PREVENTION OF AND RESPONSE TO GENDER-BASED VIOLENCE
The Camp Management Agency shares a responsibility to ensure that conditions in the camp minimise the risk of gender-based violence (GBV), that camp residents exposed to GBV receive appropriate care and treatment and that appropriate follow-up action is taken to respond to any incidents that occur.

A comprehensive understanding of the specific risk factors faced by women, girls, boys and men in camp settings and their causes is essential for effective GBV prevention and response interventions.

Direct and meaningful participation of, and consultation with, women in decision-making in the camp is needed to ensure that management, assistance and service delivery prevents and responds to GBV, and provides protection for the groups most at risk.

Camp management staff should make frequent and regular (preferably multiple times during the day) monitoring visits to distribution points, security check points, water and sanitation facilities, service institutions and other high-risk areas. Their findings should be shared with the relevant protection partners and humanitarian organisations.

To effectively prevent and respond to GBV a multi-sectoral and inter-agency approach is needed. Community services, protection, health, security and camp management sectors must work together to ensure that a comprehensive approach is implemented and that GBV prevention and response is integrated into all aspects of camp life.
WHAT IS GENDER-BASED VIOLENCE?

The term gender-based violence is an umbrella term for any harmful act that is perpetrated against a person’s will, and that is based on socially-ascribed (gender) differences between males and females. The term SGBV (sexual and gender-based violence) is also used to define these acts of violence.

For wider understanding of what constitutes GBV, see the Inter-Agency Standing Committee’s “Guidelines for Gender-based Violence Interventions in Emergency Settings”.

The nature and extent of specific types of GBV vary across cultures, countries and regions. Examples include:

- sexual violence, including sexual exploitation/abuse and forced prostitution
- domestic violence
- trafficking
- forced/early marriage
- rape
- harmful traditional practices such as female genital mutilation, honour killings, burning of brides for dowry or other family disputes and widow inheritance.

While gender-based violence is usually targeted at women and girls, boys and men may also be survivors of GBV. GBV can occur within the family or community, and is perpetrated by persons in positions of power, including at times by police, guards, armed forces, armed groups and UN peace-keepers. It can take place in, or be condoned by, families, communities and institutions – including schools, detention centres and religious facilities. Recent experiences have unfortunately demonstrated that gender-based violence against refugees and IDPs can also be committed by humanitarian aid workers.

See the Code of Conduct for The International Red Cross and Red Crescent Movement and NGOs.
Acts of GBV violate a number of universal human rights protected by international instruments and conventions. Many – but not all – forms of GBV are illegal, and are considered criminal acts under national laws.

The consequences of GBV include acute or chronic physical injury, unwanted pregnancy, sexually transmitted infections, HIV/AIDS, urinary tract infections and fistulas, reproductive health problems, emotional and psychological trauma, stigmatisation, rejection, isolation, depression, increased gender discrimination and sometimes death. Women and girls who have been raped may be treated as criminals and imprisoned or fined for illegal pregnancy. Women who have experienced torture, violence and trauma may have specific physical and psychological needs. Survivors of gender-based violence (including rape, sexual exploitation, and domestic violence) are at heightened risk of being re-abused.

Voice from the Field

“For many cultures, understanding violence through a gender ‘lens’, or the idea of linking gender and violence, is often seen as a very Western interpretation. The prevention of GBV is not always understood as being about protection or about upholding international human rights. The social construction of gender is complex and often difficult to understand – nor is there a universal profile of a GBV perpetrator or a GBV survivor. The types and degrees of violence, and how they are understood vary according to context. Often the trauma, fear and vulnerability experienced by people living in a camp environment promotes and reinforces traditional and cultural power relations, which galvanises the understandings and relationships which allow GBV to continue. One of the biggest challenges is the lack of trained staff with GBV awareness, or an understanding of GBV in relation to protection and human rights. Women in these situations who are well trained, are needed to take positions of leadership and authority in INGOs, NGOs and community-based organisations. Breaking cycles of violence and GBV in an emergency
setting such as a camp is difficult, especially if the emergency intervention prioritises meeting basic human needs for food, water and shelter but has little awareness of gender relations and issues and how they are understood by the displaced community’.

## KEY ISSUES

### CAUSES AND FACTORS CONTRIBUTING TO GBV

Acts of gender-based violence continue to be widespread worldwide, particularly against women and girls. Unequal gender relations and discrimination are the root causes of GBV. Situations of displacement leading to breakdown of community safety mechanisms may increase the risks of such violence. Refugee and IDP camps, instead of providing a safe environment for their residents, may further expose them to this type of violence.

While war, conflict, and internal strife are the primary causes of flight and displacement, rape and other forms of GBV may also provoke flight. Violence may occur during flight at the hands of bandits, traffickers, border guards and/or other individuals in positions of authority. Like men and boys fleeing conflict and persecution, women and girls are also increasingly obliged to pay people-smugglers and undertake perilous journeys.

The problems of violence and GBV continue during displacement, as camps are often raided by militia. Female camp residents are exposed to greater risk of sexual exploitation and abuse if they have not been individually registered, service delivery mechanisms are poor and there is inadequate distribution of food and non-food items. Women and girls typically have to travel long distances in search of food, fuel and work.

The dangers and uncertainties of emergencies and displacement place great psychosocial strain on individuals, families and communities, often creating environments in which domestic violence can occur. Survival and competition for the meager resources found in and around camps, and post-displacement changes in gender roles, may further increase levels of violence.

Other forms of violence result from the disruption of social structures, men’s loss of traditional roles, rapid changes in cultural traditions, poverty, frustration due to lack of productive work, decent or well-paid labour, alcohol and drug abuse and lack of respect for human rights.
When communities flee they bring with them their customs and traditions. Among these are harmful traditional practices, such as female genital mutilation (FGM). While sometimes viewed as cultural traditions that should be respected, these harmful practices are serious human rights violations.

Certain categories of women and girls are particularly at risk of GBV, such as those who are single heads of households and/or without family support. Girls at heightened risk often include unaccompanied girls, girls in foster families, girls in detention, girls associated with armed forces or groups, mentally and physically disabled girls, child mothers and children born out of rape.

**Protection in Practice: Implications of the Gender Balance in the Camp**

Following a displacement it is reasonably common for the camp population to comprise more women than men and in particular for there to be a much higher prevalence of female-headed households than amongst the general population. Camp Management Agencies should therefore identify female-headed households and target assistance and protection activities accordingly.

The picture was however very different following the South Asian tsunami. It is believed that in some parts of Indonesia, four times as many women died as men and in parts of Sri Lanka, twice as many. The reasons for this depended on the place and the time the tsunami struck, but factors such as women being near the shore drying fish or bathing, having children with them or wearing clothes which weighed them down, all slowed flight and contributed to the higher female death toll.

As a result, Camp Management Agencies and community leaders post-tsunami were dealing with a new group of people with special needs – widowers with young children, or “single-headed households”.

Agencies were not used to working with so many single-headed households and the protection implications took some time to detect. According to women interviewed in northern Sri Lanka, most men were
not willing or able to look after their children and perform domestic duties. As a result, the burden fell on surviving female relatives, including elderly women and female children who were in some cases kept out of school to carry out the domestic duties that their mothers had performed. Many women felt overburdened as they had their own family responsibilities in addition to new extended family obligations. Women also complained that men were not willing to remain unmarried for long and because so many women had died, forced and early marriage increased dramatically.

Perpetrators are sometimes the very people upon whom the survivors depend to assist and protect them, including police, government officials, and humanitarian workers and peacekeepers. All staff members and persons working on behalf of the camp residents should be trained on and sign codes of conduct. The Bulletin issued by the UN Secretary-General in 2003 (Special measures for protection from sexual exploitation and sexual abuse) applies to all UN staff including UN peacekeeping forces conducting operations under UN command and control, as well as NGOs under contract to the UN.

Experience in several camps has demonstrated that certain measures have allowed the displaced populations to become more adept at safely and appropriately identifying perpetrators and has minimised acts of GBV committed by the police. These include: mandatory training for police officers on GBV and sexual exploitation issues, mandatory wearing of name tags for easy identification and establishment of a photo registry of all police officers. The engagement of female officers has enhanced police effectiveness on issues related to gender-based violence.

⚠️ The role of traditional dispute-resolution systems must be understood and monitored – while they are often the most respected and accessed measure of accountability, they often do not provide adequate redress for female GBV survivors.
ROLE OF A CAMP MANAGEMENT AGENCY
To prevent and respond to GBV from the earliest stages of an emergency, a minimum set of coordinated activities must be undertaken quickly and in collaboration with all partners (women’s groups and organisations, NGOs, government, UN agencies and the displaced and host community).

- Safe and appropriate structures and mechanisms for reporting, responding and preventing GBV need to be instituted.
- Survivors of GBV need access to health care, psychological and social support, security and legal support.
- Prevention activities must be put in place, in coordination with the community, to address causes and contributing factors to GBV.
- Effective action to prevent and respond to GBV must be incorporated into all stages of any emergency and humanitarian intervention.

Different actors should work together to establish a coordinated multi-sectoral and inter-agency response with the community (such as the UN Population Fund – UNFPA, UNIFEM, UNICEF, UNHCR and specialised NGOs with substantial field practice in dealing with GBV). Camp Management Agencies need to collaborate with the agency(ies) entrusted to lead and coordinate GBV prevention and response activities.

⚠️ The Camp Management Agency should ensure that GBV programming is both culturally sensitive, and in accordance with International law, particularly if national laws clearly discriminate against or deny the rights of specific groups in the community.

Within the camp setting, the Camp Management Agency has roles and responsibilities in both the prevention of GBV and GBV response interventions. Key activities for the Camp Management Agency related to both of these are:

**Prevention of Gender-Based Violence**
- assessments/monitoring
- protection-sensitive shelter and site planning
- distribution and services
- safety and security
• raising community awareness
• protection systems
• ethics.

Response to Gender Based Violence
• referral systems
• safety/security
• health
• psychosocial
• legal.

Prevention of Gender-Based Violence
Assessments/Monitoring
• ensure joint multi-functional teams conducting participatory assessment and advocating for all assessments undertaken in the camp to be participatory and include women, girls, boys and men of different ages and backgrounds
• be on the look-out for information relating to community practices that might contribute to secondary or tertiary trauma for GBV survivors, or which might dissuade them from seeking health and psychosocial support
• monitor those areas of the camp which present security risks, including communal latrines and showers, collective reception areas, registration and distribution points, entertainment centres and areas used to graze animals, collect firewood or grow crops
• ensure there is a comprehensive understanding of the specific risk factors faced by women, girls, boys and men in camp settings
• incorporate this analysis in such camp-specific security strategies as provision of appropriate lighting in areas frequently used by women and girls, patrols of fuel wood collection routes and monitoring of school routes
• share appropriate information with the Protection Lead Agency in a systematic manner

Protection-Sensitive Shelter and Site Planning
• ensure that the physical layout of the camp, including the placement of latrines and other communal facilities, is done with the involvement of the community and minimises the risk of GBV
• ensure that in cases where communal shelter is the only option that appropriate divisions between families and genders are established
• ensure sufficient space and privacy (including, when possible, door locks) is allocated, especially for female-headed households
• design communal shelters with sufficient space and adequate material for partitions between families
• check that the solution provided is the right one in the cultural context, considering that in certain contexts it will not be culturally acceptable to place single or widowed women together on their own
• monitor the security and well-being of such groups regularly
• make arrangements for appropriate alternative sources such as solar energy for lighting in communal areas (especially latrines and showers) and for individual use (e.g. torches for families)
• plan location and design of shelter areas to promote community spirit and reinforce community-based protection, while preserving privacy, safety and security of individuals and the family unit
• ensure that women and minority group community members are provided opportunities to meaningfully participate in decision-making processes concerning location of services and shelter design
• ensure areas children use are safe and can be monitored by the community
• introduce alternative fuel arrangements based on the community’s assessment of the best alternatives: this must be a priority prevention action
• in consultation with women, and if appropriate, provide for women’s centres to enable safe meeting spaces for different activities including provision of health, psychosocial and legal services in response to GBV.

**Distribution and Services**
• promote and monitor meaningful and equal participation of women and men in camp governance mechanisms and decision-making
• advocate with distribution partners to ensure that decisions on the distribution of food and non-food items are done with the direct participation of the camp community, and particularly with women of diverse background and age
• promote girls’ education and work to reduce female students’ drop-out rates
• promote the establishment of skills training and income generation programmes that either target or include women in the camp
• promote livelihood activities for men and programmes addressing conflict resolution and problem solving through non-violent means, to reduce incidents of domestic violence
• promote food security and livelihood strategies, particularly targeting single women-headed households, young widows, older women and men, and others who are most at risk of abuse, exploitation and rejection
• conduct life skills and vocational training for adolescent girls and boys and provide work placement services so that they are better equipped to support their families with additional incomes.

Raising Community Awareness
• sensitise the camp community and raise awareness, using participatory methods, on gender-based violence, including information on available services, the rights of the refugees or IDPs and the laws of the host country.
• support protection partners to draw up a GBV prevention and response information, education and communication plan and disseminate GBV prevention messages.

⚠️ Voice from the Field
“In the context of this culture and the camps where we work, it is important that any training or awareness-raising in this area be done by co-facilitators, a man and a woman, and that all workshops take place in the local language and not through translation. They need to be delivered by trained national staff, who represent and can understand the camp population and the culture. If GBV is prevalent in the population, then it can be good practice to set up counseling committees as part of the camp management structure. In order to be useful to the camp population these committees need to be well–trained, confidential, and have access to legal and medical services. It is important to remember that social/cultural stigma together with psychological trauma, often prevents women and girls in particular, from reporting incidents of GBV. All too often, reporting systems are bureaucratic and male-dominated. It is vital to have well-trained female members of staff in the field. Fifty percent is a good goal to aim for.”
Choice of the best facilitators to use for awareness-raising projects is very context specific. In some cases it may be better to use a member of the local community, in other situations a member of international staff may be preferred by the community. The gender of the facilitator should also be taken into account.

Safety and Security
- mobilise the camp population to identify those groups most at risk of GBV and agree on community support and monitoring mechanisms, including ‘community watch’ teams which include women
- advocate for community policing, monitoring and for security structures to take into consideration high-risk areas, and specific risks faced by women and men of different age groups and backgrounds
- advocate for camp residents, including women, to be included in measures to improve camp security
- liaise with local/host authorities to encourage them to participate and take an active interest in the host community’s welfare: wherever possible, promote joint benefits from doing so
- advocate for adequate numbers of properly-trained police and security personnel and promote gender parity among all security staff.

Protection Systems
- cooperate with responsible protection organisations in the establishment of a coordinated, confidential, and appropriate referral and reporting mechanism for survivors of GBV in the camp
- provide health, psychosocial, legal and material support
- promote and/or assist in the establishment of a network of community-based support, ensuring that they are properly trained
- promote the training and mobilisation of men’s groups for gender equality and the prevention of GBV
- ensure that survivors provide their informed consent before any redress measures are taken
- ensure that in all cases survivors are permitted to make informed decisions.
Operation-specific Standard Operating Procedures should regulate how to deal with the consent issue in the case of a child survivor. In some countries there may be a formal obligation to report to the authorities. Normally, the informed consent of the parents or guardian should be sought, unless the risk emanates from them. In such situations, the case should be referred to the relevant national child protection authorities and, if these are not available, a best interests determination (BID) should be undertaken by the lead agency in child protection.

**Ethics**

- provide information to the camp community on the conduct expected from humanitarian personnel
- explain to the camp community the procedures for reporting complaints involving humanitarian workers, peacekeepers and/or security personnel
- assess knowledge and skills on prevention and response to GBV among agency staff and arrange for training/briefing sessions, as appropriate
- ensure that all staff are trained on, familiar with, and sign applicable codes of conduct
- employ and train committed female staff and promote the employment of female staff by other actors
- ensure all staff working in the camp are clearly identified; names and functions should be provided in writing to the community so that follow up can be provided in the case of complaints
- ensure that Standard Operating Procedures (SOPs) minimise the number of times the survivor is asked to tell his/her story or interviewed, and that he/she is aware of his/her rights regarding interviews by visitors, including the media.

Before sending any camp management team members into a camp setting, as monitors, as trainers, coaches, field staff, or supervisors, provide them with training in GBV, and especially in understanding how prevention of GBV is central to protection and to the upholding of human rights.
Response to Gender-Based Violence
Camp residents who have experienced gender-based violence often approach the Camp Management Agency as a first responder. Its staff need to be prepared to handle such incidents in a manner that prioritises confidentiality, respect, sensitivity and the dignity of the survivor. Suggested actions covering the four response areas (health, psychosocial, safety, and legal response) are listed below.

**Referral Systems**
- ensure that staff receive appropriate training on responding to the needs of survivors, including interview techniques and comprehensive knowledge of referral mechanisms and options available to them
- agree, with appropriate protection agencies and NGO partners, on incident-reporting mechanisms and referral systems (when possible and relevant), which pay due regard to confidentiality (including data protection requirements), respect, sensitivity and the dignity of the survivor
- ensure partners collectively agree which information is absolutely necessary, the manner in which it can be collected so that minimal harm is done to the survivor, what information needs to be shared and in what capacity, which (if any) individuals and organisations need to be informed of the incident and what measures are in place to protect the survivor, the information, and those responding
- ensure that non-identifying information about the incident should be appropriately shared with relevant protection agencies.

**Safety/Security**
- prioritise the safety of the survivor, his/her family and agency staff at all times
- respect the wishes, rights and dignity of the survivor, while always considering the needs and safety of the community as a whole
- ensure that children are always interviewed by those trained in age-sensitive interviewing and counseling techniques
- ensure that child survivors are not subjected to unnecessary multiple interviews
- when necessary, make arrangements to relocate a survivor to a safe area and provide discreet individual security provision, follow-up support and monitoring
- whenever possible, ensure that any perpetrator from within the community is removed.
**Health**
- advocate for health services in the camp to be equipped to respond to survivors of gender-based violence when possible, particularly ensuring availability and delivery of:
  - emergency contraception
  - post-exposure prophylaxis (in response to HIV exposure)
  - STI treatment
  - hepatitis and tetanus vaccination
- establish referral systems that ensure a rapid medical response and care of GBV survivors.

*For more details on health, see chapter 16.*

**Psychosocial**
- advocate for clear and timely referral systems for affected persons to receive psychosocial support
- ensure that community-driven psychosocial support mechanisms are not detrimental to the rights of the survivors.

**Legal**
- refer survivors who wish to seek legal redress to the responsible protection agency(ies).
The Camp Management Agency staff are trained in issues of GBV and appropriate prevention response and referral systems.

Camp residents exposed to GBV before arrival in the camp receive appropriate care and treatment.

The Camp Management Agency takes appropriate follow-up action in response to incidents of GBV.

Clear referral procedures are in place, including health care, psychological and social support for those affected.

Participatory assessment is used by the Camp Management Agency to develop an understanding of the causes of GBV and to plan community-based actions to address them.

The culture of the displaced community – including gender and power relations, traditional roles, and any harmful traditional practices – informs prevention of and response to GBV.

Camp design and layout supports the prevention of GBV.

Groups and individuals especially at risk of GBV are identified and the Camp Management Agency works in close cooperation with protection actors.

Staff members and all those working on behalf of the camp residents have been trained on, and signed, codes of conduct.

Traditional systems for resolving disputes in the community are understood and monitored.

Safe and confidential reporting mechanisms are in place and the community are informed about how to use them.
☐ Monitoring of high-risk areas in the camp is prioritised by the Camp Management Agency and is consistent and regular.

☐ Women are involved in decisions which effect the daily management of the camp and the delivery of assistance and services and help to minimise the risk of GBV.

☐ Multi-sectoral and inter-agency approaches to GBV are advocated for and supported by the Camp Management Agency.

☐ GBV response and prevention is integrated (mainstreamed) into programmes within the camp at every stage: assessment, planning, implementation, monitoring and evaluation.

☐ The Camp Management Agency works closely with programmes that promote skills and vocational training to reduce vulnerability.

☐ The safety, security and dignity of those affected by GBV is prioritised at all times.
Almost all the tools, publications and other documents referred to are available on the Toolkit CD attached to every hardcopy binder. Weblinks are provided for downloadable online resources.

- R. Bauer. Shelter & Gender. Briefing note
- Proposition system for organising, monitoring and promoting firewood patrols
- UNHCR 2006, *The UNHCR Tool for Participatory Assessment in Operations* www.humanitarianreform.org/humanitarianreform/Portals/1/cluster%20approach%20page/clusters%20pages/Em%20Shelter/Tollkit%20Field/7.2%20Assessment/7.2.2%20Guidelines/7.2.2.8%20UN HCR%20Participatory%20Assessment%20Tool.pdf

**READING AND REFERENCES**


IRC, INEE, WCRWC. *Ensuring a Gender Perspective in Education in Emergencies* www.womenscommission.org/pdf/EdGenderTool.pdf


