EMPOWER

Preventing violence against women and girls in acute emergencies

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Acknowledgements

Responding to the lack of global guidance available for preventing violence against women and girls (VAWG) from the outset of an emergency, the International Rescue Committee (IRC) developed EMPOWER with the generous support from the United States Office for Foreign Disaster Assistance as a gift of the United States Government.

This resource provides a framework for Gender Based Violence (GBV) prevention programming in emergencies that is both relevant within the first 12 weeks of an emergency and builds a foundation for longer term prevention strategies. The EMPOWER resource seeks to demonstrate that thoughtful, transformative prevention programming can be designed and implemented from the outset of emergencies if we use a feminist lens. EMPOWER names strategies— that fall and are sequenced along a pathway to prevention. It emphasizes process and approach to programming over outcomes recognizing that accountability to and empowerment of women and girls in the determination, design and implementation of programming is working on the pathway to prevention.

Gift of the United States Government

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The principles are described below, followed by examples of what it looks like to apply each principle in practice. The examples are neither prescriptive nor exhaustive. Program staff avv vre encouraged to add their ideas and apply these principles as robustly as possible.

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Power inequalities privileging men sustained by humanitarian structures unaccountable to women and girls significantly increase risks of violence against women and girls (VAWG)[1] and reduce women's and girls' life chances in conflict and disaster related acute humanitarian emergencies.[2] With less access to or control over assets, including the resources necessary to cope in emergencies, such as information, funds and opportunities women and girls are far more likely to die in a disaster and at an earlier age than men.[3] Not only are more women and girls likely to experience violence in emergencies, but the frequency and severity of violence is also more acute.[4] Rates of non-partner sexual violence in these settings are extraordinarily high compared to non-conflict contexts. One in five refugee or displaced women in complex humanitarian settings has experienced sexual violence.[5] However emerging research also clearly proves that even during times of armed conflict or humanitarian crises more women and girls experience intimate partner violence compared to non-partner sexual violence.[6]

Effectively addressing violence against women and girls (VAWG) in humanitarian settings requires gradually transforming power inequalities to ultimately prevent VAWG from occurring at all (primary prevention interventions) while at once reducing risk factors and enhancing protective factors which influence women's and girls' vulnerability to violence (secondary prevention interventions more commonly referred to as women's empowerment interventions and GBV risk-reduction strategies) and ensuring survivors can heal and are protected from experiencing further violence (tertiary prevention more commonly referred to as response interventions).

From the onset of a humanitarian emergency both prevention and response interventions are equally essential to ensure a VAWG program's holistic design.

While response services for survivors have been successfully integrated among core humanitarian relief efforts in acute emergencies, prevention programming in emergency settings is often overlooked or is an afterthought. This is largely due to a lack of clarity and guidance on what can realistically be achieved towards prevention in the acute phase of an emergency (the first months)[7]. Prevention programming is often narrowly defined limiting it to an either/or approach: risk reduction or long-term primary prevention strategies such as individual behavior change that seem unfeasible to implement in an acute phase. Further, in order to demonstrate that prevention programming is happening from the outset of an emergency, practitioners default to ad-hoc awareness raising about VAWG, usually targeting men in communities-- which "checks a box" but has most often not been developed or implemented in a strategic manner and has not engaged women and girls.

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[1] This document uses the term violence against women and girls (VAWG) to clearly center women and girls in this work. Gender-based violence (GBV) is used when directly referring to international standards, documents, or activities in the field that in which that language is embedded. For the purposes of this document, VAWG and GBV may be used interchangeably, recognizing that the focus is on women and girls.

[2] UN General Assembly (2016). One Humanity: Shared Responsibility: Report of the Secretary-General for the World Humanitarian Summit. http://sgreport.worldhumanitariansummit.org

[3] Neumayer E, Plilmper T. (2007). The Gendered Nature of Natural Disasters: The Impact of Catastrophic Events on the Gender Gap in Life Expectancy, 1981-2002. http://www.lse.ac.uk/geographyAndEnvironment/whosWho/profiles/neumayer/pdf/Disastersarticle.pdf

[4] Wirtz, A.L., Pham, K., Glass, N. et al. (2014) Gender-based violence in conflict and displacement: qualitative findings from displaced women in Colombia. Confl Health 8, 10 https://doi.org/10.1186/1752-1505-8-10

[5] Vu A, Adam A, Wirtz A, Pham K, Rubenstein L, Glass N, Beyrer C, Singh S. (2014) The Prevalence of Sexual Violence among Female Refugees in Complex Humanitarian Emergencies: a Systematic Review and Meta-analysis. PLOS Currents Disasters. 2014 Mar 18 . Edition 1 http://currents.plos.org/disasters/index.html%3Fp=11337.html

[6] Global Women's Institute International Rescue Committee. (2017). No Safe Place: A lifetime of violence for conflict-affected women and girls in South Sudan. https://www.rescue.org/report/no-safe-place

[7] The "acute emergency phase" begins when humanitarian organizations start responding to a crisis. This resource builds on the International Rescue Committee's Gender Based Violence Emergency Response Program Model, therefore EMPOWER focuses on the critical first 12 weeks of programming in emergencies.

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While setting up responses services is and must be the priority, there are foundational elements of prevention programming that can also be implemented during the acute phase—but it requires a rethinking or reframing of what prevention in emergencies can be. It requires that we draw on feminist principles to design and implement programming—such that the **how** is just as important as the **what**.

EMPOWER addresses these issues by providing a framework for prevention of VAWG programming in emergencies that is both relevant within the first 12 weeks of an emergency and builds a foundation for longer-term prevention strategies. The EMPOWER resource seeks to demonstrate that thoughtful, transformative prevention programming can be designed and implemented from the outset of emergencies if we use a feminist lens.

EMPOWER names strategies—that fall and are sequenced along a pathway to prevention. It emphasizes **process and approach** to programming over outcomes recognizing that accountability to and empowerment of women and girls in the determination, design and implementation of programming is working on the pathway to prevention.

While EMPOWER seeks to shift our thinking and approaches it also aligns with existing GBV in emergencies resources: including the Inter-Agency Minimum Standards for Gender Based Violence in Emergencies Programming, Managing Gender Based Violence Programming in Emergencies (UNFPA E-learning course) as well as the International Rescue Committee's Gender Based Violence Emergency Preparedness and Response model.

The EMPOWER resource includes:

PRINCIPLES

Agreed upon best practice principles in prevention and select prevention approaches representative of the GBV sector and broader VAWG actors' collective experience to date.

ACTIONS

Critical actions which specifically put into practice all eight best practice principles and suggest how to apply the three most relevant prevention approaches in acute emergencies while also covering key challenges and areas for further exploration.
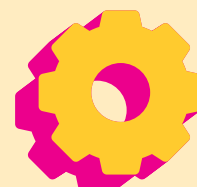
TOOLS

Practical tools to facilitate women-led decision-making related to the design of prevention strategies and supervision tools covering recruitment, capacity building and shadowing of staff to help ensure prevention programming is accountable to women and girls.

EMPOWER FRAMEWORK FOR PREVENTING VIOLENCE AGAINST WOMEN AND GIRLS IN EMERGENCIES

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Defining prevention

Preventing violence against women and girls, in its simplest form, means stopping violence before it occurs or reducing the frequency and severity of new incidences when violence has already occurred.[8] A more robust definition understands prevention as more than just an absence of violence, but as an expansion of women's assets and power.[9]

Prevention programming works towards reducing acts of violence while building the conditions communities need to live free from violence against women and girls, both in the short and long-term. In the context of acute emergencies this means women and girls who have been harmed or otherwise exposed to violence must have the opportunity to recover and immediately be connected to the services that can protect them, support their healing and help reduce their vulnerability to harm in the future. It also means that VAWG program staff recognize their power as humanitarian aid workers over women and girls and model positive uses of that power by ensuring diverse women's and girl's sense of ownership and influence over the program.

The scope of input and decision-making could be limited in acute emergencies because they are unaccustomed to expressing their needs and choices, are unfamiliar with humanitarian programming or simply don't have the time to participate. Regardless, they must be proactively engaged from the beginning, as this first step serves as a catalyst not only to transform unequal relations of power, but to ensure that prevention programming is always responsive and accountable to the voices of women and girls.

Photo: Meredith Hutchison/The IRC

A proposed definition of prevention in humanitarian contexts

"Prevention includes any activities with the primary goal of eliminating the systemic conditions for violence against women and girls to occur. This includes addressing risk and protective factors that have been identified through an evidence base for victimization and perpetration, as well as the underlying causes of VAWG related to discrimination against women and girls."

Source: Ward,j. Coughtry, S., Lafreniere,J., McDonald, N. (2013) Programming Guidance Violence against Women in Conflict, Post-conflict and Emergency Settings Virtual Knowledge Centre to End Violence Against Women and Girls, UNWOMEN. https://www.endvawnow.org/en/modules/view/4-conflict-post-conflict.html

[8] Jinadasa K, McLean L. (2020). Prevention Foundations Brief 1: What is prevention of violence against women? Prevention Collaborative https://prevention-collaborative.org/category/practice/prevention-foundations/

[9] Department for International Development (2012) DFID Guidance Note 1: A Theory of Change for Tackling Violence against Women and Girls, Department for International Development, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/67336/how-tonote-vawg-1.pdf

Best practice principles of VAWG prevention

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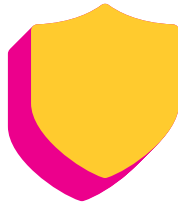
Prioritize the safety of women and girls

2

Use an intersectional gender-power analysis

3

Start with ourselves

4

Center the voices, power, and agency of women and girls

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Recognize, engage, and be accountable to women and girls experiencing multiple forms of discrimination

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Reflect the specific context

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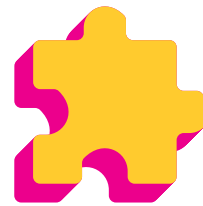
Work in solidarity with women's rights organizations, activists, and leaders

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Engage communities in ways that are meaningful, creative, and dynamic, asking questions rather than giving messages
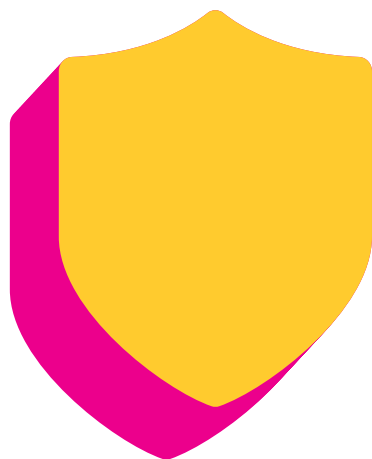
Principle 1

Prioritize the safety of women and girls

Ensure that interventions do not directly or inadvertently put women and girls at greater risk of violence or cause them further harm. Put resources and services in place to support women and girls who may disclose violence and create a safe environment to address issues.

WHAT DOES THIS PRINCIPLE LOOK LIKE IN ACTION?

Talk to women and girls directly as a regular part of assessments and programming. Talk to them about their perceptions of risks and safety and what steps could be taken to prevent violence against them. Make sure that their perspectives inform all aspects of program design. Use a strengths-based (also known as assets-based) approach as much as possible, creating space to talk about positive relationships, resources, experiences, and strengths in women and girls' lives beyond just the negative.

Create separate spaces for dialogue for different age groups of women and girls, to ensure that diverse perspectives inform the work.

Ensure that women can safely access program services, taking steps to design the program accordingly, e.g., consider the location of services, times available, limitations or restrictions for women, potential backlash, etc. to make sure that programming does not put women and girls at greater risk.

Liaise with other sectors and clusters and support them to implement the GBV Guidelines in their programs to help keep women and girls safe.

Identify potential risks to female staff and take steps to address them and ensure their safety. Consider developing for a within the workplace specifically for female staff to raise issues and ideas.

Principle 2

Use an intersectional gender-power analysis

Prevention work is rooted in analyzing the imbalance of power between women/girls and men/boys as the root cause of violence against women and girls. An intersectional lens is important for prevention work because it reveals how different systems of oppression and discrimination, such as racism, sexism or ableism, interact and mutually reinforce each other shaping experiences of violence and power among women of different socio-economic backgrounds, abilities, sexualities, gender identities and/or religious affiliations. Examining how other forms of structural inequality and discrimination intersect with gender inequalities to exacerbate violence is necessary to effectively address the root causes of violence against all women, across the diversity of women and girls affected by an acute emergency. Interventions recognize the implications of this power imbalance within their programming and are deliberate not to replicate nor exacerbate them. They seek to balance power between women and men, boys and girls, and promote positive uses of power through anti-oppressive practice.

WHAT DOES THIS PRINCIPLE LOOK LIKE IN ACTION?

Analyze how gender-power dynamics affect women's access to and participation in your programming, as well as their safety and security.

Ensure that program activities do not directly or inadvertently perpetuate or promote men and boys' power over women and girls e.g. How does engaging men put women at greater risk, and how can this be addressed and avoided? What are the dynamics between male and female volunteers? Do any program activities put women at risk of violence once they return home?

Ensure that gender-power imbalances are not exacerbated by work in other sectors in addition to work carried out by the GBV sector e.g. committees dominated by men, services that women and girls do not equally access, men and boys, not addressing the specific concerns of women and girls. If they are, coordinate and advocate with relevant actors to change these practices to promote balanced power between women, men, girls, and boys.

Identify ways in which your program can promote positive uses of power between women/men, boys and girls.

In trainings and program activities, explore power imbalance as the root cause of violence against women and balancing power as a solution.

Use an intersectional gender-power analysis to inform hiring and other practices within your organization (see more details in the section below "Starts with ourselves").

Principle 3

Start with ourselves

We cannot prevent violence against women and girls and address issues within communities that we are unwilling to address within ourselves. Prevention requires us to collaborate with the staff within our own organizations (including ourselves, the GBV teams, and everyone from cleaners to Directors) to examine how we uphold gender-power imbalances in our own lives and organizations, change harmful power dynamics, and ensure accountability for perpetrators of violence. It asks us to reflect critically on how to positively use our power with each other and with community members—recognizing the inherent power imbalances of the humanitarian system and the societal structures and systems that influence us— and to act accordingly.

WHAT DOES THIS PRINCIPLE LOOK LIKE IN ACTION?

Facilitate ongoing (weekly) reflection sessions, trainings, and other exercises with staff to strengthen their understanding of power (including negative and positive uses of power, systems of power, and oppression), help them to examine their own uses of power, and inspires positive uses of power and new ways of balancing power in their lives and work.

Demonstrate positive uses of power and balancing power between women and men within the workplace. For example:

- Staff at all levels communicate in a mutually respectful way.
- Supervisors and leadership model balancing power.
- Seek out and value the contributions of all staff members equally, no matter their position, gender, etc.
- Recognize ' 'staff's humanity first, before their productivity.

Take steps to balance power between staff and community members in both big and small ways. For example:

- Treat community members with equal respect, dignity, and worth. Value their contributions and ideas equally to your own.
- Appreciate the humanity in community members, engaging with them as people rather than as "beneficiaries," "target groups," or "subjects" of assessments. Get to know them. Take note of important occasions for them.
- Sit directly amongst community members, at the same level (i.e., if they use chairs, you use chairs, if they use the floor, you use the floor), during conversations and meetings.
- Pay attention to details such as the clothes you wear and cars you drive and how these may be symbols of power. Where possible, use local transportation to communities and dress appropriately to the community.
- Avoid giving more power to a dominant or oppressive group, either directly or indirectly, through your hiring and programming.

Take steps to hire female staff, post job listings or spread the word in spaces accessed often by women, make sure that qualifications do not exclude women, include women on hiring panels, consider how gender norms may affect women and men's participation in interviews and potential biases towards them, etc.

Invest time and resources into preventing sexual exploitation and abuse (PSEA) by staff. This includes conducting transformative power analysis and behavior change work with staff, setting up effective survivor-informed and survivor-centered reporting systems, investigation mechanisms, holding perpetrators accountable and building a culture of non-violence and balanced power.[10]

Photo: Louisa Gouliamaki/The IRC

[10] The current emphasis on preventing sexual exploitation and abuse (PSEA) from the humanitarian community is directly connected to prevention of VAWG. Though the terminology is different— to show that PSEA goes beyond VAWG/GBV programs and is a commitment of all agencies, regardless of the sectors you work in— PSEA is an embodiment of what it means to say that prevention starts with ourselves.

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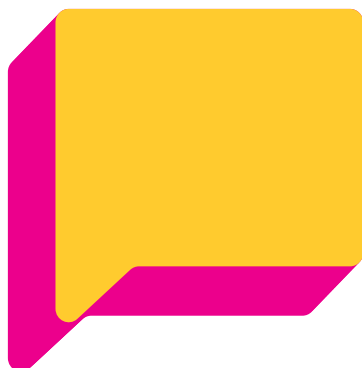
Principle 4

Center the voices, power, and agency of women and girls

Centering the voices of women and girls means making sure that those who are most impacted by violence against women and girls—i.e. women and girls themselves— play an active role in setting program priorities, identifying solutions and leading the initiatives meant to support them. It means taking the time to listen to women and girls, and more than that, trusting and valuing what they have to say, and uplifting their lived experiences in all areas of the humanitarian response. It means respecting where women are at, working with them to redefine needs and social issues on their terms and supporting their creative engagement and solutions.

WHAT DOES THIS PRINCIPLE LOOK LIKE IN ACTION?

Actively seek out and include women and girls in engagement with communities about your organization's programming, not only for VAWG but for all sectors.

Safely engage women and girls from diverse groups – do not make assumptions about how diverse women and girls want to be engaged. Always ask about participants' preferences to ensure diverse women and girls are comfortable and can safely participate.

Prioritize the recruitment of women as staff and volunteers.

Create opportunities for women to give feedback or contribute to programmatic discussions. Assess for and design multiple channels reflecting preferences voiced by diverse groups of women and girls as preferred to ensure inclusive feedback. Importantly close the loop by sharing back regularly how feedback has been incorporated or explain why such feedback could not be acted upon.

Ask women and girls discriminated against due to their socio-economic backgrounds, abilities, sexualities, gender identities and/or religious affiliations etc. what words they would like to be used to describe them.

Build spaces and activities for diverse women and girls to build collective solidarity with other women and girls.

Monitor feedback from diverse women and girls focusing on barriers and accessibility in referral systems and take action to remove barriers and increase access for diverse women and girls to multi-sectoral services.

Develop contingency plans and exit strategies with women and girls to avoid harm as well as sustain outcomes as prioritized by women and girls.

Progressively engage women and girls in the delivery of activities and services (e.g. women led safety audits) .

Elaborate with women and girls stakeholder analyses for different components of the project. In the case of partnerships vet potential partners with women and girls to identify potential red flags or determine the extent to which the partnership may serve to expand networks, resources and opportunities for women and girls.

Before engaging men and community leaders work with women and girls to determine key messages and the scope of engagement.

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Principle 5

Recognize, engage, and be accountable to women and girls experiencing multiple forms of discrimination

Ethnicity, race, sexual orientation, economic class, education level, displacement status, relationship status etc., influence women's experiences, beliefs, behaviors, and power differently. Violence against women is often experienced in combination with other forms of structural inequality and discrimination such as racism, ableism, homophobia, and transphobia. Examining how other forms of structural inequality and discrimination, as well the ongoing impacts of colonization intersect with gender inequalities to exacerbate violence is necessary to effectively address the root causes of violence against all women. Programs need to be designed in a way that recognizes this diversity of experience and power, strives to be equally inclusive, empowering, and accountable to all women and girls.[11] Remember that what works for preventing violence against women does not necessarily "trickle down" to girls; be careful not to let adolescent girls slip through the cracks and make sure prevention strategies address their specific needs and circumstances.

WHAT DOES THIS PRINCIPLE LOOK LIKE IN ACTION?

Seek the input and participation of women and girls using an intersectional lens. Create safe spaces for them to be able to speak openly, including separate spaces as necessary and appropriate.

Acknowledge that no single initiative will be equally relevant to all groups. This reinforces the need for multiple different, but mutually reinforcing, efforts which recognize power imbalances between diverse groups of women and girls and take steps to address them to ensure equal access and impact within your program.

Do not favor one group over another.

Be attentive to privilege and listen to the voices of women and girls who are the most excluded.

Ensure space for critical self-reflection regarding assumptions, biases and exclusionary behavior

Communicate in the local languages of women and girls, even when this requires materials and translations in multiple languages. Do not rely on use of colonial languages or a national language available only to those with formal education.[12]

Represent the diversity of women and girls in the images and discussions used in communication and program materials and ensure they also portray them positively

Identify strategies, in consultation with diverse women and girls, to overcome constraints to their participation in and access to aid delivery, services, or participation in activities (e.g., timing, location, safety of travel, and safety of activities).

[11] The GBV Emergency Preparedness and Response: Inclusion of Diverse Women and Girls Guidance Note supports the proactive inclusion of diverse women and girls GBV actors to examine actors to examine their own attitudes, skills, and knowledge, and to take concrete actions to reach and support diverse women and girls throughout GBV emergency preparedness and response programming.

[12] Power hierarchies are shaped and reinforced by language used within the humanitarian sector. For more information on language and recommendations on feminist informed inclusive and empowering language OPPORTUNITIES FOR TRANSFORMATIVE LANGUAGE WITHIN FEMINIST APPROACHES TO PARTNERSHIP

Principle 6

Reflect the specific context

While violence against women and girls is a problem across humanitarian crises, the way to address it varies according to context. Interventions may be grounded in common principles, ideas, and approaches while tailored to the specific communities where organizations are working. This requires an understanding of the factors contributing to violence against women and girls within each context and the ways in which violence, power imbalance, and related norms manifest. It includes understanding local customs and power dynamics, and such details as using local languages and images, culturally relevant references, etc. "Cultural" norms are often used to justify or minimize violence against women and girls within a given a context. It is critical to equip staff with the skills to navigate such discussions, supporting communities to recognize violence against women and girls as a violation of human rights that works to tear down rather than uphold the values of communities.

WHAT DOES THIS PRINCIPLE LOOK LIKE IN ACTION?

Communicate in the local languages and dialects of the areas where you are working, whether through translation or communication materials. Do not assume that what works in one community will work in another.

Use images in communication materials that are relevant to the context. Avoid colors that have a political connotation, symbols or images that represent harmful ideas, etc.

Pre-test communication materials before using them, to ensure that they resonate in that context.

Conduct a power mapping in the areas where you work to understand the specific dynamics at play.

Engage with women and girls in the community, as well as community leaders and representatives, before beginning any program activities.

Through mentoring and training, deepen staff and volunteers' understanding of the root cause of violence against women and girls, explore how the word "culture" is misused to justify and perpetuate VAWG, and how to address these justifications with community members.
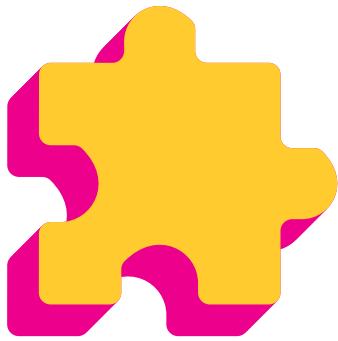
Principle 7

Work in solidarity with women's rights organizations, activists, and leaders

Before beginning any new initiative, it is critical to understand the efforts of women, girls and movements that existed before the arrival of humanitarian agencies and how they have been impacted by the crisis. Build relationships and find out how your efforts can align with and support those who are already working for the rights of women on the ground, rather than taking space away from them or implanting an agenda onto their work. Work with women's organizations and leaders to ensure that GBV prevention work 'does not directly or inadvertently perpetuate harmful power imbalances between women, girls and boys, men nor between international organizations and women's rights organizations. Value the experience of those who have come before you and those who will remain long after the humanitarian community has departed.

WHAT DOES THIS PRINCIPLE LOOK LIKE IN ACTION?

As much as possible, directly fund the work of local and civil society women's associations, organizations and activists working to prevent violence against women and girls, rather than through an intermediary INGO or UN Agency.

Engage with women's organizations, movement leaders, activists and existing initiatives in supportive ways that center their work and voices, beginning with the emergency assessment:

» Identify/ conduct a mapping of women's organizations, movement leaders, activists and initiatives that are already working as a priority upon outset of an emergency and learn as much as possible about their work prior to beginning programming.

» Request meetings with those identified to introduce yourself, introduce your organization, and learn about their priorities; include key representatives who are interested and willing in assessment through Key Informant Interviews (KIIs) and Focus Group Discussions (FGDs) as appropriate.

» Discuss the ways in which your organization and program might be able to support their priorities or further their work, and how you might complement it.

Include women's organizations, activists, movement leaders, etc. in coordination meetings and related initiatives.

Principle 8

Engage communities in ways that are meaningful, creative, and dynamic, asking questions rather than giving messages

Prevention is about more than training and endless cycles of awareness-raising. Change does not come from giving messages. Prevention requires meaningful engagement with community members in a way that provokes critical thinking, values their contributions, and encourages dialogue and exchange of ideas. It offers activities that spark peoples' interest, are creative, and even fun! While violence against women and girls is a grave issue, the way in which programs engage communities can feel inspiring, motivating, peaceful, and even enjoyable. This is what can help to bring about change.

WHAT DOES THIS PRINCIPLE LOOK LIKE IN ACTION?

Avoid one-off trainings and one-off awareness-raising sessions.

Engage women, men, girls, and boys in activities that are of interest for their age groups and genders. Use dynamic activities that do not depend on literacy or formal education.

Remember, activities can be fun!

Develop communication materials that are colorful, interesting, and can be used as tools for discussion or interactive activities, rather than just posters to be hung on a wall. Wherever possible, give space for community members to lead activities and discussions directly.

Use a variety of interesting and accessible formats, including visual materials that do not require literacy and easy-to-read fonts and text. Make them available in as many local languages as possible.

In communication materials and program activities, ask questions rather than simply giving messages e.g. "How do you think that violence against women affects your community?" Avoid endless cycles of awareness-raising by encouraging meaningful engagement, critical thinking, and exploration of ideas.

Make sure content evolves over time as community understanding shifts and the context evolves.

Approaches to prevention

Empowering women and girls

Risk mitigation
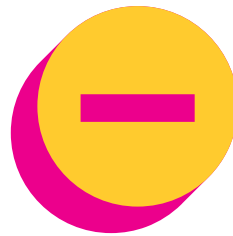
Deterrence and accountability
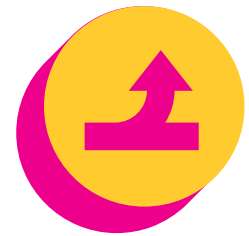
Long term behavior and norm change

Approaches to preventing VAWG in emergencies are still emerging and are largely understudied— particularly those strategies and methodologies deployed by local communities or informal groups. However, current efforts can be broadly categorized into four main approaches, described below. These approaches are not one-dimensional; there is an interplay between them, and specific strategies or methodologies may straddle more than one approach. The categorization of these approaches is based on synthesis of learning and experience in the field of VAWG prevention and is meant to offer a helpful starting point for thinking critically about how we can effectively reduce violence against women and girls in emergencies.

Not all these approaches will be used to the same extent in an acute emergency. Women and girls' empowerment is a foundational approach that is essential to VAWG programming in emergencies and featured as a foundational principle in the Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies. This means that it is fundamental to all humanitarian prevention efforts and therefore, a necessary building block for all other prevention approaches. Further details about how these approaches can be used within acute emergencies can be found in later sections of this document.

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Empowering women and girls

Efforts to empower women and girls aim to reduce violence by enhancing women and girls' control over their own lives and influence over the systems and institutions that affect them. Empowerment programs work to increase women and girls' voice, agency, and safety.

This has the potential for impact both in the immediate term and the medium to longer term, particularly when combined with other approaches. Empowering women and girls is a foundation to all other prevention work and therefore, a pillar of prevention programming.

Examples of Empowering Women and Girls Strategies:

» *Women and Girls' Safe Spaces*
» *Supporting social networks*
» *Fostering women's leadership and decision-making.*
» *Skills training and mentorship*
» *Increasing women's access and control over resources*
» *Facilitating women's collective action*
» *Supporting women's and girls' movements/ movement building and women and girl-led initiatives*
» *Survivor-centered response services (medical, psychosocial, legal, safety/ security)*
» *Community mobilization*
» *Cash assistance and livelihoods programming*

Risk mitigation

Risk mitigation strategies aim to reduce the likelihood of violence by addressing the factors that increase women and girls' risk of experiencing violence.

Risk mitigation puts measures in place to make it harder for men and boys to commit violence against women and girls. Like deterrence and accountability (see #3 below), it does not necessarily address the root cause of violence. Risk mitigation assumes that the threat of violence remains but makes it harder to act on.

It is common in humanitarian settings, particularly when GBV programs collaborate with other sectors, as outlined in the Inter-Agency Standing Committee (IASC) Guidelines for Integrating Gender-based Violence Interventions in Humanitarian Action.

Examples of Risk Mitigation Strategies:

» *Individual and collective safety planning*
» *Cash assistance*
» *Material assistance*
» *Safety audits and advocacy*
» *Firewood patrols and fuel-efficient stoves*
» *Separating latrines by sex, including doors with locks, etc.*
» *Locating services in areas that are safe for women and girls to access.*
» *Camp/area lighting at night*
» *Community safety initiatives that support the vision of women and girls, e.g. mixed-gender neighborhood watch groups*
» *Survivor-centered response services (medical, psychosocial, safety/security, legal)*
» *Activities and standards outlined in the IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action for each sector*

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Deterrence and accountability

Deterrence strategies work to discourage people from using violence by offering consequences or disincentives to using violence e.g. prison sentences, losing one's job, social sanctions, etc. These may come in the form of laws, policies, or social agreements that deter perpetrators from committing violence due to concerns about being held accountable and facing consequences.

Typically aimed at creating short-term or medium-term change, deterrence strategies curb behaviors based on externally motivating factors, rather than addressing the root causes of violence against women and girls and seeking transformative change from within. However, they can help to build a culture of non-violence that, when used alongside other strategies such as women and girls' empowerment and long-term behavior and norm change, may contribute to more lasting change. Examples of deterrence strategies include zero-tolerance policies for sexual exploitation and abuse, strong laws that criminalize VAWG, negotiations with armed actors to avoid violence in particular locations, etc.

Accountability is an active process and serves as the foundation of how prevention programming is designed, implemented and monitored. To transform gender and power inequality change must begin with program staff. Accountable practice occurs on two main levels: personal and relational. The process of personal accountability involves identifying, monitoring and challenging harmful personal attitudes, beliefs and behaviors related to gender. Only by exploring their own gender prejudices will prevention staff be equipped to support others in their own process of change. Relational accountability encompasses the ways that power and privilege play out in interactions between men and women. It requires prevention staff to examine how they work with others, recognizing their power and questioning whether they are exerting power over others. It focuses on nurturing allies for women and girls and continually reappraising prevention programming strengthening the voices and leadership of women.

Examples of Deterrence Strategies and Accountable Practice:
» *Legal advocacy and reform of oppressive, discriminatory local and national laws and policies that impact women and girls*
» *Creation of new laws as needed that sanction violence against women and girls*
» *Legal aid for survivors*
» *Strengthening consequences for perpetrators and justice for survivors*
» *Negotiating with armed actors for women and girls' safe unrestricted movement and access to services, or non-violence "corridors."*
» *Social agreements between potential perpetrators and community leaders/ community members that protect spaces and/or women and girls from violence (e.g. agreement to recognize religious institutions or schools as safe spaces).*
» *Zero-tolerance policies for VAWG within humanitarian organizations*
» *Ensuring prevention staff are prepared to challenge negative statements or ideas about women by addressing common resistance responses likely to be expressed through community engagement activities*
» *Strengthening movements/movement-building*
» *Checking in with women and girls regularly if they feel heard and valued through programming*
» *Taking steps to ensure the program is not complicit in systems of marginalization and exclusion that privilege certain socio-economic statuses, racial and ethnic groups, educational levels, abilities, sexual orientations and gender identities, religions*

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CASE STUDY #1: LEARNING FROM LOCAL WOMEN'S MOVEMENTS
Prevention Approach: Deterrence and Accountability

As the humanitarian sector increasingly looks to devise ways to further GBV prevention in conflict settings, it is prudent to learn from the actions of longer and well-established local women's movements.

Some of the most notable strategies employed by such movements are based on deterrence and accountability—women leverage existing relationships and sense of community to influence parties to a conflict and stall violence, negotiate humanitarian access, mediate between warring factions and sound early alarm at impending conflict. In this way, they have been able to bring about a reduction in violence through direct personal or community accountability rather than a transformational shift in gender-power attitudes and norms. In some cases, they actually use existing norms to foster credibility and trust in negotiating for protection of women, girls, and community members.

Examples of this include:

AISHA WAKIL IN NIGERIA OR 'MAMA BOKO HARAM':

Aisha Wakil, a woman who lives in Maiduguri in northeast Nigeria. She knew many of the Boko Haram terrorist group's fighters as children she had fed, cared for and nurtured before they were radicalized. She, therefore, retained a level of trust and respect from the fighters that neither the state, nor humanitarian actors could claim, or successfully manufacture. She used her knowledge to push for informal peace deals at community level, negotiate the release of hostages and in one instance prevent the bombing of a popular university.[13]

THE WOMEN'S MOVEMENT OF NORTHERN IRELAND:

At the height of the conflict in Northern Ireland in 1977, women organizers in Northern Ireland were awarded the Nobel Peace Prize for their non-sectarian demonstrations for peace and their skillful mediation between Protestant unionists and Catholic nationalists during the often 'violent marching season'- interventions that are acknowledged to have produced an almost rapid response mechanism to stave off violence between the security forces, the public and dissident groups.[14] Their mediation was possible because of existing relationships that could not be replicated by NGOs or other actors; this allowed them to discourage violence and appeal to a sense of community accountability to address urgent needs, rather than waiting for long-term attitudinal or behavior change.

Though these examples are not exclusively about preventing violence against women and girls, they offer valuable learning about the ways in which women have successfully engaged in reducing conflict, oppression, and violence and creating pathways to peace, that fall outside of traditional humanitarian program frameworks. They deepen our understanding of approaches to prevention, so that we can broaden our efforts as humanitarian organizations and better support existing movements and activists.

Deterrence and accountability approaches— which bring about changes in violence that are not predicated on attitude or norm change to reduce social tolerance or acceptance of violence against women and girls— have typically eluded humanitarian programs and are worth further exploration.

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[13] Oduah, C. (2020) 'Mama Boko Haram': One Woman's Extraordinary Mission to Rescue 'Her Boys' from Terrorism. The Guardian. https://www.theguardian.com/world/2020/jul/09/mama-boko-haram-nigeria-maiduguri

[14] Hunt, S.; Posa, C. (2001). "Women Waging Peace: Inclusive Security." Foreign Policy 124 (May/June 2001): 38-47.

Long-term behavior and norm change

Long-term behavior and norm change interventions focus on reducing violence by addressing the root cause of violence against women and girls, inspiring community members to change their behaviors and choose non-violence, and replacing harmful norms with new positive norms that promote non-violence. They focus on changing the attitudes, beliefs, and norms that uphold violence, thereby motivating more lasting change from within.

Such interventions require repeated engagement over the medium to long-term, and are most effective at changing norms when they work across the Ecological Model (see Appendix B).

Behavior change represents a type of individual-level change, while norm change represents a type of community-level change.

Examples of Long-term Behavior and Norm Change Strategies:

- » *Community mobilization programs to transform power imbalance between women and men, girls, and boys*
- » *Social norm change programming (e.g. SASA!, Tostan)*
- » *Individual behavior change programs (training and mentoring the same group of people over time) (e.g. Engaging Men in Accountable Practice (EMAP) by IRC).*
- » *Behavior Change Communication (BCC)/ Communication for Development (C4D) programs/ Behavior change programs (e.g. Communities Care by UNICEF)*
- » *Economic empowerment programs combined with transformative gender-power programming (e.g. EA$E)*

A specific evidence-based scale of injunctive norms and personal beliefs about Gender Based Violence specific to humanitarian settings has been developed and should be used by programs preventing VAWG. The scale can be found here.

CASE STUDY #2: USING SASA! IN HUMANITARIAN SETTINGS
Prevention Approach: Long-term Behavior and Norm Change

Photo: SASA!

SASA! is a community mobilization approach to prevent violence against women (VAW) and HIV, developed by Raising Voices in Uganda (www.raisingvoices.org) that has demonstrated community-level impacts on preventing intimate partner violence against women and reducing social acceptability of violence. It is a long-term behavior and norm change approach.

Although SASA! was originally designed for a development context, organizations are beginning to adapt and implement SASA! in humanitarian settings around the world, following its success in creating transformational change in a variety of contexts. According to a recent briefing paper on implementing SASA! in humanitarian settings, it is up to each organization to decide if and when to implement SASA! However, there are crosscutting questions and specific factors to consider at each phase of the emergency to help make that decision (see **Figure 1** Below) "Although Stabilization is generally considered the most appropriate time for beginning SASA! implementation, aspects of the methodology can also be integrated during the Emergency Stage, such as integrating SASA! materials alongside standard trainings on gender and protection."[15]

SASA! is well-known for its creative activities and well-designed communication materials that align carefully with Stages of Change theory and grounded in a strong feminist analysis of power. Therefore, though acute emergencies may not be the most appropriate time to begin SASA! programming in communities, many organizations draw upon its materials for use with their own teams or within their other program work.[16]

[15] Raising Voices (2018). Implementing SASA! in Humanitarian Settings: Tips and Tools Programming for Prevention Series, Brief. No. 6, Kampala, Uganda

[16] The second edition of SASA! entitled SASA! Together was launched in February 2020. Though the methodology has been updated, the essential components remain the same. SASA! Together can be found on the Raising Voices website at: https://raisingvoices.org/sasatogether/

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CASE STUDY #2: USING SASA! IN HUMANITARIAN SETTINGS
Prevention Approach: Long-term Behavior and Norm Change

Figure 1

CROSS-CUTTING CONSIDERATIONS

» Is there a team available with sufficient time to implement SASA!?*
» Are financial resources in place for at least the 18 months of programming?*
» Is there leadership buy-in at NGO and community levels?*
» Is a GBV management and referrals systems in place (with available services)?
» Can the "Do No Harm" principle be upheld?*

SPECIFIC CONSIDERATIONS AT DISTINCT PHASES OF CONFLICT

EMERGENCY

» Are staff trainings on gender being conducted or planned?*
» Can community members and staff move safely in the community/ camp?*
» Can SASA!? Partnerships be formed as humanitarian infrastructure resources in place for at least the 18 months of programming?*

RECOVERY

» Is repatriation likely and is there likely to be continued programming in the country of origin?
» Are community stabilization programs being introduced?
» Are there efforts to transition to development activities?

STABILIZATION

» Are community-based structures in place (and available to participate in programming)?
» Is a central knowledge management system available?
» Are longer-term interventions being implemented or planned?

It is advised to refrain from implementing SASA! If you can't answer "yes" to these questions

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Applying prevention approaches in acute emergencies

In an acute emergency, prevention generally focuses on the first three approaches, due to the urgency of needs and fragility of the situation:

Women and girls' empowerment

Risk mitigation

Deterrence and accountability

Women and girls' empowerment and risk mitigation are most common for humanitarian programs in an acute emergency, while deterrence and accountability strategies may be more common to local activists and women's movement leaders at this stage than humanitarian programs. Some deterrence and accountability strategies may be more relevant during an acute emergency than others (e.g. negotiating safe humanitarian corridors might be more applicable than substantial legal reform). Engaging in long-term behavior and norm change with communities is not recommended in the acute emergency phase.

However, long-term behavior and norm change can and should begin within your own team and organization from the outset of an emergency (see "Getting Started" below for details).

In addition, you may begin to learn about the attitudes and norms that shape gender-power relations through emergency assessments and ongoing engagement with community members in an acute emergency. Organizations are encouraged to incorporate core concepts and materials for long-term behavior and norm change towards VAWG prevention in trainings and activities at all stages of an emergency.

Multiple approaches that evolve over time

In acute emergencies, it is important to identify what actions can be taken to reduce violence against women and girls right now, and what are the steps needed to build a foundation for future change. Evidence suggests that the breakdown in social structures and norms caused by emergencies may create space to build new positive norms, including in the roles and power dynamics between girls, women, boys, and men.[17] In addition, acute emergencies may progress into protracted crises (depending on varied factors), which creates space to build off of acute interventions with longer-term actions. Therefore, multiple approaches and strategies will be relevant and appropriate as the situation unfolds.

Key elements of effective prevention strategies

Within each prevention approach, there are different strategies and methodologies that can be used to prevent violence against women and girls. These strategies may look different in different contexts, yet share common elements to effective prevention strategies within each approach. Understanding these will help organizations to consider which approaches they are able to implement most effectively to create an impact during the acute emergency and beyond.

[17] For more information, see: Read-Hamilton, S. & Marsh, M. (2016) The Communities Care programme: changing social norms to end violence against women and girls in conflict-affected communities, Gender & Development, 24:2, 261-276, DOI:10.1080/13552074.2016.1195579

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Applying prevention approaches in acute emergencies

Empowering women and girls

SAMPLE STRATEGIES

» Women and Girls' Safe Spaces
» Supporting social networks for women and girls
» Fostering women's leadership and decision-making
» Skills training and mentorship
» Increasing women's access and control over resources
» Collective action
» Supporting women's and girls' movements/movement building and women and girl-led initiatives
» Survivor-centered response services (medical, psychosocial, legal, safety/security)
» Community mobilization
» Cash assistance and livelihoods programming

KEY ELEMENTS OF EFFECTIVE STRATEGIES

» Ensure that women have access to women-only spaces and girls have access to girls-only spaces (in particular adolescent girls).
» Recognize multiple types of empowerment— social, economic, physical/sexual, political, individual, collective etc.— and are clear in purpose
» Foster' power within' women and girls
» Use an assets-based approach
» Do not stigmatize survivors and use survivor-centered approaches
» Led by women and girls from the community
» Reflect the best practice principles of prevention and related international standards

APPLICABLE IN AN ACUTE EMERGENCY?

Yes. Empowering women and girls' is essential from the onset of an emergency.
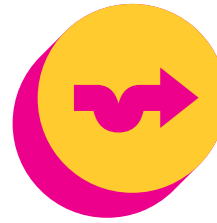
Risk mitigation

SAMPLE STRATEGIES

» Individual and collective safety planning
» Cash assistance
» Material assistance
» Safety audits and advocacy
» Self-defense training
» Firewood patrols and fuel-efficient stoves
» Separating latrines by sex, including doors with locks, etc.
» Locating services in areas that are safe for women and girls to access.
» Camp/area lighting at night
» Community safety initiatives that support the vision of women and girls, e.g. mixed-gender neighborhood watch groups
» Survivor-centered response services (medical, psychosocial, safety/security, legal)
» Activities and standards outlined in the IASC Guidelines for each sector

KEY ELEMENTS OF EFFECTIVE STRATEGIES

» Address known risks to women and girls as prioritized by women and girls
» Is the responsibility of multiple sectors
» Addresses multiple types of violence
» Does not cause further harm to women and girls
» Addresses the distinct risks girls and adolescent girls face as well as the risks that women face
» Community-led and reflects the best practice principles of prevention, the IASC GBV Guidelines, IASC Minimum Standards, and other related international standards.

APPLICABLE IN AN ACUTE EMERGENCY?

Yes. Risk mitigation is essential from the onset of an emergency, across sectors.

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Deterrence and accountability

SAMPLE STRATEGIES

» Legal advocacy and reform of oppressive, discriminatory local and national laws and policies that impact women and girls
» Creation of new laws as needed that sanction violence against women and girls
» Legal aid for survivors
» Strengthening consequences for perpetrators and justice for survivors
» Negotiating with armed actors for women and girls' safe unrestricted movement and access to services , or non-violence "corridors."
» Social agreements between potential perpetrators and community leaders/ community members that protect spaces and/or women and girls from violence (e.g. agreement to recognize religious institutions or schools as safe spaces).
» Zero-tolerance policies for VAWG within humanitarian organizations
» Strengthening movements/movement-building

KEY ELEMENTS OF EFFECTIVE STRATEGIES

» There is sufficient concern about the consequences to deter behavior
» May rely on social agreements negotiated by members of the same community, or strong laws that are well-enforced
» There is consistent application of and acceptance for the deterrence and accountability mechanism that it is credible
» Community-led and reflects the best practice principles of prevention

APPLICABLE IN AN ACUTE EMERGENCY?

Yes. Some deterrence and accountability strategies may be applicable from the outset of an emergency, e.g. negotiating with parties to a conflict for safe corridors for women and girls or instituting zero -tolerance policies for sexual exploitation and abuse.

However, others may be less relevant during the acute emergency phase. For example, in some cases, long-term legal reform may not be possible in an acute emergency, while ensuring medical care and psychosocial support for survivors may be prioritized over legal aid.
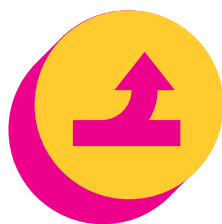
Long-term behavior and norm change

SAMPLE STRATEGIES

» Community mobilization programs to transform power imbalance between women and men, girls, and boys
» Social norm change programming (e.g. SASA!, Tostan)
» Individual behavior change programs (training and mentoring the same group of people over time)
» Behavior Change Communication (BCC)/ Communication for Development (C4D) programs/ Behavior change programs (e.g. Communities Care by UNICEF and Engaging Men in Accountable Practice (EMAP) by IRC).
» Economic empowerment programs combined with transformative gender-power programming (e.g. EA$E)

KEY ELEMENTS OF EFFECTIVE STRATEGIES

» Work at multiple levels of society, across the Ecological Model
» Transform harmful power dynamics between women and men, girls, and boys.
» Uses a benefits-based approach- helping to create positive new norms to replace harmful norms and focusing on the benefits of non-violence
» Differentiates between strategies that create individual-level change (behavior change amongst specific individuals) vs. community-level change (changes in norms that can be measured beyond individuals and result from widespread diffusion of ideas)
» Incorporates accountability mechanisms to women and girls
» Community-led and reflects the best practice principles of prevention

APPLICABLE IN AN ACUTE EMERGENCY?

Only partially. This approach is not recommended with communities during the acute emergency stage. However, it is essential to begin this approach with staff from the onset of an emergency. It is also possible to lay the groundwork for future initiatives by learning about existing norms and behaviors, establishing relationships, developing materials, etc.

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Getting started: step-by-step

Below is a summary of some important steps for beginning prevention programming in an acute emergency. These steps are just a summary; designing a prevention strategy will involve intensive and dedicated effort with your team. Keep in mind that every program will need to develop its own strategy and content according to the unique situation where the program is operating.

STEP 1
ENSURE THAT ADEQUATE RESPONSE AND REFERRAL SYSTEMS ARE IN PLACE FOR SURVIVORS BEFORE BEGINNING PREVENTION ACTIVITIES.

STEP 2
BEGIN A SYSTEMATIC, ONGOING PROCESS OF REFLECTION AND TRAINING FOR ALL STAFF AND VOLUNTEERS TO TRANSFORM POWER DYNAMICS WITHIN YOUR OWN LIVES AND ORGANIZATION.

STEP 3
LEARN ABOUT 'WHAT IS HAPPENING' DIRECTLY FROM WOMEN AND GIRLS, INCLUDING WOMEN'S COMMUNITY AND MOVEMENT LEADERS.

STEP 4
DESIGN YOUR PREVENTION STRATEGY.

STEP 5
DEVELOP PROGRAM CONTENT, INCLUDING EFFECTIVE COMMUNICATION MATERIALS.

STEP 6
COORDINATE WITH THE GBV SUBCLUSTER/ WORKING GROUP/ TASK FORCE ON UPTAKE OF THE GUIDELINES FOR INTEGRATING GBV INTERVENTIONS IN HUMANITARIAN ACTION AND INTER-AGENCY MINIMUM STANDARDS FOR GBV IN EMERGENCIES PROGRAMMING ACROSS THE HUMANITARIAN RESPONSE.

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Ensure that adequate response and referral systems are in place for survivors before beginning prevention activities.

It is critical that there is a clear system in place for responding to survivors who disclose violence before beginning prevention activities. Make sure that staff and volunteers conducting emergency assessments know how to respond appropriately to reports of violence.

THIS STEP INVOLVES ACTIONS SUCH AS:

» mapping existing services for survivors (medical, psychosocial, safety/security and legal services)

» developing or adapting clear referral protocols between service providers, based on common guidelines, if they do not exist already.

» coordinating and advocating with other sectors and service providers.

» in places where services do not exist, evaluating the feasibility of services by humanitarian actors, and decide what, if anything, can be done effectively without causing harm.

» training staff and volunteers on first-line support and existing referral pathways[18].

» supporting training of service providers as needed to strengthen survivor-centered support.

Begin a systematic, ongoing process of reflection and training for all staff and volunteers to transform power dynamics within your own lives and organization.

Prevention begins with ourselves. It is essential that prevention work begin within humanitarian organizations, before or alongside working towards change within communities. This is not solely the responsibility of VAWG or GBV staff but is a core responsibility of the organization to be driven by leadership. This needs to start at the outset of an emergency, so that staff and organizations do not replicate harmful power dynamics in their work nor perpetuate violence against women and girls and can model positive uses of power. It is important that the process be well-structured and incorporated directly into program workplans, rather than added as an optional activity. Incorporating anti-oppressive practice in a supportive manner that acknowledges the constraints and stress that staff and volunteers face in acute emergencies is important.

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[18] For further guidance on response and referral systems, refer to the Inter-Agency Minimum Standards for Gender Based Violence Programming in Emergencies

Getting started: step-by-step

It is encouraged to:

WORK WITH ALL STAFF AND VOLUNTEERS WITHIN THE ORGANIZATION.

This includes everyone from organizational leadership and managers to guards and cleaners. It is critical that everyone understand how their use of power connects directly to the organization's work in the community and takes personal responsibility for using their power positively. Prioritize staff and volunteers in locations where VAWG programming is being set up and avoid focusing on long, multi-day trainings during an acute emergency. Instead, include exercises to understand positive and negative uses of power into already mandatory induction processes such as staff orientation, prevention of sexual exploitation and abuse (PSEA) training, codes of conduct signing, and staff meetings. Include follow up exercises in various staff processes, meetings, workshops, etc. Conduct more intensive workshops with VAWG staff.

USE DYNAMIC, INTERACTIVE EXERCISES.

Draw on existing creative exercises from prevention or related methodologies that help to explore the meaning of power, what it means to use power positively and negatively, analyze power imbalance as the root cause of VAWG, and address power imbalances in your work.[19] Interactive exercises that ask critical questions will help to go deeper than using PowerPoint or lecture.

INCLUDE REFLECTION EXERCISES AND SMALL ACTIVITIES DIRECTLY INTO WORKPLANS.

Prevention work with VAWG teams is not an optional add-on, it is fundamental to our commitments as humanitarians. Therefore, it must be included into our workplans— and can divided into short exercises over time rather than waiting for one lengthy training— as a core commitment of our work.

ENSURE THAT THE ORGANIZATION SETS UP CLEAR, ACCESSIBLE, SURVIVOR-CENTERED REPORTING CHANNELS FOR CASES OF VIOLENCE PERPETRATED BY STAFF.

This is essential to all humanitarian organizations regardless of whether they work directly on GBV prevention within the community. It includes violence against women staff members as well as violence against women and girls in the community. Organizations are expected to have their own policies and procedures for preventing sexual exploitation and abuse (PSEA), in line with international standards.

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[19] There are many excellent resources that offer creative activities for working with staff to explore power and prevent violence against women and girls. It would be impossible to name them all here. SASA!/ SASA! Together (Raising Voices: https://raisingvoices.org/sasatogether/), Get Moving! (The GBV Prevention Network: https://raisingvoices.org/innovation/creating-methodologies/get-moving/) and In Her Shoes (The GBV Prevention Network: https://raisingvoices.org/innovation/creating-methodologies/in-her-shoes/) are good starting points, while many others may be relevant and useful in your context.

EMPOWER

Learn about 'what is happening' directly from women and girls, including women's community and movement leaders.

Before designing new program strategies, take the time to learn about both the formal and informal ways that individuals and communities are working to keep women and girls safe from violence. Listen directly to women and girls about their priority concerns, the risks they face, their sources of support and strength, and hopes and ideas. Include this into emergency assessments and continue efforts to listen and connect throughout the life of the program.

Assessment tools can be used to learn about what is already happening in the areas where you work and inform program design. The tools provided in this resource package are designed to center the voices of women and girls. Beyond the assessments, try to speak openly with women and girls whenever you are in the community, focusing on listening to their ideas and thoughts, encourage colleagues from other sector programs to do so, and find other ways to meaningfully with women and girls.

THROUGH THESE ASSESSMENTS AND CONNECTIONS, YOU MAY LEARN ABOUT THE FOLLOWING AND MORE:

» What actions women, women's organizations and communities are already taking to keep women and girls safe. These may be organized efforts such as women's safe spaces, neighborhood watch groups or something else, or they may be informal, e.g. local leaders (women, religious leaders, etc.) negotiating with armed actors to allow for safe refuge of women and children in particular locations.

» What is working and why it works. What is not working and why it is not working.

» What risks, challenges, and types of violence women and girls experience, and where they go for support or comfort when they have a problem.

» Differences in risks and types of violence experienced by girls, adolescent girls, and women. Differences in where and how they seek support.

» Priorities of girls, adolescent girls, and women. How their priorities may differ.

» What kinds of challenges women's leaders, activists and women's organizations are facing.

» What, if any, support is needed to keep existing initiatives going.

» How new efforts might complement those that are already in place and help to fill in gaps. How to make sure that new activities do not disrupt those that are already helping to keep women and girls.

Design your prevention strategy.

Developing a prevention strategy requires understanding the different approaches to prevention, identifying when and how to apply each within your context, and ensuring that the principles of prevention are embedded into the process. Designing a prevention strategy is best done using participatory methods with your team. Consider facilitating a design workshop, which may be conducted over approximately two days, or spread out into smaller sessions, depending on your context. Use **Appendix B** to support your design.

During your design session:

REVIEW LEARNINGS

Review what you have learned from assessments and experience on the ground and note the key highlights (see **step #3** and **assessment tools**).

REVIEW PREVENTION APPROACHES

Review the four approaches to prevention: women and girls' empowerment, risk mitigation, deterrence and accountability, and long-term behavior and norm change.

ASK KEY QUESTIONS

For each prevention approach, discuss key questions such as the following:

» What is already happening in terms of this approach?

» What are the priority concerns identified by girls/ adolescent girls and women in this area?

» What else did you learn from women and girls in relation to their risks, supports, and opportunities?

» What still needs to be addressed in this area?

» What contributions could your program make to prevention within this approach?

» What might this look like?
  ▪ Can this be done safely and effectively?
  ▪ How can the program ensure upholding the Prevention Principles?
  ▪ How could the program support 'what is already happening without disrupting it?

» How can you leverage support for prevention programming?

» What obstacles or blockages do you anticipate to prevention programming? What might you do to overcome these challenges?

BRAINSTORM ACTIONS

Brainstorm various actions for each approach, including what has worked in the given context, strategies that have worked elsewhere and might be adapted, specific activities and methodologies, and innovative ideas.

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IDENTIFY AND EXPLORE THEORIES

Clearly identify and explore the theories that underpin these actions, i.e. why do you believe the strategy will create change? What theory or idea is the strategy based upon (e.g. Stages of Change theory, social norms theory, diffusion of ideas, deterrence theory, etc.)? Use **Appendixes A** and **B** to support your thinking.

DRAFT STRATEGY

Draft strategy or strategy outline to be completed in detail later. Include:

» the prevention approaches that will be used and specific actions and methodologies for each.

» theories underlying the belief that this will bring about change.

» specific activities and materials that are needed to implement each strategy

» prevention work that will be done within the organization

» what will be monitored and measured

» ideas about how this might evolve over time.

Prevention strategies in emergencies may evolve over time as the situation evolves. It is important to revisit your strategy at regular intervals to ensure that it meets the changing needs. Programming might look different during the acute emergency than it does at later points, and some initial steps may lay important groundwork for different actions down the line.

Photo: The IRC

Develop program content, including effective communication materials.

One of the most common gaps in humanitarian programming is lack of effective and engaging program content, beyond trainings or formal curricula, which are accessible to a wide range of people in a variety of formats. Creative communication materials and tools help staff and volunteers to engage community members and stakeholders in dynamic, participatory, fun, and thought-provoking activities. This may include things such as picture cards, visual posters, and comic books with discussion questions, games, interactive activities, dramas and role plays, radio programming, etc. that do not require a high-level of literacy and pique peoples' interest. When designing a prevention strategy, identify the content needed to effectively implement each strategy at various stages and develop that content as a team in cooperation with designers/artists and others.

» Content varies according to who you are trying to engage (e.g. a PowerPoint presentation may be appropriate for government officials but not for community members, while the reverse might be true for a comic book), as well as what is the purpose of that engagement and how often you've engaged that same group.

» Content for long-term change will evolve over time.

» It is helpful to employ the support of artists' and designers in developing program materials.

» Use principles of effective communication to ensure dynamic engagement with communities.[20]

» Translate materials into as many local languages and easy-to-use formats as needed to most effectively reach community members.

» Be sure to rapidly pre-test communication materials with women, girls, and community members, before using them widely.

Coordinate with the GBV Subcluster/ Working Group/ Task Force on uptake of the *Guidelines for Integrating GBV Interventions in Humanitarian Action* and *Inter-Agency Minimum Standards for GBV in Emergencies Programming* across the humanitarian response.

Preventing and responding to violence against women and girls is embedded into humanitarian standards and cuts across all sectors. Therefore, even those organizations and agencies who do not have explicit GBV programs are responsible for mitigating the risk of GBV and empowering women and girls' in their work. These standards are clearly laid out, per sector, in the key documents noted. Work with the coordination group within your context to ensure the guidance is rolled out and minimum standards applied and upheld.

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[20] Examples of principles for developing effective communication materials can be found from various sources. The following is suggested as a starting point: Raising Voices (2008). How to Develop Communication Materials. SASA! Activity Kit for Preventing Violence Against Women and HIV. https://raisingvoices.org/wp-content/uploads/2013/03/downloads/Sasa/SASA_Comm_Mats/StartCommunicationMaterials/Start.CM.HowtoMakeCMs.pdf

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There are significant challenges to working in acute emergencies and specifically to preventing violence against women and girls in such contexts. Evidence shows that prevention *is* possible, but it is important to understand the challenges and how they may affect prevention programming.

Insecurity and general threat of violence

Safety of staff and community members is the highest priority for organizations working in acute emergencies. Insecurity and the threat of violence cause challenges to ensuring safety, affect the continuity of services and the types of strategies that are appropriate and effective in that context.

Meeting basic needs

In acute emergencies, women may be struggling to meet the basic needs of themselves and their families. Risk of violence increases when families cannot meet their basic needs, while simultaneously, women are unlikely to prioritize violence as an issue in their lives if basic needs are not being met. This can make prevention programming particularly sensitive. It is critical to collaborate across sectors to support women and girls to be able to meet their basic needs, while continuing to provide essential VAWG services.

Lack of evidence, methodologies, and understanding of pathways to change for prevention specific to emergencies

Much of the evidence that exists for preventing violence against women and girls focuses on non-emergency contexts, with a significant amount focused on intimate partner violence (IPV) and long-term behavior change or norm change. There is limited evidence of effective prevention methodologies from emergency contexts, for multiple forms of VAWG beyond IPV, and for prevention that is not based on long-term behavior and/or norm change. There is a need for greater investment, and practice-based learning around prevention specific to emergencies.

Meeting the needs of adolescent girls

Across humanitarian services adolescent girls continue to fall through the cracks, not fitting in squarely with children nor women, and/or having diverse needs and wishes than those groups. In addition, evidence of what works for preventing violence against women has not often been measured specifically with adolescent girls and vice-versa, and evidence does not currently suggest that positive prevention outcomes for violence against women will necessarily trickle down to girls.

Assumptions that awareness-raising means prevention and that change comes from "sensitizing" or "educating" others

Evidence shows that awareness-raising is not an effective strategy for preventing violence against women and girls. If used in conjunction with a deeper strategy, awareness-raising can be a *component* of VAWG prevention, but actions must move beyond awareness in order to be effective. In addition, awareness-raising in humanitarian contexts tends to focus on giving messages rather than asking questions, which is based on an assumption that simply giving information leads to change, and "sensitizing" others, misrepresenting community members as passive recipients in need of educating, rather than active individuals engaged in critical thinking and action for their own communities. 'It is important for humanitarian organizations to move beyond the tendency to rely primarily on raising awareness and sensitization and start looking more critically at pathways to change. Understanding the differences between prevention approaches, the best practice prevention principles, feminist programming and theories and experience about what drives change, can help to design more effective strategies.

Lack of experience designing effective communication materials and using creative materials and activities

Humanitarian agencies rely heavily on familiar methods such as training and focus groups, and semi-structured or unstructured dialogues. Few programs effectively create and develop effective communication materials and interactive activities based on communication for change principals as well as violence prevention principles. Materials themselves often reinforce harmful social norms by featuring images of violence against women and girls and negative stereotypes, rather than promoting positive new norms, and focus ineffectively on giving messages rather than asking questions that provoke critical thinking.

Confusing individual change and norm change

Humanitarian agencies often conflate efforts to promote individual change with efforts to change norms. These are distinct types of change that have different pathways to reaching their goal and require different strategies. Interventions that focus on changing the knowledge, attitudes and behaviors of specific individuals (e.g. the same group of people trained over time), work towards individual-level change. Norm change interventions work to change the unwritten rules that are guiding behaviors (e.g. the acceptability of violence against women and girls), and create a critical mass shift in behavior towards non-violence, that is not limited to specific individuals. Understanding the types of changes organizations are aiming to achieve within a particular approach can help to develop more effective strategies to that end.

Lack of understanding of multiple theories of behavior change

The humanitarian community operates on many assumptions about behavior change. Few interventions are grounded in real theories and evidence of behavior change. Those that are grounded in behavior change theory are often based on a similar idea: that it is necessary to change attitudes and beliefs to change behaviors. The alternative approach to behavior change is seen as risk mitigation. Therefore, VAWG prevention work tends to jump from risk mitigation—such as installing lighting and separating latrines— to long-term behavior change efforts based on transforming personal beliefs. This skips over other pathways to prevention that may exist, particularly in emergencies. There is significantly less understanding of alternative pathways to behavior change, e.g. behaviors that change before norms change, or before attitudes and beliefs catch up. Greater research and exploration into this area could lead to important insights for the field.

Access to and continuity of services

Insecurity or natural disaster can severely restrict access to communities affected by crisis. Remote programming makes it challenging to maintain continuity of services, relationships and engagement, which affects the types of prevention programming an organization can ethically implement.

Insufficient time and resources

Long-term prevention strategies may require time and resources that go beyond an acute emergency phase. At the same time, acute emergency program cycles often do not allow funding and resources to account for programming beyond 6-months, leaving VAWG programs in an ongoing fundraising and planning cycle that make effective prevention programming a challenge. In addition, the need to quickly hire staff and the intensity of work in an acute emergency, make it difficult to engage in comprehensive processes with staff, to support their own journeys of change and capacity building around VAWG prevention.

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For further exploration

Prevention of violence against women and girls is possible. But approaches to prevention in acute emergencies remain largely understudied and understood. Much of the evidence that exists within the broader field of VAWG prevention comes from non-emergency contexts and/or focuses on intimate partner violence. There is still a great deal to learn about emergency contexts, pathways to change, and prevention of multiple types of VAWG. Some of the areas that would be most relevant for further exploration that could contribute to taking our understanding of what works to prevent violence against women and girls to the next level include the following (this is not an exhaustive list, but highlights some key areas for exploration):

» Pathways to changing behaviors before changing norms or attitudes.

» Preventing transactional sex

» Preventing sexual exploitation and abuse from humanitarian actors (what really works?)

» Negotiating with armed actors; creating "violence-free" corridors as we do "humanitarian corridors"

» Connections between humanitarian programming and movement-building

» How pathways to prevention differ for violence against girls and adolescent girls than for violence against women

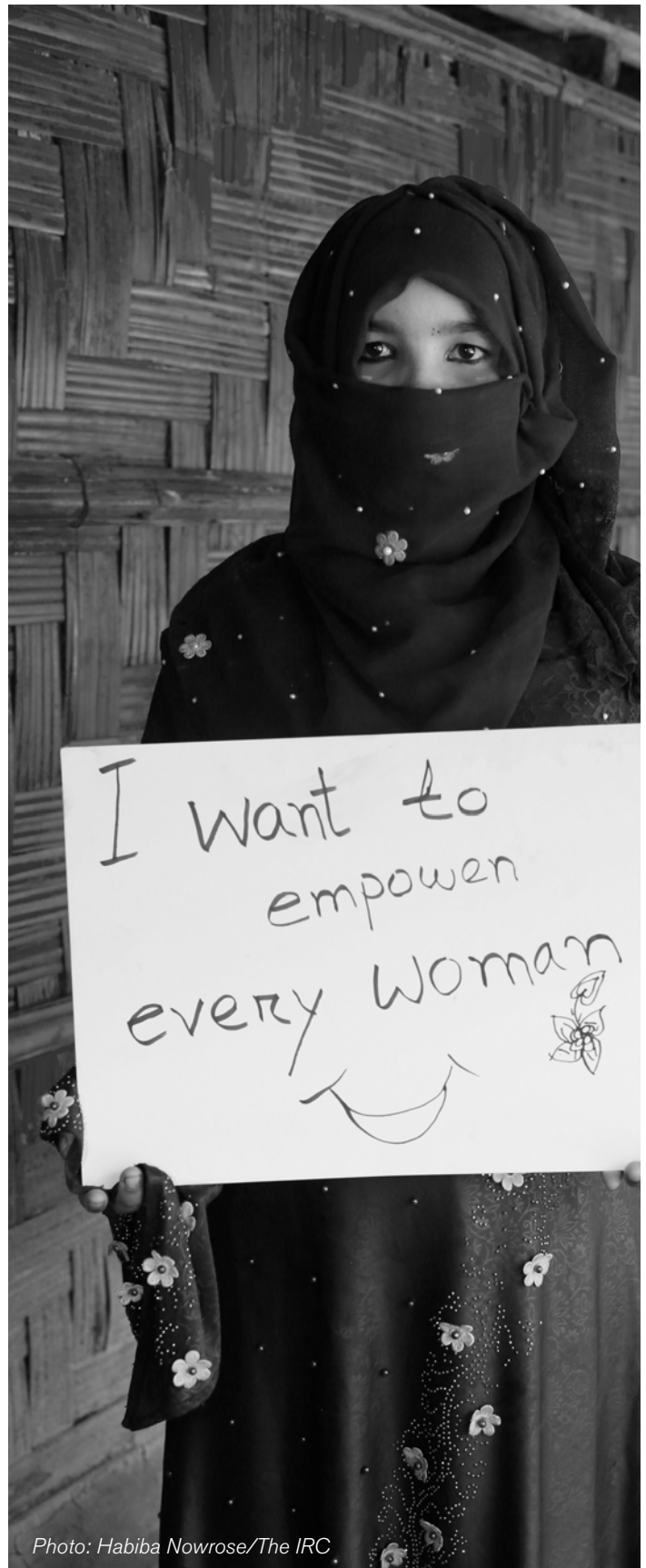» Building a culture of positive power and non-violence within the humanitarian system

Photo: Habiba Nowrose/The IRC

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Abramsky, T., Lees, S., Stöckl, H. et al. (2019) *Women's income and risk of intimate partner violence: secondary findings from the MAISHA cluster randomised trial in North-Western Tanzania.* BMC Public Health 19, 1108 doi:10.1186/s12889-019-7454-1

Amin, S., Khan, T., Rahman, L., Naved, R.T. (2013). *Mapping violence against women in Bangladesh: A multilevel analysis of Demographic and Health Survey data,* Dhaka, Bangladesh.

Bates, L.M., Schuler, S.R., Islam, F. and Islam, K. (2004). *Socioeconomic factors and processes associated with domestic violence in rural Bangladesh,* International Family Planning Perspectives, 30, 190-199.

Batliwala, S., Pittman, A. (2010). *"Capturing Change in Women's Realities: A Critical Overview of Current Monitoring & Evaluation Frameworks and Approaches".* The Association for Women's Rights in Development (AWID). http://www.awid.org/About-AWID/AWID-News/Capturing-Change-in-Women-s-Realities

Bhuvanendra, D., Holmes, R. (2014). *Preventing and responding to gender-based violence in humanitarian crises.* https://assets.publishing.service.gov.uk/media/57a089b2ed915d3cfd0003a8/GBV_in_emergencies_NP_77_web.pdf

Blackwell, A., Casey, J., Habeeb, R., Annan J., Falb, K. (2019) *Women's status and qualitative perceptions of a cash assistance programme in Raqqa Governorate, Syria,* Gender & Development, 27: 2, 253-271, DOI: 10.1080/13552074.2019.1624047. https://www.rescue-uk.org/sites/default/files/document/1943/p856ircsyriacashtransfersreportlr.pdf

Building Local Thinking Global (BLTG) (2019). *GBV Emergency Response and Preparedness. Inclusion of diverse women and girls guidance note.* International Rescue Committee. https://gbvresponders.org/wp-content/uploads/2021/01/IRC-Inclusion_Guidance-ENG-screen.pdf

Building Local Thinking Global (BLTG) (2020). *GBV Emergency Response and Preparedness Opportunities for transformative language within feminist approaches to partnership.* International Rescue Committee. https://gbvresponders.org/wp-content/uploads/2021/01/IRC-Language_Paper-ENG-screen.pdf

Center for Disease Control and Prevention (2017). *Connecting the dots: Exploring the Overlaps between multiple forms of violence and working towards collaborative prevention.* https://vetoviolence.cdc.gov/apps/connecting-the-dots/content/home

Coalition of Feminists for Social Change (COFEM) (2018). *Feminist Approaches to Building Knowledge and evidence on GBV,* Feminist Pocketbook Tip Sheet 5, 2018. https://cofemsocialchange.org/wp-content/uploads/2018/11/TS5-Feminist-approaches-to-building-knowledge-and-evidence-on-GBV.pdf

Cross, A., Manell, T., Megevand, M. (2018). *Humanitarian Cash Transfer Programming and Gender-based Violence Outcomes: Evidence and Future Research Priorities.* Women's Refugee Commission and the International Rescue Committee. https://reliefweb.int/report/world/humanitarian-cash-transfer-programming-and-gender-based-violence-outcomes-evidence-and

Department for International Development (2012). *DFID Guidance Note 1: A Theory of Change for Tackling Violence against Women and Girls.* United Kingdom Department for International Development. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/67336/how-tonote-vawg-1.pdf

Falb, Kathryn; Hossain, Mazeda; Kabeya, Rocky; Koussoube, Estelle; Lake, Milli; Lewis, Chloe; Pierotti, Rachael S.; Roth, Danielle; Vaillant, Julia (2020). *Engaging Men to Transform Gender Attitudes and Prevent Intimate-Partner Violence in the Democratic Republic of Congo.* World Bank, Washington, DC. World Bank. https://openknowledge.worldbank.org/handle/10986/35006

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GBV Prevention Network, Raising Voices and Program for Appropriate Technology in Health (PATH) (2011). *In Her Shoes* (Sub-Saharan Africa Version). https://raisingvoices.org/innovation/creating-methodologies/in-her-shoes/

GBV Prevention Network, Raising Voices (2012). *Get Moving!* (2nd edition). https://raisingvoices.org/innovation/creating-methodologies/get-moving

Gibbs, A., Dunkle, K., Ramsoomar, L., Willan, S., Shai, N., Chatterji, S. Naved, R., Jewkes, R. (2020). *New learnings on drivers of men's perpetration, and women's experiences, of physical and/or sexual intimate partner violence and the implications for prevention interventions,* What Works To Prevent Violence Against Women and Girls, Evidence Review, January 2020. https://www.whatworks.co.za/documents/publications/370-new-learnings-on-drivers-of-men-s-perpetration-07012020/file

Global Women's Institute George Washington University and the International Rescue Committee (2017). *No Safe Place: A lifetime of violence for conflict-affected women and girls in South Sudan.* https://www.rescue.org/report/no-safe-place

Global Women's Institute George Washington University, International Rescue Committee, United Kingdom Department for International Development (2019). *What works to prevent violence against women and girls in conflict and humanitarian crisis: Synthesis Brief.* https://www.whatworks.co.za/resources/policy-briefs/item/662-what-works-to-prevent-violence-against-women-and-girls-in-conflict-and-humanitarian-crisis-synthesis-brief

Global Women's Institute (GWI) (2020). *Empowered Aid: Participatory Action Research Toolkit.* Washington, DC, The Global Women's Institute at The George Washington University. https://globalwomensinstitute.gwu.edu/empowered-aid-resources

Gupta, J., Falb, K.L., Lehmann, H., Kpebo, D., Xuan, Z., Hossain, M., Zimmerman, C., Watts, C. & Annan, J. (2013). *Gender norms and economic empowerment intervention to reduce intimate partner violence against women in rural Côte d'Ivoire: a randomized controlled pilot study.* BMC Int Health Hum Rights. 2013; 13: 46

Heise, Lori (1998). *Violence Against Women: An Integrated, Ecological Framework,* Violence against women, 4.262-90. 10.1177/1077801298004003002. https://www.researchgate.net/publication/11127184_Violence_Against_Women_An_Integrated_Ecological_Framework

Hunt, S., Posa, C. (2001). *Women Waging Peace: Inclusive Security Foreign Policy 124* (May/June 2001): 38-47.

Innovations for Poverty Action (IPA). *Online Resource Center on Cash transfers.* https://www.poverty-action.org/topics/cash-transfers

Inter-Agency Standing Committee (IASC) (2015). *Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing risk, promoting resilience and aiding recovery.* https://gbvguidelines.org/en/

International Rescue Committee (2012). *Women's Economic and Social Empowerment (EA$E).* https://gbvresponders.org/empowerment/eae-tools-resources/

International Rescue Committee (2013). *Preventing Violence Against Women and Girls: Engaging Men through Accountable Practice.* https://gbvresponders.org/prevention/emap-tools-resources/#EngagingMenthroughAccountablePractice(EMAP)ResourcePackage

International Rescue Committee (2019). *Safer Cash Toolkit.* https://www.calpnetwork.org/publication/safer-cash-toolkit-english/#:~:text=The%20Safer%20Cash%20Toolkit%2C%20funded,to%20prevent%20and%20minimize%20harm

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International Rescue Committee (2018). *Violence Prevention and Response Unit,* Feminist Principles for Prevention of VAWG. https://rescue.box.com/s/19676cyghczsn5j31ot4onw9dtlln56s

International Rescue Committee, United Nations High Commission for Refugees (2015). *Integrating cash transfers into gender-based violence programs in Jordan: Benefits, risks and challenges.* https://www.rescue.org/report/integrating-cash-transfers-gender-based-violence-programs-jordan-benefits-risks-and

Jinadasa, K. McLean, L. (2020). *Prevention Foundations Brief 1: What is prevention of violence against women?* Prevention Collaborative. https://prevention-collaborative.org/category/practice/prevention-foundations/

Jewkes, R., Willan, S., Heise, L., Washington, L., Shai, N., Kerr-Wilson, A., Christofides, N. (2020). *Effective design and implementation elements in interventions to prevent violence against women and girls,* What Works To Prevent VAWG? Global Programme Synthesis Product Series, South African Medical Research Council, Pretoria. https://whatworks.co.za/documents/publications/373-intervention-report19-02-20/file

Koenig, M.A., Ahmed, S., Hossain, M.B., & Mozumder, A.B.M. K. A. (2003). *Women's status and domestic violence in rural Bangladesh: Individual- and community-level effects.* Demography, 40, 269-288

Lokot, M. *The space between us: feminist values and humanitarian power dynamics in research with refugees,* Gender & Development, 27: 3, 467-484, 480 (2019) https://www.tandfonline.com/doi/pdf/10.1080/13552074.2019.1664046?needAccess=true

Megevand, M., Marchesini., L. (2020). *Women and Girls Safe Spaces: A Toolkit for Advancing Women's and Girls' Empowerment in Humanitarian Settings.* International Rescue Committee, International Medical Corps. https://gbvresponders.org/empowerment/womens-and-girls-safe-spaces/

Michelis, I. (2020). *'Picked up, misused, abused, changed': intersectionality in the humanitarian discourse on gender-based violence.* Cambridge University. https://www.academia.edu/43022869/_Picked_up_misused_abused_changed_Intersectionality_in_the_Humanitarian_Discourse_on_Gender_Based_Violence

Narayanaswamy, L. (2016). *Whose feminism counts?,* Gender(ed) knowledge and professionalisation in development Third World Quarterly, 37: 12, 2158 (2016).

Neiman, A., Crabtree, K., O'Connor, M. (2018). *Guidelines for Mobile and Remote Gender-Based Violence (GBV) Service Delivery.* International Rescue Committee. https://reliefweb.int/sites/reliefweb.int/files/resources/GBV-Mobile-and-Remote-Service-Delivery-Guidelines_-final.pdf

Neumayer, E., Plilmper, T. (2007). *The Gendered Nature of Natural Disasters: The Impact of Catastrophic Events on the Gender Gap in Life Expectancy,* 1981-2002. http://www.lse.ac.uk/geographyAndEnvironment/whosWho/profiles/neumayer/pdf/Disastersarticle.pdf

Office for the Coordination of Humanitarian Affairs (OCHA) (2016). *Leaving No One Behind: Humanitarian Effectiveness in the Age of the Sustainable Development Goals.* https://reliefweb.int/report/world/leaving-no-one-behind-humanitarian-effectiveness-age-sustainable-development-goals

Oduah, C. (2020). *'Mama Boko Haram': One Woman's Extraordinary Mission to Rescue 'Her Boys' from Terrorism.* The Guardian (June 2020). https://www.theguardian.com/world/2020/jul/09/mama-boko-haram-nigeria-maiduguri

Perrin, N., Marsh, M., Clough, A., Desgroppes, A., Yope Phanuel, C., Abdi, A., Kaburu, F., Heitmann, S., Yamashina, M., Ross, B., Read-Hamilton, S., Turner, R., Heise, L., & Glass, N. (2019). *Social norms and beliefs about gender-based violence scale: a measure for use with gender-based violence prevention programs in low-resource and humanitarian settings,* Conflict and health, 13, 6. https://doi.org/10.1186/s13031-019-0189-x

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Pravez Butt, A., Valerio, K., Davies, I. (2020). *Social Norms Diagnostic Tool: Sexual and Reproductive Health and Rights & Gender-based Violence.* Oxfam. https://policy-practice.oxfam.org/resources/social-norms-diagnostic-tool-sexual-and-reproductive-health-and-rights-and-gend-621097/

Raising Voices (2008). *How to Develop Communication Materials,* The SASA! Activist Kit for Preventing Violence Against Women and HIV. Kampala, Uganda. https://raisingvoices.org/wp-content/uploads/2013/03/downloads/Sasa/SASA_Comm_Mats/StartCommunicationMaterials/Start.CM.HowtoMakeCMs.pdf
  » Original edition SASA!: https://raisingvoices.org/sasa/download-sasa/
  » Revised Edition SASA! Together (2020): https://raisingvoices.org/sasatogether/

Raising Voices (2018). *Implementing SASA! in Humanitarian Settings: Tips and Tools Programming for Prevention Series,* Brief No. 6. https://raisingvoices.org/wp-content/uploads/2013/02/ProgramBrief-6.-Implementing-SASA-in-Humanitarian-Settings.RaisingVoices-December-2018-LG.pdf

Read-Hamilton, S. (2014). *Communities Care: Transforming Lives and Preventing Violence* (Introduction). UNICEF: New York. https://inee.org/system/files/resources/CC%20Toolkit%20Introduction.pdf

Read-Hamilton, S., Marsh, M. (2016). *The Communities Care programme: changing social norms to end violence against women and girls in conflict-affected communities,* Gender & Development, 24: 2, 261-276, DOI: 10.1080/13552074.2016.1195579.

Save The Children Norway (2008). *A Kit of Tools for Participatory Research with Children, Young People and Adults: A compilation of tools used during a Thematic Evaluation and Documentation on Children's Participation in Armed Conflict, Post Conflict and Peace Building,* 2006-2008. https://resourcecentre.savethechildren.net/node/7814/pdf/kit-of-tools_1.pdf

Swaine, A., Spearing, M., Murphy, M., Contreras, M. (2018). *Intersections of violence against women and girls with state-building and peace-building.* George Washington University, CARE UK, the International Rescue Committee.

UN General Assembly (2016). *One Humanity: Shared Responsibility, Report of the Secretary-General for the World Humanitarian Summit.* http://sgreport.worldhumanitariansummit.org

United Nations Population Fund (UNFPA) (2019). *Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies.* Gender-Based Violence Area of Responsibility (AoR). https://www.unfpa.org/sites/default/files/pub-pdf/19-200_Minimun_Standards_Report_ENGLISH-Nov.FINAL_.pdf

United Nations Population Fund (UNFPA) (2008). *Managing GBV Programmes in Emergencies,* E-learning Companion Guide. https://www.unfpa.org/sites/default/files/pub-pdf/GBV%20E-Learning%20Companion%20Guide_ENGLISH.pdf

Ward, J., Coughtry, S., Lafreniere, J., McDonald, N. (2013). *Programming Guidance Violence against Women in Conflict, Post-conflict and Emergency Settings Virtual Knowledge Centre to End Violence Against Women and Girls.* UNWOMEN. https://www.endvawnow.org/en/modules/view/4-conflict-post-conflict.html

Vu, Alexander et al. (March 2014). *The Prevalence of Sexual Violence among Female Refugees in Complex Humanitarian Emergencies: a Systematic Review and Meta-analysis,* PLoS currents vol. 6 ecurrents.dis.835f10778fd80ae031aac12d3b533ca7. 18 Mar, 2014.

Vyas, S., Watts, C. (2009). *How does economic empowerment affect women's risk of intimate partner violence in low and middle income countries? A systematic review of published evidence,* Journal of International Development, 21(5), 577–602. https://onlinelibrary.wiley.com/doi/abs/10.1002/jid.1500

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Warner, X. (October 2016). Fact Sheet 2. *Theories of Change for Preventing Violence Against Women,* The Nabilan Prevention Toolkit. The Asia Foundation and Australian Embassy Timor Leste. https://asiafoundation.org/wp-content/uploads/2017/02/Tl-NabilanToolkit-fact-sheet-2.pdf

Wirtz, A.L., Pham, K., Glass, N., Loochkartt, S., Kidane, T., Cuspoca, D., et al. *Gender based violence in conflict and displacement: qualitative findings from displaced women in Colombia.* Confl Health. 2014; 8: 10.

Women's Refugee Commission, International Rescue Committee, Mercy Corps (2018). *Toolkit for Optimizing Cash-based Interventions for Protection from Gender-based Violence: Mainstreaming GBV Considerations in CBIs and Utilizing Cash in GBV Response.* https://reliefweb.int/report/world/toolkit-optimizing-cash-based-interventions-protection-gender-based-violence

Yaker, R. (2017). *Background Paper: Identifying and Describing Approaches and Attributes of Normative Change Interventions,* Learning Collaborative to Advance Research and Practice on Normative Change for Adolescent Sexual and Reproductive Health. Institute for Reproductive Health, Georgetown University. https://prevention-collaborative.org/wp-content/uploads/2019/02/Learning_Collaborative_Attributes_of_Normative_Change_Interventions.pdf

Photo: Olivia Acland/The IRC

APPENDIX A: WHAT WE KNOW ABOUT EVIDENCE-BASED PREVENTION METHODOLOGIES AND INTERVENTIONS

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What we know about evidence-based prevention methodologies and interventions

10 DESIGN AND IMPLEMENTATION ELEMENTS[21]

Evidence to date suggests that effective interventions to prevent violence against women and girls share the following ten design and implementation elements:

1 Rigorously planned with a robust theory of change, rooted in knowledge of local context.

2 Tackle multiple drivers of VAWG, such as gender inequity, poverty, poor communication and marital conflict.

3 Especially in highly patriarchal contexts, work with women and men, and where relevant families.

4 Based on theories of gender and social empowerment that view behavior change as a collective rather than solely individual process and foster positive interpersonal relations and gender equity.

5 Use group-based participatory learning methods for adults and children, which emphasize empowerment, critical reflection, communication and conflict resolution skills-building.

6 Age-appropriate design for children with a longer time for learning and an engaging pedagogy such as sport and play.

7 Carefully designed user-friendly manuals and materials supporting all intervention components to accomplish their goals.

8 Integrate support for survivors of violence.

9 Optimal intensity: duration and frequency of sessions and overall program length enables time for reflection and experiential learning.

10 Staff and volunteers are selected for their gender equitable attitudes and non-violence behavior, and are thoroughly trained, supervised and supported.

[21] Jewkes, R., Willan, S., Heise, L., Washington, L., Shai, N., Kerr-Wilson, A, Christofides, N. 2020. Effective design and implementation elements in interventions to prevent violence against women and girls. What Works To Prevent VAWG? Global Programme Synthesis Product Series. South African Medical Research Council, Pretoria. https://whatworks.co.za/documents/publications/373-intervention-report19-02-20/file

The table below specifically focuses on interventions which have been evidenced through rigorous research as effective which contribute to the prevention of VAWG in humanitarian settings.

Women and Girls' Safe Spaces (WGSS)

DESCRIPTION

Women and Girls Safe Spaces have been used for decades by VAWG actors in humanitarian programming as an entry point for women and adolescent girls to report protection concerns and voice their needs. At the most basic level, WGSS are physical spaces where women and adolescent girls can be free from harm and harassment. In humanitarian settings WGSS have five core objectives as listed below[22]. Each represents a protective factor to reduce the likelihood of violence:

» To facilitate access for all women and adolescent girls to knowledge, skills and a range of relevant services.

» To support women's and adolescent girls' psychosocial well-being and creation of social networks.

» To serve as a place where women and adolescent girls can organize and access information and resources to reduce risk of violence.

» To serve as a key entry point for specialized services for GBV survivors.

» To provide a place where women and adolescent girls are safe and encouraged to use their voice and collectively raise attention to their rights and needs.

Safe space programming can include static, physical spaces for women and girls to meet and access services. They can also be in the form of roaming mobile units that provide outreach services to women and girls for whom ease of movement outside their communities are severely limited by social/cultural norms or considerations of security. Recently, the sector has also been trialing the development of 'virtual/ remote safe spaces' which can be accessed through phones and other devices by women and girls who may possess safe, and private ownership of such devices.

PREVENTION APPROACH

Women and Girls' Empowerment

CONSIDERATIONS FOR USE IN AN ACUTE EMERGENCY

Static services may be challenging to deliver if movement of girls, women and staff are severely curtailed by security concerns. In such circumstances consider mobile and remote programming.[23]

Women and Girls Safe Spaces: A Toolkit for Advancing Women's and Girls' Empowerment in Humanitarian Settings can be found here.

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[22] Megevand, M., Marchesini., L (2020) Women and Girls Safe Spaces: A Toolkit for Advancing Women's and Girls' Empowerment in Humanitarian Settings. International Rescue Committee, International Medical Corps https://gbvresponders.org/empowerment/womens-and-girls-safe-spaces/

[23] Neiman, A., Crabtree, K., O'Connor, M. (2018) Guidelines for Mobile and Remote Gender-Based Violence (GBV) Service Delivery. International Rescue Committee https://reliefweb.int/sites/reliefweb.int/files/resources/GBV-Mobile-and-Remote-Service-Delivery-Guidelines_-final.pdf

Women's Economic and Social Empowerment

DESCRIPTION

Combining economic interventions with gender transformative programming for women is effective in preventing their experience of IPV while economic strengthening (such as livelihood programs) with explicit gender-transformative approaches shows promise for reducing men's self-reported perpetration of IPV.[24]

IRC's EA$E model addresses women's economic empowerment through a group process that combines three successive components: women-only Village Savings and Loan Associations (VSLAs), Gender Discussion Groups and in the last step, participants engage in the business skills training component prior to conducting a VSLA's share-outs. Once the VSLA part is under way Gender Discussion Groups are introduced. In this second stage, VSLA members invite their spouses or partners to join a structured discussion series on gender norms and how they function at the household level to undermine women's economic participation both in the home and in society at large. Through a series of activities, groups identify and explore manifestations of male privilege and women's oppression, learn and practice non-violent conflict resolution strategies, and brainstorm ways to work toward gender equality in their families and communities. EA$E is evidenced as effective in decreasing sexual violence and increasing equal decision-making among household members. The results are statistically significant, among couples that have taken part with a high frequency in the Gender Discussion Groups.[25]

PREVENTION APPROACH

Risk Mitigation

Women and Girls' Empowerment

CONSIDERATIONS FOR USE IN AN ACUTE EMERGENCY

Not recommended to begin in full in an acute emergency. This is particularly because VSLA's require trust between the members which might be challenging in acute emergencies and implementing discussion groups requires filed facilitators and participation over 12 weeks.

More information on the Ea$E program model can be found here.

Photo: Timothy Nesmith/The IRC

[24] Gibbs, A., Dunkle, K., Ramsoomar, L., Willan, S., Shai, N., Chatterji, S. Naved, R., Jewkes, R. (2020). New learnings on drivers of men's perpetration, and women's experiences, of physical and/or sexual intimate partner violence and the implications for prevention interventions. What Works To Prevent violence Against Women and Girls, Evidence Review, January 2020 https://www.whatworks.co.za/documents/publications/370-new-learnings-on-drivers-of-men-s-perpetration-07012020/file

[25] Gupta, J., Falb, K.L., Lehmann, H., Kpebo, D., Xuan, Z., Hossain, M., Zimmerman, C., Watts, C. & Annan, J. (2013) Gender norms and economic empowerment intervention to reduce intimate partner violence against women in rural Côte d'Ivoire: a randomized controlled pilot study. BMC Int Health Hum Rights. 2013; 13: 46

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Cash Transfers

DESCRIPTION

Cash transfers are increasingly used as a key programming modality in acute emergencies particularly as new modes of delivery through mobile phones and special voucher cards, reduces the need for the presence of humanitarian staff and heavy infrastructure to directly deliver cash in person in situations of high conflict where security is a concern. Cash particularly when combined with social components (group discussions, or other conditionalities) is effective in preventing women's experiences of IPV in humanitarian settings however more learning is needed in acute settings.[26]

PREVENTION APPROACH

⬆ Women and Girls' Empowerment

↩ Risk Mitigation

CONSIDERATIONS FOR USE IN AN ACUTE EMERGENCY

Using cell phones as a key cash modality requires consideration and assessment as to whether women and girls have safe and unfettered access to such devices in a household; as well as other considerations on how the cash transfer program itself should be designed to reduce risks of violence and increase access to response services.

Women's Refugee Commission, International Rescue Committee and Mercy Corps developed a toolkit for Mainstreaming Gender-Based Violence (GBV) Considerations in Cash and Voucher Assistance (CVA) and Utilizing CVA in GBV Prevention and Response found here.

SASA!

DESCRIPTION

SASA! is a community mobilization approach to prevent violence against women (VAW) and HIV, developed by Raising Voices in Uganda (www.raisingvoices.org) that has demonstrated community-level impacts on preventing intimate partner violence against women and reducing social acceptability of violence in development settings, but has been adapted in several humanitarian contexts as well. It works to transform harmful power dynamics and promote a balance of power between women and men (using a four types of power framework- power within, power over, power with, and power to). It is designed to be led by communities with intensive support by staff.

SASA! was recently updated into a second edition called SASA! Together. It uses 3 strategies: local activism, community leadership, and institutional strengthening (representing the layers of the ecological model) and a variety of creative and dynamic activities to engage.

PREVENTION APPROACH

⬆ Long-term Behavior and Norm Change

CONSIDERATIONS FOR USE IN AN ACUTE EMERGENCY

Not recommended to begin in full in an acute emergency. However, core concepts and key exercises and communication materials can be incorporated into existing trainings AND transformational work can begin with staff.

SASA! requires at least 3 years of programming and is recommended to be implemented in full.

Requires deep engagement in the community and therefore ongoing safe access.

Focuses on power. While this is quite relevant in acute emergencies, requires building trust and relationships through ongoing engagement

The original version of *SASA!* can be found here.

SASA! Together can be found here.

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[26] Cross, A., Manell, T., Megevand, M. (2018). Humanitarian Cash Transfer Programming and Gender-based Violence Outcomes: Evidence and Future Research Priorities. Women's Refugee Commission and the International Rescue Committee. https://reliefweb.int/report/world/humanitarian-cash-transfer-programming-and-gender-based-violence-outcomes-evidence-and

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Communities Care

DESCRIPTION

UNICEF's Communities Care: Transforming lives and preventing violence uses a participatory, community-based approach to deliver timely, coordinated, compassionate care and support to survivors. It further strives to reduce tolerance for GBV within the community and to promote community-led action to prevent it. This program has shown promising results among participants in some conflict afflicted areas in Somalia, where John Hopkins University carried out an evaluation which showed there has been more than a 14 per cent reduction in harmful community beliefs that foster GBV[27]. The norm change aspect of the program focuses on structured conversations on GBV beliefs with selected members of the community who both seek to challenge the norms that enable GBV to proliferate and those that seek to uphold them. Given the dangers inherent in having such 'conversations', community facilitators in the program are carefully selected and receive thorough and detailed training. Community members who have successfully participated, are given a community level budget which in turn they use to cascade learnings and challenge on GBV across their communities in ways that are contextually relevant.

PREVENTION APPROACH

Long-term Behavior and Norm Change

CONSIDERATIONS FOR USE IN AN ACUTE EMERGENCY

The program has been implemented in areas of ongoing high conflict in South Sudan and Somalia, which may suggest implementation in some acute settings, under certain conditions may be possible. It must be noted, however, that the program had to be suspended at times during its evaluation due to security concerns and inability of trained community mobilisers to move around safely in key communities.

More guidance about the program can be found here.

Preventing Violence Against Women & Girls: Engaging Men through Accountable Practice (EMAP)

DESCRIPTION

EMAP is an evidence based primary prevention resource package that contains a ten-month individual behavior change intervention created with conflict affected communities, which aims to reduce violence against women and girls by addressing its root causes. EMAP offers an innovative primary prevention model for engaging men in transformative individual behavior change in a post-conflict context, guided by the input and realities of the women in their communities.[28,29]

PREVENTION APPROACH

Long-term Behavior and Norm Change

CONSIDERATIONS FOR USE IN AN ACUTE EMERGENCY

Not recommended to begin in full in an acute emergency. However, core concepts around relational and personal accountability can be incorporated into existing trainings AND transformational work can begin with staff.

EMAP can be found here.

[27] UNICEF Introduction to the Communities Care Programme: Transforming Lives and Preventing Violence Programme online here [accessed 19/12/2020]

[28] Hossain, M., Kone, D., Zimmerman, C., Kiss, L., Maclean, T., Abramsky, T., & Watts, C. (2013). Impact of the Men & Women in Partnership violence prevention intervention in Cote D'Ivoire: Preliminary quantitative findings from a cluster randomized controlled trial. https://bmcpublichealth.biomedcentral.com/articles/10.1186/1471-2458-14-339

[29] Falb, Kathryn; Hossain, Mazeda; Kabeya, Rocky; Koussoube, Estelle; Lake, Milli; Lewis, Chloe; Pierotti, Rachael S.; Roth, Danielle; Vaillant, Julia. (2020). Engaging Men to Transform Gender Attitudes and Prevent Intimate-Partner Violence in the Democratic Republic of Congo. World Bank, Washington, DC. World Bank. https://openknowledge.worldbank.org/handle/10986/35006

APPENDIX B: USING THE ECOLOGICAL MODEL TO DESIGN YOUR PREVENTION PROGRAM

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Using the ecological model to design your prevention program

Understanding the drivers of VAWG as well as contributing factors which increase women's and girls' likelihood of experiencing violence is required to design effective prevention programming. The Socio-Ecological Model (SEM)[30] is a key framework used to conceptualize and form a holistic understanding of how individual, interpersonal, community, and structural level risk and protective factors relate to each other and how they influence women's and girls' vulnerability to, or protection from, violence. Effective programs link specific strategies targeting particular risk and protective factors according to identified forms of VAWG at different levels of the social ecology.

As part of *What Works to Prevent Violence Against Women and Girls*, a flagship program from the UK Department for International Development (DFID), a variation of the ecological framework (*Figure 2* below) has been adapted specifically highlighting the connections between VAWG in conflict and post conflict settings which can be useful to support thinking of VAWG prevention in acute emergencies.
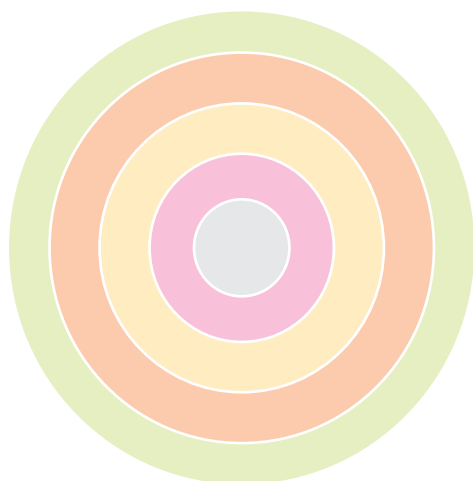
Photo: Andrea Dicenzo/The IRC

Risk and protective factors interact to affect the likelihood of violence. Risk factors are conditions that make violence more likely, while protective factors reduce the likelihood of violence and buffer against risk. Risk and protective factors interact to determine the likelihood of violence and can provide valuable information for planning and evaluation. Protective factors against multiple forms of violence[31] include but are not limited to:

» Coordination of resources and services among service providers

» Community connectedness

» Family support/connectedness

» Association with pro-social peers

» Skills in solving problems non-violently

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[30] Heise, Lori. (1998). Violence Against Women: An Integrated, Ecological Framework. Violence against women. 4.262-90. 10.1177/1077801298004003002. https://www.researchgate.net/publication/11127184_Violence_Against_Women_An_Integrated_Ecological_Framework

[31] Center for Disease Control and Prevention (2017). Connecting the dots: Exploring the Overlaps between multiple forms of violence and working towards collaborative prevention. https://vetoviolence.cdc.gov/apps/connecting-the-dots/content/home

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Figure 2

A socio-ecological model of potential risk factors for VAWG in conflict and post-conflict settings Reprinted from Swaine, A., Spearing, M., Murphy, M., & Contreras, M. (2018). Intersections of violence against women and girls with state-building and peace-building. George Washington University, CARE UK, the International Rescue Committee.
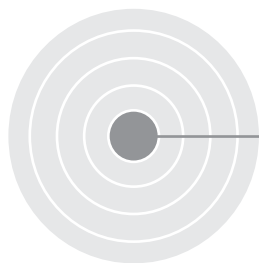
INDIVIDUAL (WOMEN/GIRLS OR MEN/BOYS)
» Age, religious identity and ethnicity
» LGBTI and disability status
» Education level
» Lack of employment or engagement in livelihoods
» Alcohol and drug abuse
» Displacement from home community
» Separation from family/support structures
» Experiences in armed groups as combatants or abductees
» Integration experience of former combatants/abductees
» Acceptance of VAWG
» Experiences of VAWG in childhood
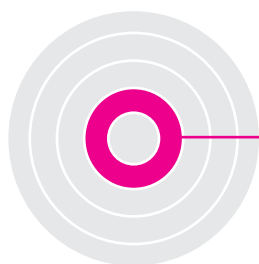
INTERPERSONAL
» Increased stresses on the household including increased poverty, displacement, etc
» Increased controlling behaviours
» Unequal decision making and division of labour
» Men's perception of their lack of ability to fulfill traditional masculine roles
» Choice in marriage/partner
» Re-integration of combatants into the household
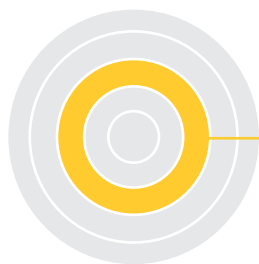
INSTITUTIONAL
» Armed actors using rape as a weapon of war
» Forced enlistment and use of girls as soldiers or in other roles associated with armed groups
» SEA by private and public sector entities
» Exclusion of female representation in security forces, armies, peace negotiations
» Lack of response services for survivors
» Suppressed independent civil society
» VAWG not addressed in peace agreements
» State-building processes exclude governance mechanisms for addressing gender inequality and VAWG
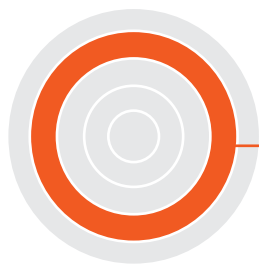
COMMUNITY
» Ongoing intra- and inter-communal violence
» Explicit targeting of women and girls for rape and killing to reduce reproductive capacity or de-humanize opposition groups
» Acceptance of discriminatory gender roles
» Lack of economic opportunities due to instability
» Normalization of violence and continued acts of rape, etc.
» Stigma against re-integration of former combatants or abductees
» Increase in female headed households

SOCIETAL
» Unequal gender dynamics
» Patriarchal norms and practices that discriminate against women
» Culture of impunity
» Lack of rule of law
» Poverty

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Step 1
Identify and select relevant risk and protective factors

You cannot address all the factors. However your violence prevention plan should address several factors at once, in a coordinated way. While you can use the SEM above as a foundation, because every emergency context and community is unique, it is important to understand which factors are contributing to which forms of violence experienced by women and girls in your emergency setting.

This is also when you want to use an intersectional lens to pinpoint the interaction of risks and protective factors for diverse groups of women and girls (e.g., women of different socio-economic backgrounds, abilities, sexualities, gender identities and/or religious affiliations). Data from your case management services (which you will have set up prior to your prevention programming), information shared by women and girls through your needs assessments or gathered through discussions with local women's organizations and GBV coordination mechanisms will support you in this step.

KEEPING AN INTERSECTIONAL APPROACH IN MIND TO UNDERSTAND RISK AND PROTECTIVE FACTORS

It is important to remember that violence against women is often experienced in combination with other forms of structural inequality and discrimination. Examining how other forms of structural inequality and discrimination intersect with gender inequalities to exacerbate violence is necessary to effectively address the root causes of violence against all women, across the diversity of affected women and girls in an acute emergency. While not exhaustive and keeping in mind that factors may vary from one setting to another the Guidelines for Integrating Gender Based Violence Interventions in Humanitarian Action offer key considerations for at risk groups specifically highlighting factors that contribute to their increased risks of violence which can support staff's thinking on how other forms of inequality shape diverse women's and girls' experiences of violence in their context.

GUIDING QUESTIONS TO DISTINGUISH FEATURES FOR EACH FACTOR AND HELP YOU SELECT FACTORS THE PROGRAM WILL ADDRESS:

» How much does this factor contribute to risk of VAWG in your emergency setting? Does it contribute to more than one type of VAWG? Does this factor particularly increase diverse women's and girls' risk of experiencing violence?

» To what degree does this factor protect against violence? Is it relevant for women and girls experiencing multiple forms of discrimination?

» How important is this factor to diverse groups of women? Girls?

» Is this factor associated with the delivery of other humanitarian services in the community?

» Current efforts in place to address this factor?

» Consequences if this factor is not addressed?

» Are you, the community, and your key partners able to affect this factor, given the available resources, your group's capacity, community readiness, and program timeframe?

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Step 2
Select prevention approaches and strategies

Prevention Approaches lay out the pathways to achieve the goal of preventing violence. Strategies are the stepping stones to get there, the specific ways of advancing a given approach. No single approach or strategy on its own will significantly reduce violence. Your plan should be comprehensive and include a variety of strategies and approaches that addresses several factors across the SEM. The table below is meant to illustrate the concept of an individual-level strategy, relationship-level strategy, etc. and how they fit within the prevention approaches outlined in the EMPOWER framework. You can use this table as a reference to categorize other strategies you may be thinking about implementing to support a comprehensive plan.

Individual

DESCRIPTION

Identifies biological and personal history factors; such as age, education, income, substance use, or history of abuse, that increase the likelihood of becoming a victim or perpetrator of violence.

RISK FACTORS

» Age, religious identity and ethnicity
» LGBTI and disability status
» Education level
» Lack of employment or engagement in livelihoods
» Alcohol and drug abuse
» Displacement from home community
» Separation from family/support structures
» Experiences in armed groups as combatants or abductees
» Integration experience of former combatants/ abductees
» Acceptance of VAWG
» Experiences of VAWG in childhood

EXAMPLES OF STRATEGIES[32]

⬆ ↪ Cash assistance

⬆ ↪ Dignity kit distribution

⬆ Curriculum-based psychosocial support

⬆ ↪ Survivor-centered response services (medical, psychosocial, legal, safety/security)

↪ Women and Girls Safe Spaces

⬆ Skills training and mentorship

Photo: Kaung Htet/The IRC

[32] The strategies listed below are not exhaustive of all relevant strategies for VAWG prevention in emergencies.

Relationship

DESCRIPTION

Examines close relationships that may increase the risk of experiencing violence as a survivor or perpetrator. A person's closest social circle-peers, partners and family members-influences their behavior and contributes to their range of experience.

RISK FACTORS

» Increased stresses on the household including increased poverty, displacement, etc
» Increased controlling behaviors
» Unequal decision making and division of labor
» Men's perception of their lack of ability to fulfill traditional masculine roles
» Choice in marriage/partner
» Re-integration of combatants into the household

EXAMPLES OF STRATEGIES

Increasing women's access and control over resources paired with gender transformative discussions for men

Community

DESCRIPTION

Explores the settings, such as schools, workplaces, and neighborhoods, in which social relationships occur and seeks to identify the characteristics of these settings that are associated with becoming survivors or perpetrators of violence.

RISK FACTORS

» Ongoing intra- and inter-communal violence
» Explicit targeting of women and girls for rape and killing to reduce reproductive capacity or de-humanize opposition groups
» Acceptance of discriminatory gender roles
» Lack of economic opportunities due to instability
» Normalization of violence and continued acts of rape, etc.
» Stigma against re-integration of former combatants or abductees
» Increase in female headed households

EXAMPLES OF STRATEGIES

Safety audits and advocacy

Firewood patrols

Separating latrines by sex, including doors with locks, etc.

Locating services in areas that are safe for women and girls to access.

Integrating Gender-Based Violence Interventions in Humanitarian Action for each sector

Supporting women's and girls' movements/ movement building and women and girl-led initiatives

Supporting social networks

Fostering women's leadership and decision-making.

Zero-tolerance policies for VAWG within humanitarian organizations

Societal

DESCRIPTION

Looks at the broad societal factors, such as health, economic, educational and social policies, that help create a climate in which violence is encouraged or inhibited and help to maintain economic or social inequalities between groups in society.

RISK FACTORS

» Unequal gender dynamics
» Patriarchal norms and practices that discriminate against women
» Culture of impunity
» Lack of rule of law
» Poverty
» Emphasis on hyper masculinities as facets of warfare

EXAMPLES OF STRATEGIES

⊖ Legal advocacy and reform of oppressive, discriminatory local and national laws and policies that impact women and girls

⊖ Creation of new laws as needed that sanction violence against women and girls

Photo: Martha Tadesse/The IRC

GUIDING QUESTIONS TO SELECT STRATEGIES INCLUDE:

» How will this strategy address one or more of the priority factors for violence?
» How does this strategy align with others you have in place?
» Does this strategy enhance or reinforce existing activities?
» Does this strategy build on women's organizations assets and strengths?
» Is there strong support for this strategy by women's organizations and women and girls ?
» Is this strategy relevant for diverse groups of women and girls?
» Are you, the community, and your key partners able to implement this strategy, given the available resources, your group's capacity, community readiness, and program timeframe?
» What barriers could arise and how might you overcome them?

EMPOWER ASSESSMENT & SUPERVISION TOOLS

Overview of EMPOWER tools

This resource package includes two assessment tools and three supervision tools designed to center the voices of women and girls, ensuring their perspectives actively shape humanitarian prevention programming. These tools, summarized below may be used in conjunction with existing assessment tools and/or on their own.

ASSESSMENT TOOLS

Women Centered Participatory Discussions

This tool is divided into multiple parts and emphasizes interactive and participatory activities, rather than the standard discussion format. The participatory approaches help to ensure that women and girls can offer their perspectives in a variety of ways.

Safety Mapping

An interactive and visual activity for women and girls to identify the biggest risks to their safety, and areas of greatest support.

SUPERVISION TOOLS

GBV Prevention Candidate Attitudes and Beliefs Survey

Designed for recruitment of GBV staff, to gauge attitudes and beliefs before hiring and, therefore, hire better candidates.

Facilitation Observation Checklist

This tool is designed for supervisors observing GBV staff working in communities. Outlines characteristics of accountable practice and supports structured observation of how and if staff are able to put those characteristics into play.

Individual Capacity Assessment for GBV in Emergencies

This tool is designed to track individual staff changes in attitudes and skills over their time with the program. The same tool is used at multiple points over a longer period to monitor progress and support plans for strengthening staff members' depth of understanding, analysis, skills and behaviors.

Assessment - Women centered participatory discussions

Design of this tool

This tool was designed based on the following feminist participatory action research principles to EMPOWER your assessment and design of transformative prevention programming with women:

AIMS TO SHIFT POWER

Not only does the tool support the design of programming, which tackles the root cause of violence against women and girls (VAWG), unequal power relations between men and women, but the assessment process itself seeks to shift power to women. The tool promotes women's voices and decision-making regarding the prevention program's design, a shift in the use of power by humanitarian aid workers within the humanitarian emergency structure.

TAKES AN INTERSECTIONAL APPROACH

This tool supports identifying experiences of discrimination, exclusion, and marginalization; recognizing the diversity of women's experiences, identities, and power. The guided discussions honor voice and difference.

ENCOURAGES OWNERSHIP

This tool offers an outline for discussions recognizing women as experts of their lives and experiences. Discussions encourage women to take decisions regarding programming and avoid assuming women are less able, less available, and less invested in voicing solutions and influencing programming of which they are the main stakeholders.

FOSTERS SOLIDARITY AND COLLECTIVE ACTION

The assessment and design of prevention programming are considered a collective process that strengthens solidarity and empowers women to collectively articulate longer-term changes they wish to see through the discussions suggested in this tool.

Purpose and use of this tool

The tool offers a sample guide for facilitating participatory women-only discussions to design GBV prevention programming in emergencies. It supports feminist practice by engaging women as contextual experts and co-producers of knowledge, encouraging them to safely take an active role in asking and answering questions about their own lives, proactively acknowledging and seeking to transform power imbalances in this case, between men and women, as well as between aid workers and aid recipients.

This tool facilitates more than six hours of discussions divided into two parts. The first part engages women to assess the current environment and power dynamics, while the second part allows you to share back assessment findings with them and seek their input on the program's design.

This tool does not replace or duplicate focus group discussions conducted through rapid GBV assessments. These discussions should be implemented later, most likely within the sixth to ninth week from the onset of an emergency and only once you have case management services for GBV survivors, women and girls' safe spaces (WGSS) set up, and your initial female prevention staff recruited. This sequencing is essential for reasons detailed in the table below.

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Assessment - Women centered participatory discussions

WHY DO OUR CASE MANAGEMENT SERVICES FOR SURVIVORS NEED TO BE IN PLACE BEFORE USING THIS TOOL?

Understanding the interplay of individual, interpersonal, community, and societal factors which shape and sustain VAWG requires speaking to women about the discrimination and violence perpetrated against them. While women are not asked to speak about their firsthand experiences, it is highly likely that participants have experienced or are experiencing violence, and you must be able to refer them to a caseworker if triggered by conversations or wish to speak more about their individual experiences.

WHY CONDUCT THESE DISCUSSIONS 6 – 9 WEEKS INTO THE EMERGENCY RESPONSE AND NOT SOONER?

Engaging women must be ethical and meaningful. On the one hand, conducting these discussions 6-9 weeks into the acute emergency response allows you to consider the information you already have and to tailor the discussions according to the information you need. It also allows you to understand which groups of women and girls face multiple forms of discrimination, are particularly sidelined from participation, and potentially the most at risk of violence in your context and develop outreach strategies to ensure their participation in these discussions.

On the other hand, women will better speak about power dynamics, risk, and protective factors influencing their vulnerability to violence and share their existing strategies for protection, indicating which assets, resources, and protective factors matter the most to support their safety in this new emergency context.

WHY SHOULD OUR WGSS BE IN PLACE BEFORE USING THIS TOOL?

Reflecting and sharing comfortably in a group setting can be difficult, even when groups are well-composed according to shared experiences or identities women have in common. Ensuring confidentiality of what is said can be challenging when you do not control the environment where you conduct conversations.

Even if you are still using a temporary location for your WGSS, conducting these participatory discussions in your WGSS offers the ideal environment to ensure confidentiality and foster women's participation.

WHY IS THIS TOOL FOR EMERGENCY SETTINGS 6 HOURS LONG?

Examining power dynamics, unearthing strategies for safety and meaningfully seeking women's input on program design simply cannot be achieved within a one-hour conversation; nor does it need to be rushed, even in an acute emergency. These discussions should be fully considered prevention activities within the first 12 weeks of an emergency rather than an additional effort and are guaranteed to contribute to better outcomes than ad-hoc awareness raising sessions with community members that lack clear objectives.

Before using this tool

GROUP WOMEN

Group women according to broad age categories and a shared feature of their identity or common experience (e.g., IDP adult women, women who are older from the host community, adult [ethnicity] women, adult female head of household). Given the participatory approach to discussions, each group should not include more than 8-10 participants.
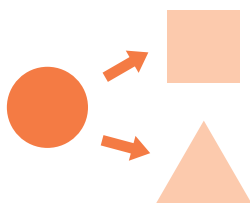
TAILER THE TOOL

Tailor the tool with terminologies used by women in the community you assess and examples reflecting women's shared experiences.

Tailor the tool based on the information you need to develop your prevention strategy or gain a more nuanced understanding of an issue from the women's perspective. (e.g., focusing on risk and protective factors related to a specific type of violence, understanding conditions which influence whether women feel they have or lack power in a specific space)

» The first part provides an introductory and consent script, an opening activity, four participatory discussion activity guides, and a closing. For each activity time required is indicated so you can best determine how to spread discussions over several days according to women's availability or which discussions to prioritize.

» The second part requires you to design the discussion guide based on the findings of your assessment.
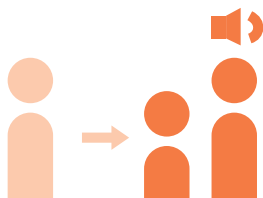
ADAPT THE TOOL

The tool requires further adaptation to be adolescent-girl friendly.

The tool requires further adaptation to be inclusive of participants with seeing or hearing impairments.

EMPOWER ASSESSMENT TOOL
Women centered participatory discussion guide

Contents

Introduction

DATE OF PARTICIPATORY ACTION DISCUSSION:

NAME OF FACILITATOR:

NAME OF NOTE TAKER:

IF INTERPRETER IS NECESSARY, NAME OF INTERPRETER:

FEATURES OF THE GROUP (AGE GROUP, STATUS, ETC.):

SAMPLE INTRODUCTION SCRIPT

Welcome and thank you for taking the time to join me for this discussion today.

My name is *[insert your name]*, and I work with *[insert the name of your organization and consider sharing what services you already have in place for women and girls, e.g., women and girl safe space]*.

I gathered you today to learn more about what it means to be a *[insert the focus group characteristic, e.g., displaced adolescent girls, refugee adult women, women who are older from the host community]* in *[insert community name]* and how violence affects the lives of women like you.

We do not need you to share your specific experiences; we will speak about women's general experiences. Your participation is voluntary; there is no direct benefit from participating. However, your answers will help my team create programming which supports women's and girls' safety in this community.

I will be asking you questions through activities. I expect the discussion will take *[insert length of time based on activities selected]*. There is no right or wrong answer, and you do not have to respond to questions if you do not wish to, and you can leave the discussion at any time.

All your answers will be treated confidentially. This means we will not identify who said what or use your names in any way in the notes so you can feel comfortable talking freely. The purpose of the notes is to ensure that the information collected is precise.

You each also have an essential role in ensuring confidentiality. During the discussion, when sharing examples or experiences, individual names should not be used. After the discussion, do not share the details of who was in the group or what was discussed. If someone asks, explain that you were speaking about health and safety issues for women and girls to help inform services.

Does anyone have any questions about the purpose or confidentiality of this discussion?

Do I have your agreement to maintain confidentiality? May we begin?

Part 1: Assessing the current environment

WHAT I LIKE ABOUT BEING A WOMAN[33]
15 MINUTES

1. Ask the women to form a circle.

   > Think of one thing you enjoy about being a woman.

   > I will start to give an example and a minute to think.

2. Introduce yourself and act out what you like about being a woman. For example:

   > My name is Sara, and as a woman, I like my confidence.

3. Act out what you like about being a woman (in this example, being confident), then move on to the next participant.

4. Once all the women have had a chance to take part:

   > Thank you for sharing. I encourage you to continue to volunteer, participate, and enjoy your time together throughout these discussions

5. Remind the women:

   > We will explore through a set of participatory activities what it means to be a *[insert the focus group characteristic, e.g., displaced adolescent girls, refugee adult women, women who are older from the host community]* in *[insert community name]*.
   >
   > Discussion includes speaking about violence against women and girls. This is a complex topic, especially if women in the room have experienced or witnessed violence.
   >
   > We are not asking women to share their personal experiences but rather speak about women's general experiences. If any woman wishes to speak about her personal experiences and seek support, we are available after the workshop to connect you with someone trusted and safe to speak with.

[33] Adapted from International Rescue Committee (2013) Preventing Violence Against Women and Girls: Engaging Men Through Accountable Practice https://gbvresponders.org/prevention/emap-tools-resources/#EngagingMenthroughAccountablePractice(EMAP)ResourcePackage

WHO HAS POWER AND WHO BELONGS?[34]
15 MINUTES

1. Break participants off into pairs or small groups and either assign each group one or several of the terms
   » Race
   » Ethnicity
   » Sexual orientation
   » Religion
   » Socio-economic status
   » Ability status
   » National origin
   » First language
   » Age

2. Give each group 5 minutes to identify in their community who are privileged women and who are the marginalized women within each term.

3. Let groups know at the end of the 5 minutes: they will have 1 minute to report their answers.

4. After each term is shared, ask:

   Are there are any additions or thoughts from the rest of the room?

   Continue this way until all groups have presented.

5. On a flipchart, draw a triangle divided horizontally by 6 lines representing the community's hierarchy.

   The triangle's top part represents those in positions of power and influence, those who are seen and heard most frequently and who others look up to and listen to, and those who are most well represented in the policies, media, etc.

6. Ask groups:

   Place the women you listed under each term with their hierarchy in the community. Those who would not be found at all are to be left outside the triangle.

7. Debrief:

   » Which women does the community cater most to (relevant documents, language, resources, information, events, etc.), and which least to, or not at all? –
   » Are there women in the community who are missing? If yes, which ones?
   » Where would these women be situated?

[34] Adapted from Living History Forum and RFSL Ungdom(2009) Break the norm ! methods for studying norms in general and the heteronorm in particular Second edition https://rm.coe.int/break-the-norm-second-edition-2009/168097fd43

OPEN-ENDED STORY
IDENTIFYING ATTITUDES AND NORMS RELATED TO INTIMATE PARTNER VIOLENCE (IPV)[35]
60 MINUTES

WHEN TAILORING THIS ACTIVITY CONSIDER THE FOLLOWING:

The vignette for this activity focuses on IPV, given that it is the most prevalent form of violence women and girls face even in acute emergencies. Depending on the time and resources available you may also want to explore attitudes and norms associated with other types of VAWG. For example, a similar activity focused on Sexual Exploitation and Abuse can be found in Empowered Aid: Participatory Action Research Toolkit developed by the Global Women's Institute.

Prior to using the vignette, you should adjust the details (e.g. the names, ages, language, and the specific ways in which IPV is perpetrated) for a context tailored vignette which women can speak to in greater detail. Consider engaging for example peer staff providing case management services for survivors, staff from national and civil society women's organizations and women regularly participating in women girl safe space activities to support you with the tailoring.

Discussion questions are organized under headings reflecting seven dimensions of attitudes and norms related to IPV. During the FGD you should directly ask the questions you have selected to discuss with women. The headings are provided to support you in analyzing the findings to inform the design of your prevention strategy (see the **Getting Started: Step by Step** section and **Appendix B** in the EMPOWER framework document.

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1. Tell the group:

    > I am about to read them a scenario that occurs in many different communities worldwide.

    > This is not one person's story but based on various real-life experiences, and I would like your help in filling in her story as if she were from their community through the questions asked after.

2. Read the story aloud:

    > Salma, who is 16 years old, and Yasser, who is 25 years old, got married out of love and had their parents' approval. Before marriage, they had a good relationship. He cared for Salma, bought her gifts, was protective of her, and looked out for her. After marriage, he became increasingly controlling and suspicious. One day, he was waiting for her after school and saw her talking to a boy from her class. He got so angry that he pushed her, hard enough that she fell over. He then started yelling at her: 'Why were you talking to him? What were you talking about?'. Salma had enough, so she said, 'Be quiet'. Yasser responded, 'What did you say?' and then grabbed Salma's hand and pulled her. Other people standing outside the school who saw this did not say anything, and Salma and Yasser went home.

    > The next day, Yasser yelled at Salma because the food was not ready when he got home. 'You do nothing around the house; you are worthless', he said. He picked up the nearest pan and threw it at her, hitting her hard on the shoulder. Yasser's older sister became aware of his behavior towards his wife but saw this as Salma's fault. Yasser's sister told Salma, 'You know what his temper is like, you don't want to go and provoke him, why do you provoke him like that?' Salma told a friend that she suffers from severe depression and long-lasting injuries because of her husband's behavior.

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[35] Adapted from Pravez Butt, A., Valerio, K., Davies, I. (2020) Social Norms Diagnostic Tool: Sexual and Reproductive Health and Rights & Gender-based Violence, Oxfam. https://policy-practice.oxfam.org/resources/social-norms-diagnostic-tool-sexual-and-reproductive-health-and-rights-and-gend-621097/

3. Ask participants to reflect on the following:

   A. Identifying norms around IPV

   » Would most people expect him to say these things?
   » Would most husbands get violent with Salma for talking to a boy and responding in the way that she did? For not doing her domestic chores well and responding in the way that she did?

   B. Social sanctions

   » What are the expected reactions of people around Salma and her husband towards his behavior?
   » What kind of response might Yasser and Salma experience if the wider community finds out about their domestic conflict?

   C. Situations triggering domestic violence

   » In your knowledge and experiences, are there any other situations relating to women's roles and or responsibilities where she may experience violence? Some examples include the following:
     » If she refuses sex?
     » If she disagrees with him on how household finances spent?
     » If she visits a health worker without telling him?
     » If she starts spending money that she has earned without asking him?

   D. Access to GBV and sexual reproductive health support services/ information

   » Would most women in Salma's position seek help for mental and physical health? Why or why not?
   » Would they know where to go?
   » To whom would most women in Salma's position turn?
   » Would it be acceptable or for her to reach out to a professional health worker about it?
   » What kinds of support and or services does someone in Salma's position need from her family, service providers?
   » What kinds of support/services are available to her?

   E. Social norm change

   » Have reactions to women studying and or taking on new work roles changed compared to before the emergency? If yes, provide examples and whether these are positive, negative, or neutral.

   F. Key influencers

   » Who might be able to influence Yasser or his sister to act differently?

G. Exceptions

» Are there any instances where people would not expect Yasser to yell at or hit Salma, according to age, social status, wealth, location, ethnicity, and or pregnancy status?
» If I had identified Selma earlier as: *[an adolescent girl]*; *[an older woman]*, would any answers change to the previous questions? If yes, which ones and how?
» If I had identified Selma as lesbian and IPV occurring between Selma and her female partner, would any answers change to the previous questions? If yes, which ones and how?
» If I had identified Selma as belonging to *[insert ethnic group]*; *[insert religious affiliation]*; *[insert relevant identity group facing systemic oppression and discrimination in your context]* would any answers change to the previous questions? If yes, which ones and how?

STORY WITH A GAP
EXPLORING SPACES AND EXPRESSIONS OF POWER[36]
60 MINUTES

WHEN TAILORING THIS ACTIVITY CONSIDER THE FOLLOWING:

You may want to explore other relevant spaces in the community which might have come up through the safety mapping for example. Consider dividing participants into four rather than two groups and have each group explore a space looking at both the conditions in which they feel they have and lack power.

The discussion questions can be tailored based on the information you feel you need to gain a more nuanced understanding of factors influencing women's sense of power to identify prevention strategies relevant for your context.

1. We recommend two facilitators for this activity. Women must reflect on power as a group from the perspective of their shared identity used as a marker to gather them in the discussion groups (e.g., displaced adolescent girls, refugee adult women, women who are older from the host community).

2. Explain that:

> As explored in the open story, violence against women and girls occurs because of the harmful beliefs about women and girls and the imbalance of power created in society between men and women.
>
> Shortly, we are about to explore power through another participatory activity but that before jumping into the activity, I want to spend a few minutes *[maximum ten minutes]* grounding us in a collective understanding.

3. Ask a few participants to share in plenary a description of what power looks like for them. Explain:

> Power is the ability to influence or control people, opportunities, or resources.

4. Mention:

> Having power allows an individual to make decisions. In this sense, power can be used to make beneficial decisions, but it can also be abused, and ask participants to offer examples of beneficial and harmful power uses.

5. Follow up by defining the four types of power, including power within, power with, power to, and power over terms. VAWG is about the use and abuse of "power over" women and girls.

6. Transition to the activity, which might help clarify pending questions participants may have as they explore power.

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[36] Adapted from: Raising Voices (2008) The SASA ! Activist Kit for Preventing Violence against Women and HIV Activist Toolkit https://raisingvoices.org/wp-content/uploads/2013/03/downloads/Sasa/SASA_Activist_Kit/START/Training/Start.Training.DeepKnowModule.pdf

7. As illustrated below, facilitators should introduce two flipcharts, each with a circle (preferably using two distinct colors). Circles identically divided into four equal parts, labeled as follows: [with... if... when... because...].

In the home, adult women feel they have power...

with... | if...
when... | because...

In the home, adult women feel they lack power...

with... | if...
when... | because...
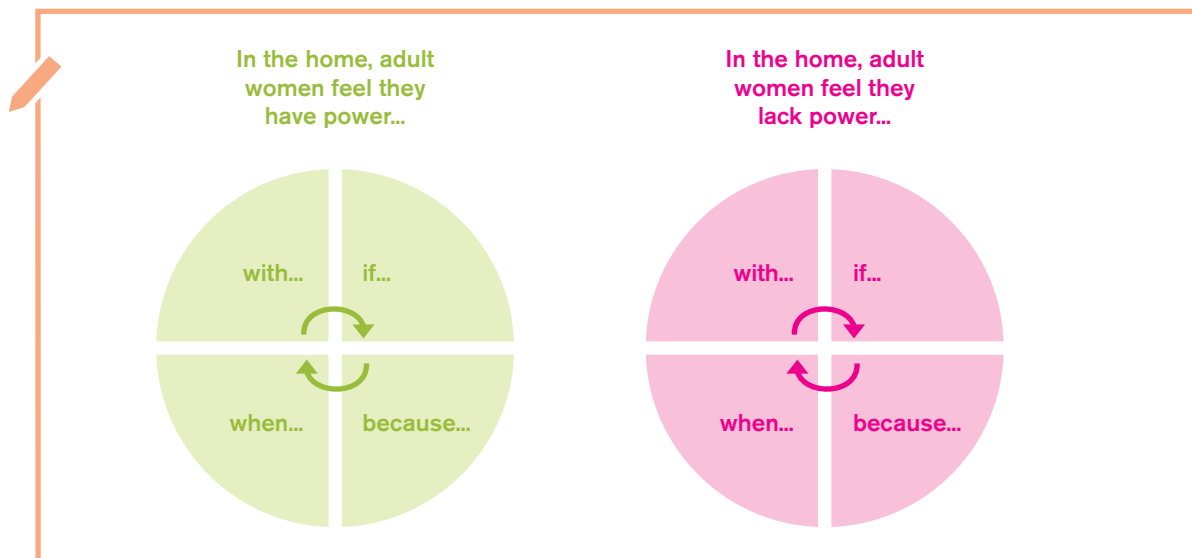
8. Explain:

The circles stand for the space in the home.

9. Divide participants into two groups. Assign one group to think about the situations, decisions, and experiences they feel they [have power] in the home, while the other to think about the situations, decisions, and experiences they feel they [lack power] in the home.

10. During the first 15 minutes, each facilitator should support a group in finding at least two examples for each of the four conditions where they either [have or lack power].

11. When the time is up, one facilitator should transition the group focused on [have power] to answer the following sample questions:

» Does having the power you identified as a group protect women from experiencing violence or increase women's sense of safety? In the home or experienced elsewhere? Is this different from before the emergency?
» Does having the power you identified as a group increase women's risk of experiencing violence or decrease women's sense of safety? Which type of violence? Experienced In the home or experienced elsewhere? Is this different from before the emergency?
» What resources, support, and strategies do women rely on to reduce their risk of experiencing violence in the home? Of experiencing violence outside the home?
» Are there resources, support, and strategies women need to stay safe that they cannot access since the emergency?
» If a program focused on balancing power between women and other family members to reduce women's domestic violence experiences, would the program target? What power would it support women in keeping or gaining, or what influence and control over women would it reduce?

12. While the other facilitator should transition the group focused on [lack power] to answer the following sample questions:

> » Does the lack of power you identified as a group increase women's risk of experiencing violence and decrease their sense of safety? In the home or elsewhere? Is this different from before the emergency?
> » What resources, support, and strategies do women rely on to reduce their risk of experiencing violence in the home?
> » Are there resources, support, and strategies women need to stay safe that they cannot access since the emergency?
> » If a program focused on balancing power between women and other family members to reduce women's domestic violence experiences, would the program target? What power would it support women in maintaining or gaining, or what influence and control over women would it reduce?

13. Aim for a 10-minute plenary feedback session. Have the group focused on [have power] share with…if…when…because… they feel women have power in the home followed by the second group sharing with…if…when…because… they feel women lack power in the home.

14. Lacking enough time to fully debrief activities in the plenary offer an opportunity for facilitators to transition to the closing reflections and conclusion, where the next steps for engagement of women in sharing back the findings and initial design strategies.

BODY MAPPING
MAPPING WOMEN'S EXPERIENCES IN THE EMERGENCY[37]
45 MINUTES

1. Create a large body map that represents women.

2. The body image (and body parts) is used as a focus to explore and record participants' views regarding the different ways in which living in an emergency context has affected their lives. For example, key questions relating to the body map include:

    » (Head) How has the emergency affected their mind, the way they think, and/or their learning? (explore both positive and negative examples)
    » (Eyes) How has the context affected the way people see women? How has the context affected their perceptions of the world?
    » (Ears) How has the context affected how people listen to women?
    » (Mouth) How has the context affected the way men and women communicate? How has it affected the way women communicate with one another?
    » (Main Body) How has the emergency context affected their health? What forms of abuse have women been subjected to?
    » (Heart) How has the emergency context affected the feelings people have for different groups of people in their community? How has it affected their feelings and people's feelings towards them? Who did they get support from in times of need?
    » (Arms/ Hands) As a result of the emergency context, what kinds of activities are they more or less involved in? (for example, forced work, caretaking)?
    » (Legs/ Feet) As a result of the emergency context are there any changes in where women do or do not / can or cannot go?

3. Enable general discussion on the body:

    » Do you think the impacts described here are similar for all groups of women in the community?
    » How do these various impacts of living in emergency contexts influence women's risk of experiencing violence?

FLOWER MAPPING
MAPPING WOMEN'S SUPPORT[38]
45 MINUTES

1. Women can either work in pairs or individually:

   Draw the center of a flower that represents them.

2. Ask women:

   Draw petals to go around the center of the flower to represent which people they seek support during difficult or distressing times.

   The petals should be drawn bigger for the people they most often seek support from and/or the people who support them most.

   The name/characteristic of the people (for example, family, friends, neighbors etc) should be written inside.

   The petals should be drawn smaller for people they occasionally seek support from and/or for people who provide less support – again ensure that the names/characteristics of the people are written inside the petal.

3. Ask women:

   Share your flowers, explaining which people provide the most support to you during difficult times and the kinds of support they provide.

4. Facilitate a discussion on:
   » The characteristics of people that enable them to be most helpful or supportive (as well as negative characteristics that make it harder for some people to provide support to women)
   » The kinds of support most sought by women like them during times of difficulty or distress
   » Any kinds of support that are lacking
   » The role that women play in supporting their peers, siblings etc.

CLOSING
REFLECTIONS AND CONCLUSIONS
15 MINUTES

1. Thank participants and ask participants if they have urgent questions.

2. Remind the group:

> It is hard to talk about violence. We are available to connect you with the GBV caseworker. You should come see us after the meeting.

3. Share your expected timeline and share:

> We hope to engage with you all again to discuss overall findings and facilitate program design discussions.
>
> Come and see us at the close of the activity to discuss how to reach you for the second phase if you are interested in participating.

Part 2: Facilitating program design discussions

These discussions require your careful thought and design because their focus will depend on the findings collected through discussions using **Part 1** of this tool and findings from other assessment tools you will have used, among other factors. You can use the outline presented in the **Getting Started: Step by Step** section of the guidance document, **Appendix B**, and the participatory methodologies below to design participatory discussions with women and girls, which will best support the design of your prevention strategy.

PAIR WISE PREFERENCE RANKING
DESIGNING PREVENTION STRATEGIES BASED ON WOMEN'S PREFERENCES
60 MINUTES

You can use of preference ranking participatory tool to explore, for instance, women's preference among:

» Risk factors prevention programing should actively aim to mitigate
» Protective factors prevention programming should enhance / support
» Methods for disseminating information about prevention programming in the community
» Stakeholders the program should engage
» Community leaders the program should inform
» Humanitarian sector, the prevention program should liaise with and influence.

Brainstorm issues that require ranking. Consolidate into concise themes/ issues for ranking and develop symbols or visual representations of each so that all women will be able to identify the options.

Avoid at all costs preference ranking discussions turning into a prioritization of types of violence and carefully address comments from participants which qualify certain types of violence as 'worse' than others.

1. Preparations:
   » Draw symbols on a flip chart paper that represent the options related to the component women will voice their preference for.
   » Draw a matrix (see next page) to analyze the preferences with women in real time.
   » Draw the corresponding symbol and write each of the options along the matrix's top and down the matrix's side (in opposite order).

2. Introduce the preference ranking activity to groups of women.

   This is a tool that enables you to explore which component (e.g., protective factors) you most prefer the prevention program to focus on and why.

3. Explain the options and show the related symbol to make sure everyone understands what they will be voting on. Once you are done explaining, check their understanding by asking volunteers to paraphrase the symbols.

4. Ask participants:

> Compare, for example, two factors at any one time, indicating which factor (out of the two) you prefer (for whatever reasons).

Factors	Factor 1	Factor 2	Factor 3	Factor 4
Factor 4	Discuss **Factor 1** and **Factor 4**	Discuss **Factor 2** and **Factor 4**	Discuss **Factor 3** and **Factor 4**	
Factor 3	Discuss **Factor 1** and **Factor 3**	Discuss **Factor 2** and **Factor 3**		Discuss **Factor 4** and **Factor 3**
Factor 2	Discuss **Factor 1** and **Factor 2**		Discuss **Factor 3** and **Factor 2**	Discuss **Factor 4** and **Factor 2**
Factor 1		Discuss **Factor 2** and **Factor 1**	Discuss **Factor 3** and **Factor 1**	Discuss **Factor 4** and **Factor 1**

5. Ensure that all the participants are involved in the discussion. Before moving on to another comparison ask the women:

> Indicate your preference between the two factors (e.g. **Factor 1** and **Factor 4**).

Note down the factor which was voted for as shown in the example below:

Factors	Factor 1	Factor 2	Factor 3	Factor 4
Factor 4	Overall preference for **Factor 1**	Overall preference for **Factor 4**	Overall preference for **Factor 3**	
Factor 3	Overall preference for **Factor 3**	Overall preference for **Factor 3**		Overall preference for **Factor 3**
Factor 2	Overall preference for **Factor 1**		Overall preference for **Factor 2**	Overall preference for **Factor 2**
Factor 1		Overall preference for **Factor 1**	Overall preference for **Factor 3**	Overall preference for **Factor 1**

6. Count the scores.
   (Example: Most Preferred: **Factor 3** (5 times preferred), 2nd = **Factor 1** (4 times preferred); 3rd = **Factor 2** (2 times preferred); least = **Factor 4** (1 time preferred).

7. Enable quality discussions on the reasons for their preferences.

   Which factors are most and least preferred by the group? Why? For what reasons?

   Record the various views discussed.

8. Enable discussion on what would be necessary to ensure support for the most preferred factors by distinct groups of women and girls.

As you will be doing this with distinct groups of women make sure you keep a master of the matrix using a different color to record the preference of different groups of women and girls. This way you can analyze whether there are significant differences among groups which will inform your implementation. (e.g., all women preferred life skills, older women preferred age specific support groups, etc.)

STRATEGIC PLANNING
ANTICIPATING RISKS, OBSTACLES, AND RESISTANCE
90 MINUTES

Use this activity once you have determined the key approaches, strategies, and activities of the prevention program to predict risks, obstacles and resistance that may arise and prepare strategies for addressing them in advance.

The description of the activity below focuses on risks, but the same could be done to explore obstacles women may face in participating / benefiting from the prevention strategies, as well as identifying forms of resistance men and other privileged groups may express towards each strategy using the example of risks.

While risks in relation to your prevention strategy includes the risk that the project implemented based on the strategy will not be able to meet its goals, this activity should primarily focus on risks from the perspective of the prevention program (in meeting the objectives or through the process) of unintentionally causing harm to women or to specific groups of women within the program.

1. Divide participants into small groups according to the specific strategies your prevention program will use. Each participant first spends 15 minutes identifying risks on the way to implementing the groups' assigned strategy using the following questions as a guide.

Are there potential risks to women resulting from this strategy such as:
» Exacerbating or initiating conflict in the community by making power relations explicit or by unknowingly directing benefits to specific individuals or social groups?
» Further marginalizing certain social groups by not recognizing them as important stakeholders to include in the process?
» Accidentally aiding elite members of the community in increasing their power, access and rights over resources through legitimizing their claims through "participatory" activities?

2. Tell each group:

Choose one person to stay and share their thoughts while the rest of the group rotates through each strategy every 5 minutes.

Reflect on risks not previously mentioned to those already identified.

3. In a plenary, ask for volunteers to share their impressions:

» What stands out?
» What are the implications of these risks for women?

4. Ask groups:

Spend 30 minutes reflecting on the specific risks to women each obstacle has and outline ideas for overcoming these obstacles or addressing resistance, keeping women's safety at the forefront.

5. Have each group present key strategies in plenary discussions.

Assessment - Safety mapping

Design of this tool

Transformational change of power is inherent to GBV programs, and it begins at the onset of an emergency with feminist participatory action research approaches during the assessment phase. These approaches emphasize that gender inequality is the root cause of violence against women and girls and that violence, discrimination, and inequality shape every aspect of women and girls' lives. Assessments focus on the individual, social, systemic, and institutional changes necessary to achieve gender equality.

This tool was designed based on the following feminist participatory action research principles to EMPOWER your assessment and design of transformative prevention programming with women:

TAKES AN INTERSECTIONAL APPROACH

This tool supports identifying experiences of discrimination, exclusion, and marginalization; recognizing the diversity of women's experiences, identities, and power that shape women's sense of safety. The participatory mapping discussion honors voice and difference.

PRIVILEGES WOMEN'S VOICES AND RECOGNIZES WOMEN AS ACTIVE AGENTS

This tool recognizes women as the experts of their own lives and experiences and assumes that women are already taking measures to support their safety. The interactive activity fosters discussions to understand a community based on women's perceptions of safety.

FOSTERS SOLIDARITY AND COLLECTIVE ACTION

The collective mapping activity strengthens solidarity between women by exploring their sense of safety within their community and empowers women to collectively articulate the changes they wish to see to feel safer.

Purpose and use of this tool

The safety mapping and planning tool is a woman and girl-led analysis of community resources based on diverse groups of women's and girls' mobility, which supports the design of prevention activities in acute emergencies focused on increasing women's and girls' sense of safety through risk reduction and mitigation strategies.

This tool allows GBV prevention staff to:

» Gain a time and location-specific understanding of enablers and barriers to women's and girls' mobility, access to community resources and humanitarian services, and their feelings of locations considered safe or not in the community.

» Compare maps produced by diverse groups of women and girls to tangibly visualize how multiple intersections of identity alter women's and girls' mobility, sense of safety, and access to services in the same community.

» Reflect on maps produced with women and girls through facilitated discussions that unearth women's and girls' existing safety strategies and allow women and girls to discuss planning strategies for different locations in their community collectively.

HOW DOES LACK OF SAFETY INFLUENCE WOMEN'S LIVES?

» Fear of using spaces freely at any time of day
» Restricted mobility and choices
» Obstacles to participation in social life
» Dependence on men for protection
» Lack of self-confidence, lack of autonomy
» Isolation
» Effects on physical and psychological health
» Fear passed on to girls and other women
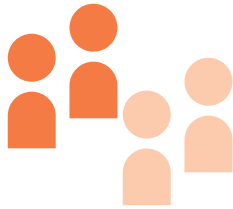
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Assessment - Safety mapping

Before using this tool

GROUP WOMEN

Group women according to broad age categories and a shared feature of their identity or common experience (e.g., IDP adult women, women who are older from the host community, adult [ethnicity] women, adult female head of household). Given the participatory approach to discussions, each group should not include more than 8-10 participants

USE IN DEFINED LOCATIONS
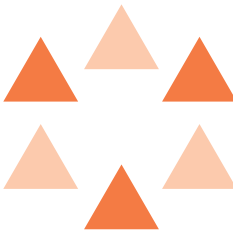
This tool works best in defined locations such as a neighborhood, village, camp, or informal settlement.

TAKE PICTURES

Take pictures of the maps should throughout each step of the maps are drawn.

REVIEW THE METHODOLOGY
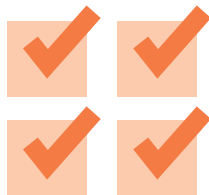
It is important to review the methodology before conducting the mapping activity to adapt with available materials (e.g., substitutes for stickers and post-it notes) and, more importantly, to ensure inclusivity (e.g., ensuring women and girls with different impairments can participate).

EMPOWER
ASSESSMENT TOOL
Safety mapping guide

Contents

Introduction

DATE OF MAPPING:

NAME OF FACILITATOR:

NAME OF NOTE TAKER:

IF INTERPRETER IS NECESSARY, NAME OF INTERPRETER:

FEATURES OF THE GROUP (AGE GROUP, STATUS, ETC.):

SAMPLE INTRODUCTION SCRIPT

Welcome and thank you for taking the time to join me for this discussion today.

My name is *[insert your name]*, and I work with *[insert the name of your organization and consider sharing what services you already have in place for women and girls, e.g., women and girl safe space]*.

I gathered you today because I'm interested in learning about safety in your community. Your answers will help us support women's and girls' safety.

I expect this discussion to take about two hours and a half. I will be asking you to draw maps of your community showing places significant to you, places important to your daily activities, where you feel safe. After the map is drawn, I have a list of questions that I'd like to pose.

Participation in the discussion is entirely voluntary. All your answers will be treated confidentially, and I will not identify who said what or use your names in any way so you can feel comfortable to talk freely, and you do not have to answer any questions you do not want to answer. You may also leave the activity at any time for any reason. I will not ask you why you do not want to take part.

The purpose of the notes is to ensure that the information collected is precise. You each also have an essential role in ensuring confidentiality. During the discussion, when sharing examples or experiences, individual names should not be used.

After the discussion, do not share the details of who was in the group or what was discussed. If someone asks, explain that you were speaking about health and safety issues for women and girls to help inform services.

Does anyone have any questions about the purpose or confidentiality of this discussion?

Do I have your agreement to keep confidentiality? May we begin?

Step 1
20 MINUTES

1. Ask the women:

    What do you think of when you hear the word "Safety"?

    Make sure to emphasize various kinds of safety: physical, emotional, social, etc.

2. Use the following questions as a guide:

    »   Why is it important to feel safe?
    »   Does everyone feel equally safe in this community? Why or why not?
    »   Does everyone feel equally safe in their households? Why or why not?
    »   What are the consequences of not feeling safe?

3. Let the women know:

    Now we want you to think about safety in this community.

4. Pass out large pieces of flipchart paper and markers.

5. Facilitators should allow the women or girls to work by themselves to draw their communities. Other women should support women who may not be literate or able to draw to support inclusion. Have some of the groups draw a daytime map and others draw a nighttime/evening map.

6. If groups are having a challenging time getting started, the facilitator can step in and help the group:

    »   What do you consider to be the "center" of your community?
    »   Where are the "edges of your community"?
    »   Spend time drawing your community between the center and the boundary.

Step 2
60 MINUTES

1. Pass out stickers/post-it notes of one color for **homes**. Tell each group:

   Put these stickers on your map to show where the homes and residential areas are in your community. Stickers do not need to show the exact numbers of homes.

2. Use the following questions as a guide:

   » How would you describe these homes?
   » How do women (or girls) like you feel about their homes in general?
   » How much do women (or girls) like you move outside of their home during the day? What about at night?
   » Are there women (or girls) who don't leave the house at all?
   » What factors determine whether women and girls can move outside their homes?

3. Ask them:

   Complete the following sentences: *If violence happens to a woman in this place,*

   » *The safest thing for her to do is….*
   » *If she needs to leave this place, she will…*
   » *If she cannot leave this place, the safest thing for her to do is…*
   » *If she is able to get away from the violence, she will go…*
   » *If she cannot go there, she will go…*

4. Pass out stickers/post-it notes of a different color for **places of work** (or if girls, school, or places of learning). Ask the groups:

   Put stickers to show women's (or girls') learning spaces and workplaces in your community.

5. Use the following questions as a guide:

   » Can you show me where you put your stickers?
   » What types of spaces (work or learning) have you put on here?
   » What type of work (or learning) do women do there?
   » How do women (or girls) like you get there?
   » How much time do women or girls spend there? During what times?
   » What might keep women from working (or girls from going to school)?

6. Ask them:

   Complete the following sentences: *If violence happens to a woman in this place,*

   » *The safest thing for her to do is….*
   » *If she needs to leave this place, she will…*
   » *If she cannot leave this place, the safest thing for her to do is…*
   » *If she can get away from the violence, she will go…*
   » *If she cannot go there, she will go…*

7. Pass out stickers/post-it notes of a different color for **places of worship**. Tell each group:

   Put these stickers on their map to indicate places of worship are in your community.

8. Use the following questions as a guide:

   » Could you describe these places of worship for me?
   » How often would you say that women and girls in this community go to these?
   » What role do leaders at these places of worship and religious buildings have in women's lives (or girls your age)?

9. Ask them:

   Complete the following sentences: *If violence happens to a woman in this place,*

   » *The safest thing for her to do is….*
   » *If she needs to leave this place, she will…*
   » *If she cannot leave this place, the safest thing for her to do is…*
   » *If she can get away from the violence, she will go…*
   » *If she cannot go there, she will go…*

10. Pass out stickers/post-it notes of another color for **places where women and girls meet or socialize.** Tell each group:

    Put these stickers on their map to show the places where women and girls meet or socialize in their community.

11. Use the following questions as a guide:

    » Could you tell me about these places?
    » What are the reasons why women and girls go to these places?
    » What kinds of things do women do in these places?
    » Can every woman go here?
    » How do women (and girls your age) learn that these are places to meet or socialize?
    » Who else tends to be at these places where women (and girls your age) meet or socialize?

12. Ask them:

    Complete the following sentences: *If violence happens to a woman in this place,*

    » *The safest thing for her to do is….*
    » *If she needs to leave this place, she will…*
    » *If she cannot leave this place, the safest thing for her to do is…*
    » *If she can get away from the violence, she will go…*
    » *If she cannot go there, she will go…*

13. Pass out stickers/post-it notes of another color for **other types of places** they would like to add to their map (e.g., shops, markets, public halls or centers, water/boreholes, places to collect firewood, health centers, hospitals, internet access points, food and non-food distribution points, food, etc.). Tell each group:

    Put these stickers on their map to show other vital places on the map for women (or girls) like them.

14. Use the following questions as a guide:

> » Could you tell me what you put down for this sticker?
> » Are these popular places for women (or girls) like you?
> » What are the reasons why women (or girls) like you would visit them?
> » Do most women (or girls) go to these places?

15. Ask them:

> Complete the following sentences: *If violence happens to a woman in this place,*
>
> » *The safest thing for her to do is….*
> » *If she needs to leave this place, she will…*
> » *If she cannot leave this place, the safest thing for her to do is…*
> » *If she can get away from the violence, she will go…*
> » *If she cannot go there, she will go….*

Step 3

60 MINUTES

1. For this last step, facilitators will use the maps to understand more about the community from the participants' perspectives.

   Note that some of the questions ask participants to use colored markers to indicate certain things about the map, so markers should be at hand. As appropriate, have participants surround the map placed either on the floor in the middle of the table or on the wall.

2. Use the following questions as a guide:

   Where on this map are the places women (or girls) like you feel safest during the day? Can you circle those in yellow?
   » Could you tell me more about what makes them feel safe there?
   » What types of things are they feeling safe from?
   » Are there groups of women or girls who might not feel safe in this place?
   » What would make women (or girls) not feel safe in this place?

   What about during the night? Where on this map do women (or girls) like you feel safest? Can you circle those places in blue?
   » Could you tell me more about what makes them feel safe there?
   » What types of things are they feeling safe from?
   » Are there groups of women or girls who might not feel safe in this place?
   » What would make women (or girls) not feel safe in this place?

   What about the places where women (or girls) like you do not feel safe during the day? Could you circle those places in red?
   » What are the reasons why they do not feel safe there?
   » Are there strategies that help make this place feel safer?
   » Are there groups of women (or girls) who might not feel safe in this place?
   » What would make women (or girls) not feel safe in this place?

   Where on this map are the places where women (or girls) like you do not feel safe during the night? Can you circle those places in black?
   » What are the reasons why they do not feel safe there?
   » Are there strategies that help make this place feel safer?
   » Are there groups of women (or girls) who might not feel safe in this place?
   » What would make women (or girls) not feel safe in this place?

   Where is the best place to go if a woman (or girl) has questions about a program or service? Can you put a blue question mark to indicate this on your maps?
   » What makes this place the best?
   » How do women and girls know about each of these places?
   » What are the reasons that would prevent some women and girls from using any of these places?

   What about if someone is hurt or has experienced violence? Can you put an orange star to show this on your maps?
   » What makes this place the best?
   » What type of services or information can you get there?
   » What kind of service or information would women and girls like to have there?
   » How do women and girls know about this place?
   » What are the reasons that would prevent some women and girls from using this place?

Closing: Reflections and conclusions

15 MINUTES

1. Thank participants and ask participants if they have questions about what was discussed

2. Share your expected timeline. Share:

> We hope to engage you all again to discuss overall findings and facilitate program design discussions.
>
> Come and see us at the close of the activity to discuss how to reach you for the second phase if you are interested in participating.

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Supervision - GBV prevention candidate attitudes and beliefs survey

Why use the Candidates Attitudes and Beliefs Survey?

This tool supports recruiters in identifying during interviews whether candidates have positive or negative attitudes and beliefs toward key gender issues, that impact the well-being and rights of women and girls. The tool by itself is not sufficient to determine whether a candidate should or should not be hired, but it can support the following:

MAKING A FINAL DECISION BETWEEN TWO OR MORE FINAL CANDIDATES

If two or more candidates make it to the last recruitment stage, the answers to the 5 statements (in the table below) could influence the final decision.

IDENTIFYING GAPS OR NEGATIVE BELIEFS

If the candidate disagrees with some of the statements, both recruiter and manager should consider:

» Capacity-building implications (are there enough resources/capacities to address this gap/belief?) If there aren't sufficient capacities to immediately address the gaps/beliefs identified, the candidate should likely not be hired.

» Impact on team dynamic (how this attitude or belief will influence prevention work/ staff dynamic).

» Effect on accountable women led programming (how this attitude or belief will influence the relationship with women and girls).

IDENTIFYING IF THERE IS AN IMMEDIATE NEED FOR SPECIFIC TRAINING OR SUPPORT

For example, if the candidate answers "Agree" to statement 5, this person needs to receive a 'Protection from Sexual Exploitation and Abuse' training and then reassessed before signing the contract and starting work.

When to use the Candidates Attitudes and Beliefs Survey?

The tool is used during the recruitment process. The 5 statements in the table below should be framed as questions to every new candidate interviewed for any prevention position. The statements/questions should be added to a tailored interview questionnaire and cannot substitute enquiries on technical, managerial or any specific set of skills.

The use of this tool during recruitment does not replace the use of GBV Prevention Staff and Volunteer Attitude Survey as a capacity-building tool for WGSS staff and volunteers.

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How to use the Candidates Attitudes and Beliefs Survey?

INSTRUCTIONS

The interviewer should read the statement and ask the candidate to say if s/he 'Agrees' or 'Disagrees' with the statement. The interviewer will tick the answer given.

The column "Considerations for recruiter" suggest what to keep in mind before hiring a candidate who may have negative attitudes and beliefs, which can negatively impact the well-being and rights of women and girls.

SCORING

Each positive attitude scores 1, each negative attitude scores 0.

If the candidate has the right attitude/beliefs toward all 5 statements, s/he will score 5. If s/he has negative attitudes/ beliefs toward all 5 statements s/he will score 0.

The higher the score, the better the attitude. The lower the score the worse the attitude.
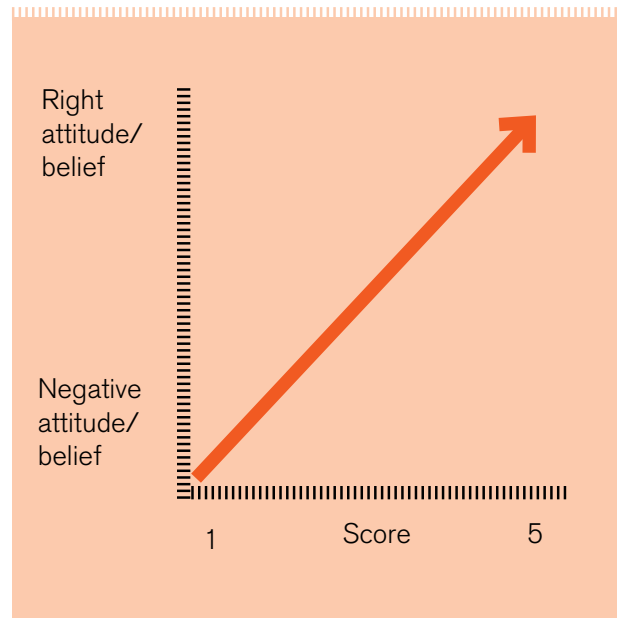
If some negative attitudes are identified during the recruitment process, these should be reassessed after one to two months and after putting in practice capacity-building strategies to address the attitude identified. The assessment should be conducted using Tool GBV Prevention Staff and Volunteer Attitude Survey.

EMPOWER
SUPERVISION TOOL
Candidate attitudes and beliefs survey

DATE OF SURVEY:

NAME OF INTERVIEWER:

NAME OF CANDIDATE:

EMPOWER

Candidate attitudes and beliefs survey

ATTITUDE / BELIEF	1 POINT	0 POINT	CONSIDERATIONS FOR RECRUITERS
A woman should tolerate violence in order to keep the family together.	Disagree	Agree	The candidate agrees: » Consider if the candidate is appropriate to the role s/he will be assigned to. » Consider what type of training or support your organization can provide to the candidate and if that will be sufficient to address the negative belief identified. » Ask yourself how to prevent/mitigate this attitude to avoid harm to colleagues or staff members, and a negative impact on prevention activities.
A woman's most important role is to take care of her family.	Disagree	Agree	The candidate agrees: » Consider if the candidate is appropriate to the role s/he will be assigned to. » Consider what type of training or support your organization can provide to the candidate and if that will be sufficient to address the negative belief identified. » Ask yourself how to prevent/mitigate this attitude to avoid harm to colleagues or staff members, and a negative impact on prevention activities.
It is okay for a woman to work outside the home.	Agree	Disagree	The candidate disagrees: » Consider if the candidate is appropriate to the role s/he will be assigned to. » Consider what type of training or support your organization can provide to the candidate and if that will be sufficient to address the negative belief identified. » Ask yourself how to prevent/mitigate this attitude to avoid harm to colleagues or staff members, and a negative impact on prevention activities.
Homosexuality is wrong.	Disagree	Agree	The candidate agrees: » Consider what type of training or support your organization can provide to the candidate and if that will be sufficient to address the negative belief identified. » Ask yourself how to prevent/mitigate this attitude so it will not impact negatively affect women's and girls' of all sexual orientations' engagement in prevention activities » Ask yourself how to prevent this belief from discriminating against women and girls of all sexual orientations from accessing the wider program's services

Candidate attitudes and beliefs survey

ATTITUDE / BELIEF	1 POINT	0 POINT	CONSIDERATIONS FOR RECRUITERS
Women and girls are very lucky when they have a romantic or sexual relationship with humanitarian workers because they get more assistance.	Disagree	Agree	The candidate agrees: » Ask yourself, do we have the capacity to strictly monitor the candidate's attitudes toward the women and girls we serve? » Ask yourself, can we deliver a PSEA training to the candidate before making her/him sign the contract?

TOTAL SCORE

5

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Supervision - Facilitation observation checklist

Why use the Facilitation Observation Checklist?

The Facilitation Observation Checklist supports the monitoring of quality facilitation of group discussions for GBV prevention. These include for example information sessions led by outreach staff and volunteers on GBV services available, safety audit discussions with women and girls, and risk reduction discussions with community stakeholder.

When to use the Facilitation Observation Checklist?

This tool should be used once facilitated discussions are implemented as a program activity. Supervisors are free to determine how frequently they use this tool. Supervisors will likely use this tool more frequently (i.e. weekly per facilitator) in the first 12 weeks of activities being launched in a new location, with newly displaced women and girls, or with newly recruited facilitators to ensure prevention facilitated discussions are accountable towards women and girls and that facilitators receive supportive supervision.

If the GBV program plans on reporting on a prevention indicator such as "% of GBV prevention staff who meet quality criteria for facilitation skills" as part of the emergency response project's logical framework, the facilitation observation checklist will be collected depending on what has been agreed with the donor.

How to use the Facilitation Observation Checklist?

Before starting the observation, the observer should review the questionnaire. Being familiar with the questions will help in identifying details to fill out the tool at the end of the observation session.

During the activity, the observer should tick the boxes of the checklist, but avoid writing notes which could bias participation and influence the flow of the activity. Observe the activity quietly from beginning to end while completing the checklist below.

As the supervisor, discuss your observations with the facilitator directly after the activity. The debriefing can also take place during the capacity assessment and capacity-building plan meeting. In fact, gaps identified through this activity can directly inform EMPOWER Supervision Tool: Capacity Building Plan.

Remember to be encouraging and positive – point out what they did well at first, and then where there might be areas for improvement. Any consistent gaps should be raised during supervision meetings to help build staff's capacities.

If the checklist is filled out by a colleague, it should be submitted to the supervisor of the individual observed.

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Supervision - Facilitation observation checklist

Accountable practice[39]

DO	DON'T
Listen to women and take what they say seriously.	Dominate discussions, ignore or dismiss women's contributions.
Believe women about their lived experiences.	Doubt, question or judge women.
Name men's violence against women and girls as a critical issue.	Minimize or justify violence.
Continually recognize and transform your own harmful attitudes, beliefs, behaviors, and male privilege.	Be defensive or think that you have "done" the work – accountability is a lifelong process and commitment.
Understand how male power and privilege operate in your community.	Make it a competition about who suffers more from gender inequality, or bring the conversation back to how men are harmed by expectations of masculinity. Keep the focus on women and girls.
Support the leadership of women.	Take over women's spaces or work, or speak for women. Ask women how you can help them and what they need from you, and do what they say.
Talk with other people about sexism and violence against women and girls.	Stay silent or collude with other men.
Speak out against harm and model change for other men.	Look the other way or ignore disrespectful or abusive behavior
Ensure all women and girls are able to engage and participate in activities.	Favor some women's /girl's voices over others in group discussions.
Observe and be aware of power in facilitated activities and take steps not to reinforce unfair dynamics which discriminate against specific identities women and girls may hold.	Lecture, preach or teach women in facilitation style.
Work hard every day for change and equality.	Expect that change will happen overnight. Working towards transformational change and equality means taking action every day to help create a safer world for women and girls.
Support survivors of VAWG by asking them how you can help.	Assume what survivors want or need, or push them to take any particular action. Just listen and be supportive. Don't mediate or attempt to provide counseling.
Take responsibility for the changes you make and how you make them.	Make your changes dependent on women's recognition, gratitude or validation.

[39] EMAP Implementation Guide

EMPOWER SUPERVISION TOOL
Facilitation observation checklist

NAME OF OBSERVER:

OBSERVER ROLE:

Supervisor

Other staff member (specify):

NAME OF FACILITATOR BEING OBSERVED:

ROLE OF FACILITATOR BEING OBSERVED:

DATE:

LOCATION (NAME OF CAMP/SETTING/ COMMUNITY/TOWN):

TYPE OF ACTIVITY:

Facilitation observation checklist

PARTICIPATION AND FACILITATION	YES (+1)	NO (+0)	N/A
Did the facilitator ask the whole group questions during the session?			
Did the facilitator demonstrate active listening skills?			
Did all participants have an opportunity to speak, either in groups/pairs or as part of the wider group?			
Did the facilitator create space for the inclusive and equal participation of participants with different abilities?			
Were participants actively engaged?			
Did the facilitator allow for different views among participants to be shared without interruptions from participants with opposing views?			
Did the facilitator establish or remind participants of ground rules to ensure a positive group dynamic?			
Did the facilitator hold participants accountable in a respectful way when participants were not following ground rules affecting the group dynamic?			
Did the facilitator watch for non-verbal cues indicating discomfort or otherwise from participants and adjust facilitation?			
Did the facilitator stay on the topic of the session?			
Did the facilitator keep the conversation natural and allow for good flow?			
Did the facilitator display a positive attitude towards all members of the group?			
Participation & Facilitation total *(Tally total number of "yes" answers)*			

If the observer is the supervisor, highlight the key areas for improvement:

ACTIVITIES	YES (+1)	NO (+0)	N/A
Was there a welcoming/an icebreaker activity at the start of the session?			
Was there a discussion about group ground rules?			
Was there any group work during the session?			
Was the activity chosen by the women and girls attending?			
Was a recap provided at the end of the session and information provided on what to expect for the next session?			
Were the activities age-appropriate?			
Activities total *(Tally total number of "yes" answers)*			

What resources were used during this activity? *(Check all that apply.)*

Handicraft materials

Technology/audio-visual resources

Other instructional resources. Please specify:

If the observer is the supervisor, highlight the key areas for improvement:

OVERALL

Sum the Participation & Facilitation total and the Activities total:

If the total is 10 or above, the individual meets quality criteria for facilitation skills.
If the total is 9 or below, the facilitator should be offered additional training and support.

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What were the best things about this session?:

Are there any additional areas for improvement?

Any other comments?

Supervision - Individual capacity assessment for GBV prevention staff

Why use the Individual Capacity Assessment?

This tool supports supervisors with assessing GBV prevention staff's knowledge and understanding of key principles and approaches within the first twelve weeks of prevention programming in emergencies and helps inform tailored capacity-building plans.

Despite the scoring system, this tool is not a performance evaluation tool. Within the scope of supportive supervision, the scoring system is meant to track individual staff's progress over time. This tool is composed of a blank capacity assessment template as well as an annotated version for supervisors which contains the scoring criteria and expected answers for each question.

When to use the Individual Capacity Assessment?

Within the first twelve weeks of launching prevention programming in emergencies, prevention staff should be assessed at minimum upon hire and at the end of the twelve weeks, ideally with a mid-point assessment around week 6. This will allow comparison of results, to monitor knowledge gained over time related to key approaches, principles and competencies to prevention programming.

Because this tool is expected to be tailored over time, when used beyond the first twelve weeks of programming supervisors should change the questions provided in this version to better reflect the level of knowledge and expected level of knowledge and competency of staff. Supervisors can seek technical support as needed to support this update to the tool as this might be overwhelming or challenging for some supervisors, in some settings, and according to what may be happening on the ground at the time may not have bandwidth to develop this alone.

How to use the Individual Capacity Assessment?

Supervisors should review the questions and decide how to score the answers by tailoring the annotated tool prior to rolling the assessment using the blank template of the tool with prevention staff. It is important to remind staff that this tool is used to assess knowledge and understanding of the prevention program and to develop a tailored capacity-building plan. Despite the score system, the supervisor should explain that this tool is not a performance evaluation tool. The score is intended to help compare progress over time.

Instructions for Administering the Tool

The individual capacity assessment tool is not a performance evaluation tool but aims at identifying existing knowledge relevant for prevention programming. Each staff member should undertake the questionnaire on a regular basis over a period of time. This will allow for comparison of results, to monitor progress on specific thematic areas of programming.

Before delivering the questionnaire, supervisors should carefully review the language and the answers provided in the annotated tool (at the end of this document). Answers should be customized to suit the technical knowledge provided and the level of knowledge desired.

The tool should be used on a regular basis as the prevention team is established and programming launched, until the staff member comfortably answers all questions correctly and extensively. Importantly, if the questionnaire is used on a regular basis, over time it could become meaningless for staff who answer the same questions repeatedly. Supervisors should therefore consider increasing the scoring criteria for answers to be considered fully met or changing the questions of the tool overtime as staff continue to grow in their knowledge and experience.

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Supervision - Individual capacity assessment for GBV prevention staff

Instructions

This capacity assessment tool should be conducted through a bilateral interview between the staff member and supervisor (or capacity-building focal point) in a quiet and confidential location.

1. The supervisor takes some time to familiarize her/himself with the tool, questions, answers and scoring system before meeting with the staff member.

2. The supervisor takes some time to review and tailor the annotated tools provided at the end of this document and the possible answers that the staff member should give to get the full score.

3. At the meeting the supervisor should explain that this tool is used to assess knowledge and understanding of the prevention program and to develop a tailored capacity-building plan. The facilitator should explain the fact that, despite the score system, this tool is not a performance evaluation tool. The score is intended to help compare progress over time.

4. The supervisor will leave space for questions and answers and will ask for verbal consent to proceed.

5. The supervisor will ask the staff to answer the questions of the questionnaire.

6. The supervisor will write down the answers in the "answer column" before moving to the next question.

7. At the end of the exercise, the supervisor will take a few minutes to assign a score to each question and to calculate the final score. If the de-brief is planned for right after the exercise, while the supervisor is scoring, the staff can take a short break and come back when the scoring is finalised.

8. To score the tool, supervisor should compare the answers given by the staff members with the answers provided in the annotated tool. Scoring will be based on how many correct answers were given. Wrong answers do not score.

9. Supervisor and staff member then discuss the tool outcomes, strategize how to fill gaps identified and start filling out the capacity-building plan.

DURING THE ACTIVITY, THE FACILITATOR WILL SCORE EACH RESPONSE ACCORDINGLY:

Met: If the individual can answer the questions correctly and thoroughly, they will receive a mark of 'met'.

Partially Met: If the individual can answer at least 50% of the questions, they will receive a mark of 'partially met'. For example, if the question is, "what are the GBV guiding principles" and the person can only name 3, s/he will receive a 'partially met' score.

Not met: If the individual is unable to answer the question, they will receive a mark of 'unmet'.

At the end of the exercise, the supervisor may add general questions to know more about new staff members (this includes volunteers). Despite the fact that no score will be associated with open-ended questions, through a larger discussion, the supervisor may identify different gaps and capacity-building needs, and how new staff and volunteers perceive and understand programming (this information will inform the capacity-building plan).

Open-ended questions should be customized to the context, but some examples may be:

What do you think is the added value of the GBV risk reduction activities implemented in this community?

Why do you think we are prioritizing working with women and girls at this stage of the prevention programming and less with men ?

EMPOWER SUPERVISION TOOL
Individual capacity assessment for GBV prevention staff

DATE:

LOCATION (NAME OF CAMP/SETTING/COMMUNITY/TOWN):

NAME OF SUPERVISOR:

ROLE OF SUPERVISOR:

NAME OF PREVENTION STAFF:

ROLE OF PREVENTION STAFF:

TRANSLATION NECESSARY

No

Yes
The translation was from   to

Language   *Language*

Individual capacity assessment for GBV prevention staff

	KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	ANSWER	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
1	What is prevention?	Staff should provide the comprehensive definition for full score				
2	Why is it important for GBV programs to focus on preventing GBV in emergencies?	Staff should mention at least 2 reasons to get the full score				
3	What are the key GBV prevention programming approaches?	Staff should mention at least 4 approaches to get the full score				

Individual capacity assessment for GBV prevention staff

	KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	ANSWER	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
4	What are the 6 types of GBV?	Staff should mention at least 4 examples to get the full score				

	KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	ANSWER	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
5	Explain the following three components of GBV prevention programming in emergencies: a Regularly undertake assessments and consultations b Direct risk reduction / mitigation actions c Advocacy	Staff must explain the three components (regardless of how detailed) in order to get full score				

Individual capacity assessment for GBV prevention staff

	KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	ANSWER	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
6	What are best practice principles of prevention	Staff should mention all principles for full score				
7	What are some principles of women centered programming?	Staff should mention at least 3 principles to get the full score				

	KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	ANSWER	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
8	What do these principles look like when applied in prevention programming?	Staff should mention at least 3 examples to get the full score				
9	How do we meet women's and girls' safety needs in an acute emergency according to the following risks: a Risks involving unmet needs b Risks involving their living space: c Risks involving general safety when doing routine activities d Risks associated with being unaware or not knowing	For each risk the supervisor decides to ask about a correct answer must be provided for full score				

	KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	ANSWER	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
10	What is an intersectional approach and why is it important for prevention programming?	Staff should provide the comprehensive definition for full score				
11	Explain the steps you would take if a woman or girl reported to you a safeguarding issue occurring within the GBV program	Staff should mention at least 5 examples to get the full score				

	KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	ANSWER	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
12	During an information dissemination session, a woman starts disclosing a personal GBV incident. As a facilitator, what would you do?	Staff should mention at least 3 examples to get the full score				
13	What would you do if you don't know the answer to questions asked by women and girls in a group setting?	Staff should provide at least 3 examples for full score				

	KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	ANSWER	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
14	During an emergency what should you be concerned about when conducting outreach to women and girls?	Staff should provide at least three examples for full score				
15	How can prevention staff demonstrate accountability to women and girls through their role in programming as well as personal accountability towards preventing violence against women and girls?	Staff should provide at least three examples for full score				

	KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	ANSWER	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
16	If a harmful attitude, belief, or behavior occurs during a community discussion, what are the steps to follow?	Staff should provide at least 3 examples for full score				

Individual capacity assessment for GBV prevention staff

QUESTIONS	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
SUBTOTAL SCORE			
TOTAL SCORE			

EMPOWER SUPERVISION TOOL
Individual capacity assessment for GBV prevention staff

[annotated]

Below is the annotated Individual capacity assessment - this annotated tool includes "possible answers" for the template provided above. Remember any changes made in this template should be mirrored in the blank tool above .

EMPOWER

Individual capacity assessment for GBV prevention staff

KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	POSSIBLE ANSWERS (additional answers can be identified by the supervisor)	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
1 What is prevention?	Staff should provide the comprehensive definition for full score	» In its simplest form, preventing violence against women and girls means reducing the number of new cases of violence. » A more robust definition understands prevention as more than just an absence of violence, but as an expansion of women's assets and power. » Prevention programming works towards stopping acts of violence, while building the conditions communities need to live free from violence against women and girls, both in the short and long-term.			
2 Why is it important for GBV programs to focus on preventing GBV in emergencies?	Staff should mention at least 2 reasons to get the full score	» Prevention programming addresses the underlying causes of the violence women and girls experience, risk factors and situational triggers either individually or in combination across the different levels of the socio-ecological model. » Prevention in emergencies reduces risks of male violence faced by women and girls and supports survivors and to access essential care and services » Addressing the risks the women and girls face, and putting in measures to reduce those risks, is the responsibility of *all humanitarian actors*, authorities and community members.			
3 What are the key GBV prevention programming approaches?	Staff should mention at least 4 approaches to get the full score	Details for each found in EMPOWER » Empowering Women and Girls » Violence Risk Mitigation » Deterrence and Accountability » Long-term Behavior and Norm Change			

	KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	POSSIBLE ANSWERS (additional answers can be identified by the supervisor)	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
4	What are the 6 types of GBV?	Staff should mention at least 4 examples to get the full score				

» **Rape:** non-consensual penetration (however slight) of the vagina, anus or mouth with a penis or other body part. Also includes penetration of the vagina or anus with an object.

» **Sexual Assault:** any form of non-consensual sexual contact that does not result in or include penetration. Examples include: attempted rape, as well as unwanted kissing, fondling, or touching of genitalia and buttocks. FGM/C is an act of violence that impacts sexual organs, and as such should be classified as sexual assault. This incident type does not include rape, i.e., where penetration has occurred.

» **Physical Assault:** an act of physical violence that is not sexual in nature. Examples include: hitting, slapping, choking, cutting, shoving, burning, shooting or use of any weapons, acid attacks or any other act that results in pain, discomfort or injury. This incident type does not include FGM/C.

» **Forced Marriage:** the marriage of an individual against her or his will.

» **Denial of Resources, Opportunities or Services:** denial of rightful access to economic resources/assets or livelihood opportunities, education, health or other social services. Examples include a widow prevented from receiving an inheritance, earnings forcibly taken by an intimate partner or family member, a woman prevented from using contraceptives, a girl prevented from attending school, etc. Reports of general poverty should not be recorded.

» **Psychological / Emotional Abuse:** infliction of mental or emotional pain or injury. Examples include: threats of physical or sexual violence, intimidation, humiliation, forced isolation, stalking, verbal harassment, unwanted attention, remarks, gestures or written words of a sexual and/or menacing nature, destruction of cherished things, etc.

Individual capacity assessment for GBV prevention staff

KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	POSSIBLE ANSWERS (additional answers can be identified by the supervisor)	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts

5 Explain the following three components of GBV prevention programming in emergencies:

a Regularly undertake assessments and consultations

b Direct risk reduction / mitigation actions

c Advocacy

Staff must explain the three components (regardless of how detailed) in order to get full score

Regularly undertake assessments, and consultations: To respond to changes in the environment and ensure that risk reduction activities are based on assessments and consultations with women and girls. These include:

» Community observation through safety audits on safety and risks to women and girls
» Assessing availability, standards and quality of services and support for women and girls, including survivors through service audits and mappings
» Community consultations for trust and acceptance building with on-going community out-reach and involvement in risk reduction, mitigation, and basic prevention as well as feedback to women and girls, and the wider community, on actions taken, changes made, outstanding issues, challenges and next steps

Direct action: These are actions we directly deliver as part of the GBV programming to reduce and mitigate women's and girls' risks of GBV. These include:

» Procurement of Materials and resources (i.e.: locks) / work with other sectors on improvements
» Distribution of specific non-food item materials/material support (e.g., dignity kits, solar lamps, fuel-efficient stoves)
» Actions with other actors and sectors such as the organization of firewood patrols and community patrol groups
» Establishment of appropriate lighting in public places, locks on latrines, and safe space allocation for single female-headed households

Advocacy: We conduct advocacy on VAWG in emergencies with and for women and girls to improve their safety and increase access to quality services and support in different ways, including:

» Participate in inter-sector/cluster coordination on women & girls.
» Advocate for and/or lead the distribution of context-appropriate material support for women & girls
» Advocate to other humanitarian actors for actions that reduce risks to women and girls in the immediate environment
» Advocate for the establishment of GBV working group focal points to attend other sectoral meetings to ensure information exchange and follow up on concerns for women & girls.
» Disseminate VAWG action sheets to all other humanitarian sectors/clusters.
» Advocate for the establishment of and training on PSEA protocols (including reporting protocols) for all humanitarian personnel (PSEA – prevention of sexual abuse and exploitation)

Individual capacity assessment for GBV prevention staff

	KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	POSSIBLE ANSWERS (additional answers can be identified by the supervisor)	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
6	What are best practice principles of prevention	Staff should mention all principles for full score	More detail on each in EMPOWER » Prioritize the safety of women and girls » Use an intersectional gender-power analysis » Starts with ourselves. » Recognizes and reaches the diversity of women and girls » Centers the voices, power, and agency of women and adolescent girls » Recognize, engage and be accountable to women and girls experiencing multiple forms of discrimination » Reflect the specific context » Work in solidarity with women's rights organization » Is context specific » Engage communities in ways that are meaningful, creative and dynamic, asking questions rather than giving messages			
7	What are some principles of women centered programming?	Staff should mention at least 3 principles to get the full score	» Shaped by an understanding of women and girls realities » Focused on women and girls needs, interests, priorities and lived experiences » Recognizes and confronts the impact on women and girls lives of class, race, sexual orientation, disability, etc. » Underpinned by feminism and a feminist analysis of the world and anti-oppressive practice » Informed by an understanding of what works for women and girls			

Individual capacity assessment for GBV prevention staff

	KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	POSSIBLE ANSWERS (additional answers can be identified by the supervisor)	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
8	What do these principles look like when applied in prevention programming?	Staff should mention at least 3 examples to get the full score	» Build common understanding of women's and girl's experiences in close consultation with existing women's rights activists and women's movements and women and girls » Lead implementation of strategies according to actions and outcomes prioritized by women and girls » Establish reactive and proactive feedback channels which diverse women and girls prefer and proactively seek women's and girls' feedback throughout implementation » Have women and girls design and validate key messages and IEC material prior to disseminating in community » Challenge harmful and gender unequal attitudes, practices, and policies among humanitarian service providers			
9	How do we meet women's and girls' safety needs in an acute emergency according to the following risks: a Risks involving unmet needs b Risks involving their living space: c Risks involving general safety when doing routine activities d Risks associated with being unaware or not knowing	For each risk the supervisor decides to ask about a correct answer must be provided for full score	» **Risks involving unmet needs:** The delivery of material-based support Hygiene or dignity kit assembly and distribution; distribution of solar flashlights; creation and distribution of fuel or fuel-efficient stoves; cash- and voucher-based assistance » **Risks involving their living space:** Physical layout of the settlement Safety audits; installation of lighting; distribution of ration cards to women; shelters include doors and locks; safe spaces for women and girls identified; female-headed households located near within the center of the camp/community; placement of water points, showers, and latrines » **Risks involving general safety when doing routine activities:** Adequate Safety and security Safety or community (patrol) teams/groups; firewood/water patrols or collection groups; community meetings with security sector personnel » **Risks associated with being unaware or not knowing:** The dissemination of info & awareness; Establishment of community-based outreach teams; regular GBV education and awareness sessions; trainings and capacity building of community leaders or camp committees » **Risks associated with being left out of participation and decision making:** Women & Girls fully engaged in programming			

KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	POSSIBLE ANSWERS (additional answers can be identified by the supervisor)	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
10 What is an intersectional approach and why is it important for prevention programming?	Staff should provide the comprehensive definition for full score	» An intersectional approach analyses how women's experiences of violence are shaped by their race, ethnicity, class, sexuality, age, (dis)ability and geographic location as well as legacies of slavery, colonization, and ethnic conflict. » When understanding the causes of VAW, it is important to identify the ways in which gender inequality intersects with other sources of oppression and discrimination, power and privilege. These intersections can increase the risk, severity and/or frequency of experiencing violence for specific women. » This approach is essential to ensure that prevention initiatives are tailored to women's diverse needs and do not compound exclusion.			
11 Explain the steps you would take if a woman or girl reported to you a safeguarding issue occurring within the GBV program	Staff should mention at least 5 examples to get the full score	» Find a private space to discuss » Tell her/him s/he did a great job in reporting. » Explain that you will do your best to treat the issue with privacy and respect but you have to report this issue to the appointed focal point and explain exactly what you will do and what information you have to report. » Explain to her/him how the response mechanisms function. » Explain that s/he does not need to disclose her/his name if she does not want to, but that limits the capacity of carrying out the investigation. » Explain possible consequences for her/him. » Explain consequences for the perpetrator. » Listen carefully. » Believe her/him. » Take the issue seriously. » File and report the case confidentially and timely. » Ensure s/he gets the services and the support s/he needs.			

Individual capacity assessment for GBV prevention staff

KNOWLEDGE COMPETENCY AREA	SCORING CRITERIA	POSSIBLE ANSWERS (additional answers can be identified by the supervisor)	MET 2 pts	PARTIALLY MET 1 pts	NOT MET 0 pts
12 During an information dissemination session, a woman starts disclosing a personal GBV incident. As a facilitator, what would you do?	Staff should mention at least 3 examples to get the full score	» Remind yourself that a survivor has the right to disclose anywhere she feels comfortable. » Listen and don't interrupt. » Show empathy. » When disclosure finishes, validate what happened to her (e.g. 'many women in your situation would feel angry'). » When disclosure finishes, use healing statements (e.g. 'we are sorry for what happened to you'). » Provide general information on services available in case she, or any other woman, wants to receive specialized support. » Ask the survivor if she would like to talk to you after the session and if she is ok in parking the conversation for the moment. » At the end of the session, bilaterally provide all information on services and support possibilities. » Ask for her verbal consent and refer her to specialized services if given.			
13 What would you do if you don't know the answer to questions asked by women and girls in a group setting?	Staff should provide at least 3 examples for full score	» Do not make up arguments to show your knowledge. » Do not pretend you didn't hear the question. » Be as honest as you can. » Ask if there is any woman, girl or colleague present who has more information about it. » Commit to inform yourself and to be prepared on that topic for the next session. » Commit to properly prepare for all relevant topics before delivering the activity.			

Individual capacity assessment for GBV prevention staff

KNOWLEDGE COMPETENCY AREA	**SCORING CRITERIA**	**POSSIBLE ANSWERS** (additional answers can be identified by the supervisor)	**MET 2 pts**	**PARTIALLY MET 1 pts**	**NOT MET 0 pts**
14 During an emergency what should you be concerned about when conducting outreach to women and girls?	Staff should provide at least three examples for full score	» Risk versus benefit for women and girls participating and their safety » Safety of Staff » Diverse women's and girl's preferred availability » Power dynamics inter and intra diverse groups » Focused messaging on availability and access to response services for survivors and overall humanitarian services for women and girls			
15 How can prevention staff demonstrate accountability to women and girls through their role in programming as well as personal accountability towards preventing violence against women and girls?	Staff should provide at least three examples for full score	» Listen to women and take what they say seriously. » Believe women about their lived experiences. » Name men's violence against women and girls as a critical issue. » Continually recognize and transform your own harmful attitudes, beliefs, behaviors, and male privilege. » Understand how male power and privilege operate in your community. » Support the leadership of women. » Talk with other people about sexism and violence against women and girls. » Speak out against harm and model change for other men.			

KNOWLEDGE COMPETENCY AREA	**SCORING CRITERIA**	**POSSIBLE ANSWERS** (additional answers can be identified by the supervisor)	**MET** **2 pts**	**PARTIALLY MET** **1 pts**	**NOT MET** **0 pts**

16 If a harmful attitude, belief, or behavior occurs during a community discussion, what are the steps to follow?

Staff should provide at least 3 examples for full score

STEP 1: Ask for clarification / Learn why they have that opinion

» Summarize back the statement or comment» Identify to yourself which of the "Common Resistance Reactions" is being expressed by the harmful statement or action "Thank you for sharing your opinion with us. Can you tell us why you feel that way?""So it sounds like you are saying…is that correct?"

STEP 2: Seek an alternative opinion / Involve Others

» Send the question back to the group using an open method. For example: "What do the rest of you think of that phrase (or this attitude)?" "To me that sentence sounds like victim-blaming. What do the rest of you think?"

STEP 3: If nobody offers an alternative opinion, provide one

» "I know that a lot of people would never agree with that statement. Many of the men and women I know feel that the rapist is the only person to blame for a rape and that we all have a responsibility to respect other people's right to say "no" to sexual activity."

STEP 4: Connect back to prevention programming

» Remember that these views and harmful beliefs are the reason that the prevention intervention exists! When a harmful comment is expressed, use it as an opportunity to reinforce the key concepts within GBV programming. For example: "How do you think this idea come about? Who taught us these ideas?" "How does this idea relate to what we are taught about being a man and what we have been taught about women?" "How does this idea reinforce power and privilege of men?" "Are these ideas harmful to the safety of women and girls?"

STEP 5: Offer facts that support a different point of view and emphasize a helpful perspective.

» Sometimes there are laws that can support a position but the law may not be recognized within the country or community. If you are going to reference a law, please ensure it is recognized in the community.
» "The law says that every person has right to say "no" to sex, and the rapist is the only person to be blamed. I agree with this and as a man, I think it is important that we respect a woman's choice to make her own decisions about sex. It does not matter what a woman wears or does, she has the right not to be raped."
» Please note that it is very unlikely that the participant will openly change his opinion even after you use these five steps to address the statement. But by challenging the statement, you have provided an alternative point of view that the participant may consider and hopefully adopt later. You have also demonstrated accountability to women and girls and offered a different leadership model