitation and abuse and the misuse of humanitarian assistance will always be prohibited, discretion may be used in the application of the principles regarding sexual relationships for this category of humanitarian worker.
APPENDIX 2
Incident Report Form

Page 1 of 4

**Instructions**
Form to be completed by fully trained and designated staff.
Original to be maintained in designated agency (outside camp.)
Copy to be delivered to UNHCR Protection Officer, in sealed envelope, as soon as possible. (If survivor wishes to report incident to police, Protection Officer must have copy within 24 hours.)
Copy to be delivered to UNHCR Protection Officer, in sealed envelope, as soon as possible. (If survivor wishes to report incident to police, Protection Officer must have copy within 24 hours.)
Attach additional pages with continued narrative, if needed.

**NOTE**
This form is NOT an interview guide. Staff must be properly trained in interviewing survivors. Separate forms are available for counselling and health exam/treatment.

<table>
<thead>
<tr>
<th>INCIDENT TYPE</th>
<th>Secondary Incident Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Number</td>
<td>Camp/Address (for urban and returnee caseload)</td>
</tr>
</tbody>
</table>

Previous Incident Numbers for this Client (if any)

<table>
<thead>
<tr>
<th>VICTIM/SURVIVOR INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
</tr>
<tr>
<td>Address:</td>
</tr>
<tr>
<td>No. of Children:</td>
</tr>
<tr>
<td>UNHCR “vulnerable” designation (if any):</td>
</tr>
<tr>
<td>If victim/survivor is a child:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>THE INCIDENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location:</td>
</tr>
<tr>
<td>Description of Incident (summarize circumstances, what exactly occurred, what happened afterward):</td>
</tr>
</tbody>
</table>
### PERPETRATOR INFORMATION

<table>
<thead>
<tr>
<th>Name:</th>
<th>No. of Perpetrators:</th>
<th>Sex:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>Nationality:</td>
<td>Age:</td>
</tr>
<tr>
<td>Relationship to Victim/Survivor:</td>
<td>Marital Status:</td>
<td>Occup.:</td>
</tr>
</tbody>
</table>

If perpetrator unknown, describe him/her, including any identifying marks:

Current location of perpetrator, if known:

Is perpetrator a continuing threat?

If perpetrator is a child: Name of Caregiver:

### WITNESSES

Describe presence of any witnesses (including children):

Names and Addresses:

### ACTION TAKEN – any action already taken as of the date this form is completed

<table>
<thead>
<tr>
<th>Reported to:</th>
<th>Date Reported</th>
<th>Action Taken</th>
</tr>
</thead>
<tbody>
<tr>
<td>POLICE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SECURITY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UNHCR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LOCAL LEADERS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HEALTH CARE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>See page 3 of this form for name/info.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OTHER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### MORE ACTION NEEDED AND PLANNED ACTION – as of the date this form is completed

Physical security needs assessment and immediate safety plan:

Has the victim/survivor received any kind of counselling – if yes, which kind?  
- Yes  
- No

Is victim/survivor going to report the incident to the police?  
- Yes  
- No

Is she/he seeking action by elders’ tribunal/traditional court?  
- Yes  
- No

What follow-up will be done by community development/SGBV workers?

What further action is needed by UNHCR and/or others?

Form completed by (Print Name):  
Signature:  

---

Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons  
Page 2 of 4
MEDICAL REPORT FORM

Page 1 and 2 (completed) + Page 3 (1st two lines filled) to be hand carried by staff, with victim/survivor, to health centre. Page 3 to be completed by health care staff. OR if victim/survivor did not have medical examination at the time of reporting the incident, explain reasons below.

<table>
<thead>
<tr>
<th>SUMMARY OF MEDICAL EXAMINATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Survivor Name:</td>
</tr>
</tbody>
</table>

(If applicable) Reason victim/survivor did NOT have a medical examination at this time:

<table>
<thead>
<tr>
<th>TO BE COMPLETED BY HEALTH CENTRE STAFF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of exam:</td>
</tr>
</tbody>
</table>

Before interviewing/examining the victim/survivor, read pages 1-2 of this form.
Avoid asking victim/survivor to repeat information s/he has already provided.
Medical examination findings are to be recorded on the appropriate health facility forms, in accordance with relevant protocols and guidelines.
Medical records, documentation, forms, etc. are confidential and are to be kept in the health facility in a secure location. Medical information is to be released only with specific victim/survivor.

THIS PAGE DOES NOT REPLACE THE HEALTH FACILITY MEDICAL EXAM FORM.
(IT IS IN ADDITION TO THAT FORM)

<table>
<thead>
<tr>
<th>SUMMARY OF MEDICAL TREATMENT PROVIDED</th>
</tr>
</thead>
</table>

NOTE This information may be important for the counsellor to know for follow-up assistance. However: obtain victim’s/survivor’s consent to share this information.

Medical Follow-up Recommended:
Follow-up visit to health facility in two weeks
Follow-up visit to health facility in six months
Other, specify:

Additional Comments:

Examination Conducted by:
Print Name: | Title: |
Signature: |
Name of organisation & stamp:
CONSENT FOR RELEASE OF INFORMATION

To the staff member or volunteer completing this form:
Read the entire form to the client, explaining that s/he can choose any (or none) of the items listed. Obtain signature or thumb print with witness signature.

I, ________________________________________________________________________, give my permission for the (print victim/survivor name) following organisations to share information about the incident I have reported in this form, and about my current needs. I understand this permission is needed so that I can receive the best possible care and assistance. I understand that the information will be treated with confidentiality and respect, and shared only as needed to provide the assistance I need and request.

(Mark with an X all that apply)

☑ Community Services agency (name) _____________________________________________

☑ Health Centre (name of organisation) ___________________________________________

☑ UNHCR (Protection Officer, others)

☑ Police

☑ Camp / block leader. Specify name(s): ___________________________________________

☑ Others, specify: _______________________________________________________________________

_______________________________________________________________________

Signature or thumb print __________________________________________________________

Witness (signature or thumb print) ________________________________________________

Date_________________________________
Instructions for Completing pages 1 and 2 of the Incident Report Form

Purpose and Intended Use

The Sexual/Gender-Based Violence Incident Report Form is recommended for use by actors engaged in prevention and response to sexual/Gender-based violence in refugee settings. The Incident Report Form is an inter-agency tool and was designed to:

- Provide a brief (4 pages copied front and back) comprehensive summary of the most relevant information about an individual incident.
- If victim/survivor consents: be used as an information-sharing tool, to be copied and shared among and between actors or organisations involved in assisting the victim/survivor and/or taking follow-up action.
- Avoid requiring the victim/survivor to repeat her story and answer the same questions during multiple interviews.
- Collect basic and relevant data for use in monitoring and evaluation of SGBV incidents and programmes.
- Collect data that is consistent in all refugee settings, to enable world-wide comparison of SGBV data across programmes, settings, countries and regions.

COMPLETED FORM

The Incident Report Form is not an interview guide. Staff who interview victims/survivors must be properly trained in skills for interviewing, active listening, and emotional support necessary for working with survivors. Separate forms may be needed for interview guides and note taking. It is important to remember that a victim/survivor may be emotionally traumatised. Therefore, great care must be taken to interview with compassion and respect. It may be appropriate to complete the form outside of the presence of the survivor.

Mechanisms and procedures for reporting, referral, and co-ordination should be established when designing programmes to prevent and respond to sexual and gender-based violence. Meet with organisations and individuals in your setting to determine each group’s information needs and how best to use the completed Incident Report Forms.

In most settings, the following procedure is useful:

- One organisation is designated as the “lead agency” for maintaining all report data, receiving the reports and providing immediate assistance. Often, this is either the community-services staff specialising in sexual and gender-based violence or the health care facility’s reproductive health centre.
- Original completed Incident Report Forms are maintained in the lead agency’s offices, outside the camp(s), in locked files.
- With victim/survivor consent to share information:
  Lead agency gives copies of the completed Incident Report Form, within 24 hours, to organisations most in need of this information: UNHCR protection personnel, the health facility, community services
agencies. Others, such as police, may also receive copies, depending on the victim’s/survivor’s choices.

- **Without victim/survivor consent to share information:**
  Lead agency provides information to UNHCR protection personnel within 24 hours. Information includes incident data and non-identifying information (no information that can identify the survivor). UNHCR needs this information in order to perform its protection mandate.

**Incident Type**

Use consistent words/definitions to enable proper data collection, tracking of incident data, monitoring and evaluation. The following types of SGBV are recommended to characterise incident type. You will need to discuss with your SGBV stakeholder/inter-agency team and add any types/definitions of SGBV that are occurring in your setting and not included on this list.

**Type of Sexual and Gender-Based Violence**

Types of SGBV include the following (please refer to Chapter 1 of UNHCR’s SGBV Guidelines for a more comprehensive list):

- **Rape/attempted rape and marital rape**
  The invasion of any part of the body of the victim or of the perpetrator with a sexual organ, or of the anal or genital opening of the victim with any object or any other part of the body by force, threat of force, coercion, taking advantage of a coercive environment, or against a person incapable of giving genuine consent (International Criminal Court). Efforts to rape someone which does not result in penetration are considered attempted rape.

- **Sexual abuse**
  Actual or threatened physical intrusion of a sexual nature (not including rape), including inappropriate touching, by force or under unequal or coercive conditions.

- **Child sexual abuse, defilement and incest**
  Any act where a child is used for sexual gratification. Any sexual relations/interaction with a child.

- **Sexual exploitation**
  Any abuse of a position of vulnerability, differential power, or trust for sexual purposes; this includes profiting momentarily, socially or politically from the sexual exploitation of another (IASC). Sexual exploitation is one of the purposes of trafficking in persons (performing in a sexual manner, forced undressing and/or nakedness, coerced marriage, forced childbearing, engagement in pornography or prostitution, sexual extortion for the granting of goods, services, assistance benefits, sexual slavery).

- **Trafficking, slavery**
  Selling and/or trading in human beings for forced sexual activities, forced labour or services, slavery or practices similar to slavery, servitude or removal of organs.

- **Early marriage**
  Arranged marriage under the age of legal consent (sexual intercourse in such relationships constitutes statutory rape, as the girls are not legally competent to agree to such unions).
- **Forced marriage**
  Arranged marriage against the victim’s/survivor’s wishes; often a dowry is paid to the family; when refused, there are violent and/or abusive consequences.

- **Female Genital Mutilation (FGM)**
  Cutting of genital organs for non-medical reasons, usually done at a young age; ranges from partial to total cutting, removal of genitals, stitching whether for cultural or other non-therapeutic reasons; often undergone several times during lifetime, i.e., after delivery or if a girl/woman has been victim of sexual assault.

- **Domestic violence**
  Domestic violence can be any violence between current or former partners in an intimate relationship wherever and whenever the violence occurs, as well as between family members (for example, mothers-in-law and daughters-in-law). Domestic violence may include sexual, physical, psychological or financial abuse. Domestic violence covers a range of situations, which may include:
  - Physical and sexual abuse e.g. slapping, pushing, hitting, beating, kicking, stabbing, rape.
  - Denial of financial support and emotional deprivation e.g. withholding money, not allowing friends to visit or phone calls, verbal abuse, humiliation, forced isolation.
  - The use or threat of using legal sanctions against a partner e.g. threats about custody of children, threats of deportation.
  - Denial of rights e.g. denial of medical care, physical freedom.
  - Physical and emotional abuse of children.
  - A woman beaten by her mother-in-law because of the woman’s subordinate status in the household.

**Non-Gender-Based Violence Cases**
Some cases come to SGBV workers which are not representative of SGBV. These should not be categorised as SGBV cases, but they might be counted separately when describing the programme’s actions and activities in reports, particularly for the area of prevention. Examples:

- Child abuse (physical or psychological abuse that is not gender-based).

- Domestic arguments and problems that are not reflective of gender inequities; e.g., children with behaviour problems.

- General health problems.

**Secondary Incident Types**
Use this space only if there is more than one type of sexual and gender-based violence that occurred during one incident e.g. rape and forced marriage.

*Incident Type* would be the type for Rape
*Secondary Incident Type* would be the type for Forced Marriage
Case Number

Assign a client number, case number or incident number. This provides a way of maintaining the confidentiality of the victim/survivor: the incident is referenced by number rather than by the victim’s/survivor’s name. It is also useful in situations where one survivor suffers repeated incidents.

Camp (if applicable) or Location

Name of the refugee camp where the survivor lives/or address in case of urban and returnee caseload.

Date and Time of Interview

Date and time of day when you first interview the victim/survivor and record the information.

Previous Incident Numbers for this Client (if any)

If this client has been seen before, and if you use NGO Incident Numbers, note any prior incident numbers assigned in the past. If you don’t know the numbers assigned, try to list month/year of previous incidents, or somehow indicate that this client has seen before for other incident(s).

Victim/Survivor Information

NOTE: In settings where confidentiality of these forms cannot be assured, it is recommended that you do NOT include victim/survivor name, full address, and other identifying information on this form.

Name

Full name of victim/survivor

Age

Age at present

Year of Birth

The year victim/survivor was born

Sex

F for Female; M for Male

Address

Full address, including Village/Block, Street, Plot/House, etc.

Tribe

Tribal or ethnic affiliation, if any; if unknown, write “unknown”

Marital Status

Single or Married or Divorced or Separated or Widow or Lost Spouse
Occupation
If she/he is employed, write occupation; if not employed, write “None”

No. of Children
Number of children living with her/him

Ages [of children]
List ages of children living with victim/survivor (e.g. 6 months, 2yrs, 8yrs)

Head-of-Family
List name of head-of-family and relation to victim/survivor. If head-of-family is the victim/survivor, write “victim/survivor”. Head-of-family usually means the person in the household who is listed as head-of-family with UNHCR, for food distribution, and/or with the host country registration system. You may need to discuss this definition and clarify for your setting.

UNHCR “vulnerable” designation (if any)
If victim/survivor is designated as a “vulnerable” individual according to UNHCR, list those vulnerabilities e.g. Unaccompanied or Separated Child (UASC), or Disabled, or Elderly.

Ration Card No. or ID Card No.
If she/he has a ration card and/or ID card in her/his name, write the number(s); if not, write “unknown”. If she/he does not have these cards at all, write “No card”.

If Victim/Survivor is a Child
If the survivor is under age 18, fill these lines:

Name of Caregiver – Name of person acting as parent.
Relation – Specify the family member: Mother, Father, Sister, Aunt, etc. If victim/survivor is not living with her/his own family but is living with a caretaker family, write “Foster Family”.

THE INCIDENT

Location
Be specific e.g.

- The full address e.g. section A4, hut 12
- On path to Mtendeli Camp
- Outside camp near main road entrance
- In camp, Village B
- In camp, near Spanla Bar
- Behind latrines, C2, 23
Outside Bamba Bar in town
Area/street/house for urban caseload

Date
Date the incident occurred

Day
Day of the week the incident occurred (i.e. Mon, Tues, Wed, Thurs, Fri, Sat, Sun)

Time
Time the incident occurred; use 24-hour time or specify AM or PM.

Description of Incident
Summarise the client’s story of what occurred: what were the circumstances leading up to the attack, what happened during the attack, what did she/he do afterwards, what did the perpetrator do afterwards. Be complete in this description, but remember this is a summary. Use additional paper if you need more space.

PERPETRATOR INFORMATION
Fill in all spaces, as listed on the form, similar to the victim/survivor section above. Be as complete as possible.

WITNESSES
Describe Presence of Any Witnesses
Describe in detail: people walking nearby, someone heard but not seen, someone watching, anyone who heard or saw anything

Names and Addresses [of witnesses]
Be specific, giving full addresses if possible

ACTION TAKEN
Use this section to list any action taken by you or by victim/survivor or anyone as of the time you are completing this form. Be specific with names, dates, and action taken as listed on the form.

MORE ACTION NEEDED AND PLANNED ACTION
Physical Security Needs Assessment and Immediate Safety Plan
This section is essential if victim/survivor lives with or near the alleged perpetrator, and if the perpetrator is still at large. Be specific about potential continuing danger and victim’s/survivor’s plan for safety.
Be specific of what action you will take, what action the victim/survivor plans, and what other action you think is needed.

Print your Name
Sign the Form

Instructions on How to Complete Page 3 of the Medical Examination Report

NOTE: Page 3 is optional. In some settings, it is useful to have this medical summary attached to the Incident Report Form. In other settings, health staff find this form redundant and therefore unnecessary. If the victim/survivor chooses to report the case to the police, there may be a medical evidence form required by law in your setting; in these situations, completing Page 3 of this form is probably unnecessary. You will need to discuss this with your stakeholder/inter-agency team and determine when/how to use Page 3 of this Incident Report Form.

Complete the top section: Victim/Survivor Name, Yr. of Birth, Sex

- If victim/survivor does not want to/does not need to have a medical examination, explain the reasons why. In this case, the remainder of page 3 should be blank. NOTE: In some cases, such as sexual harassment, where there was no physical contact and there are no injuries, medical examination may not be necessary if the victim/survivor does not wish to go to the health centre and does not wish to press charges with the police.

- If the victim/survivor has already been seen at the health centre, ask victim/survivor for consent and take this form to the health worker and have him/her complete it and sign it.

- If the victim/survivor needs a medical examination and has not been to the health centre yet, escort her/him there and give the form to the health worker for completion.

For the health care worker completing the form

Date of Exam

The date victim/survivor is/was examined related to this incident.

Time

Time of examination related to this incident.

Name of IPD/OPD

Name of in - or out-patient facility where exam is conducted.
Summary of Medical Treatment Provided

Complete this section ONLY if survivor gives consent for sharing such information. Include a brief summary of treatment given. Details of this information will be on the health facility forms to be kept at the facility.

Medical Follow-up Recommended

Mark appropriate boxes with an X.

Additional Comments

Use this space if there are any specific recommendations or comments the health worker deems necessary.

Print name of person conducting the examination

Print title of person conducting the examination

Signature of person conducting the examination

Name of organisation and stamp (if appropriate)

Instructions on How to Complete Page 4 of the Consent for Release of Information Form

In most refugee settings, incident data should be shared between health care, community services, and UNHCR protection staff. In non-refugee settings, the sharing of information should be determined by the agencies engaged in providing SGBV-related services. Before sharing any information, however, there must be victim/survivor consent.

Read the entire form to victim/survivor and mark with an X all organisations to be included. If she/he is able to sign, obtain signature. If not, obtain thumb print and witness signature.

Information must be protected in accordance with victim’s/survivor’s wishes, respecting any restrictions she/he chooses.

If victim/survivor does not consent to information sharing, then only non-identifying incident information can be released to others.
APPENDIX 3
Monthly Reporting Form – SGBV Programme
(This form is adapted from Tanzanian refugee situations)

<table>
<thead>
<tr>
<th>Sub-Office:</th>
<th>Month:</th>
<th>Year:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>TYPE OF INCIDENT</th>
<th>NUMBER OF REPORTS</th>
<th>TOTAL</th>
<th>Prev Month</th>
<th>Cumulative Since January</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Camp/Site</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rape (new this month)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rape (before arrival in the camp)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attempted Rape</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual Harassment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Forced Marriage</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Early Marriage</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Domestic Violence</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Gender-Based Violence</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Gender-Based Violence</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL ALL TYPES</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Legal Protection**

<table>
<thead>
<tr>
<th>INDICATORS</th>
<th>No.</th>
<th>INDICATORS</th>
<th>No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of SGBV cases pending in court at start of month</td>
<td>Number of acquittals/convictions after six (6) months of filing charges</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of SGBV cases filed in court this month</td>
<td>Number of cases dismissed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of SGBV cases re-filed in court this month</td>
<td>Total cases pending in court end of the month</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of convictions within six (6) months of filing charges</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Narrative:** (problems, solutions, issues, training, etc.)
### Health

<table>
<thead>
<tr>
<th>INDICATORS</th>
<th>No.</th>
<th>INDICATORS</th>
<th>No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of rape cases seen in health centres for examination and treatment</td>
<td></td>
<td>Of these, number of rape cases seen within three (3) days of incident</td>
<td></td>
</tr>
</tbody>
</table>

**Narrative:** (problems, solutions, issues, training, etc.)

### Community/Psycho-Social

<table>
<thead>
<tr>
<th>INDICATORS</th>
<th>No.</th>
<th>INDICATORS</th>
<th>No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of SGBV cases receiving counseling/support</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Narrative:** (problems, solutions, issues, training, etc.)

### Security/Safety

<table>
<thead>
<tr>
<th>INDICATORS</th>
<th>No.</th>
<th>INDICATORS</th>
<th>No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of SGBV cases reported to police</td>
<td></td>
<td>Percentage increase/decrease over last month</td>
<td></td>
</tr>
</tbody>
</table>

**Prevention Activities:** (narrative)

**Co-ordination Activities:** (narrative)
APPENDIX 4
Medical History and Examination Form

CONFIDENTIAL  

CODE:

1. GENERAL INFORMATION

<table>
<thead>
<tr>
<th>First name:</th>
<th>Last name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>Sex:</td>
<td>Date of birth:</td>
</tr>
<tr>
<td>Date / time of examination:</td>
<td>In the presence of:</td>
</tr>
</tbody>
</table>

*In case of a child include: name of school, name of parents or guardian*

2. THE INCIDENT

<table>
<thead>
<tr>
<th>Date of incident:</th>
<th>Time of incident:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of incident (victim’s/survivor’s description)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Physical violence</th>
<th>Yes</th>
<th>No</th>
<th>Describe type and location on body</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type (beating, biting, pulling hair, etc.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Use of restraints</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Use of weapon(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drugs/alcohol involved</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Penetration</td>
<td>Yes</td>
<td>No</td>
<td>Not sure</td>
</tr>
<tr>
<td>Penis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finger</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (describe)</td>
<td>Yes</td>
<td>No</td>
<td>Not sure</td>
</tr>
<tr>
<td>Ejaculation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Condom used</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*If the victim/survivor is a child, also ask: Has this happened before? For how long? Who did it? Is the person still a threat? etc. Also ask about bleeding from the vagina or the rectum, pain on walking, dysuria, pain on passing stool, signs of discharge, etc.*
### Medical History

<table>
<thead>
<tr>
<th>After the incident, did the victim/survivor</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Vomit</td>
<td>Rinse mouth</td>
<td></td>
</tr>
<tr>
<td>Urinate</td>
<td>Change clothing</td>
<td></td>
</tr>
<tr>
<td>Defecate</td>
<td>Wash or bathe</td>
<td></td>
</tr>
<tr>
<td>Brush teeth</td>
<td>Use sanitary material</td>
<td></td>
</tr>
</tbody>
</table>

#### Contraceptive use

<table>
<thead>
<tr>
<th>Pill</th>
<th>IUD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Injection</th>
<th>Other (specify)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Menstrual history

<table>
<thead>
<tr>
<th>Last menstrual period</th>
<th>Menstruation at time of incident</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Evidence of pregnancy</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of weeks pregnant</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**History of consenting intercourse** (only if samples have been taken for DNA analysis)

<table>
<thead>
<tr>
<th>Last consenting intercourse within a week prior to the assault</th>
<th>Date</th>
<th>Name of individual</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Existing health problems**

<table>
<thead>
<tr>
<th>History of female genital mutilation, type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**Allergies**

<table>
<thead>
<tr>
<th>Current medication</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Vaccinations status</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tetanus</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hepatitis B</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HIV/AIDS status</td>
<td>Positive</td>
<td>Negative</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

---

Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons

146
### 4. MEDICAL EXAMINATION

#### Appearance (clothing, hair, etc., obvious physical or mental disability?)

#### Mental state (calm, crying, anxious, co-operative, etc.)

<table>
<thead>
<tr>
<th>Weight</th>
<th>Height</th>
<th>Pubertal stage (pre-pubertal, pubertal, mature):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pulse rate</td>
<td>Blood pressure</td>
<td>Respiratory rate</td>
</tr>
</tbody>
</table>

#### Physical findings
Describe systematically, and draw on the attached body pictograms, the exact location of all wounds, bruises, petechiae, marks, etc. Document type, size, colour, form and other particulars. Be descriptive, do not interpret the findings.

- Head and face
- Mouth and nose
- Eyes and ears
- Neck
- Chest
- Back
- Abdobem
- Buttocks
- Upper extremities
- Lower extremities
### 5. GENITAL AND ANAL EXAMINATION

<table>
<thead>
<tr>
<th>Vulva/scrotum</th>
<th>Introitus and hymen</th>
<th>Anus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vagina/penis</td>
<td>Cervix</td>
<td>Bimanual/rectovaginal examination</td>
</tr>
</tbody>
</table>

**Position of patient (supine, prone, knee-chest, lateral, mother’s lap)**

<table>
<thead>
<tr>
<th>For genital examination:</th>
<th>For anal examination:</th>
</tr>
</thead>
</table>

### 6. INVESTIGATIONS DONE

<table>
<thead>
<tr>
<th>Type and location</th>
<th>Examined/sent to lab</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 7. EVIDENCE TAKEN

<table>
<thead>
<tr>
<th>Type and location</th>
<th>Sent to.../stored</th>
<th>Collected by (name)/date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 8. TREATMENTS PRESCRIBED

<table>
<thead>
<tr>
<th>Treatment</th>
<th>Yes</th>
<th>No</th>
<th>Type and Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>STI prevention</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency contraception</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wound treatment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tetanus prophylaxis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hepatitis B vaccination</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 9. COUNSELLING, REFERRALS, FOLLOW-UP

<table>
<thead>
<tr>
<th>General psychological status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Victim/Survivor plans to report to police OR has already made report</td>
</tr>
<tr>
<td>Victim/Survivor has a safe place to go</td>
</tr>
<tr>
<td>Has someone to accompany</td>
</tr>
<tr>
<td>Counselling provided</td>
</tr>
<tr>
<td>Referrals</td>
</tr>
<tr>
<td>Follow-up required</td>
</tr>
</tbody>
</table>

Name of health worker conducting examination/interview: _______________________________

Title: _______________________________ Signature: _______________________________ Date: ___________
I. UNHCR DOCUMENTS

I.1. Executive Committee Conclusions


‘Conclusion on Registration of Refugees and Asylum-Seekers’, no. 91 (LII), 2001.

‘General Conclusion on International Protection’, no. 87 (L), 1999.

‘General Conclusion on International Protection’, no. 81 (XLVIII), 1997.

‘Refugee Children and Adolescents’, no. 84 (XLVIII), 1997.


‘Refugee Women and International Protection’, no. 64 (XLI), 1990.


I.2. Policies and Guidelines


How to Guides


- 'Monitoring and Evaluation of Sexual Gender Violence Programmes, Tanzania’, How to Guide no. 6, April 2000.


I.3. Training Materials


Gender, Women’s Rights and Gender-Based Violence (including Sexual Abuse and Exploitation)’, June 2002.


I.4. Other


II. INTER-Agency Documents

II.1. Policies and Guidelines


II.2. Training Materials


II.3. Other


III. INTERNATIONAL INSTRUMENTS

III.1. Universal Conventions and Protocols

Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, General Assembly Resolution A/RES/39/46, 10 December 1984.


Convention Concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour, ILO Convention, no. 182, 17 June 1999.


III.2. Regional Instruments

Africa


**Americas**


- **Convention on the Nationality of Women, 26 December 1933, O.A.S. Treaty Series no. 4, p. 38.**

- **Inter-American Convention on the Granting of Civil Rights to Women, 2 May 1948, U.N.T.S. no. 1438, vol. 51.**

- **Inter-American Convention on the Granting of Political Rights to Women, 2 May 1948, U.N.T.S. no. 1438, vol. 51.**


**Europe**

- **European Convention for the Protection of Human Rights and Fundamental Freedoms, 4 November 1950, E.T.S. no. 5.**

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**IV. UNITED NATIONS DOCUMENTS**

**IV.1. General Assembly**


IV.2. Security Council


IV.3. Economic and Social Council


IV.4. Commission on Human Rights


IV.5. Human Rights Treaty Bodies


IV.6. World Conferences


V. OTHER REFERENCE MATERIAL


ECPAT Australia, Choose with Care, Child Wise, Melbourne, 2001.


