

## **CARE Gender-based Violence (GBV) in Emergencies (GBViE)**

Worldwide, during times of crises, the prevalence of GBV increases as existing gender inequalities are exacerbated by the chaos and tensions within households, communities and society. In conflicts more specifically, GBV is often used by armed actors as a tactic to intimidate and to exert power and control over their opposing side.

For over two decades, CARE has been implementing development and humanitarian programmes to address GBV. These programmes include transforming unequal gender power relations within households and communities; working with communities to shift social norms that subordinate women and girls and condone violence as a means to control them; engaging men and boys in addressing GBV; responding to the immediate and long-term needs of GBV survivors; and supporting governments to develop and implement policies, legislation and commitments to end the violence.

A Comprehensive Approach to Addressing GBViE - To meet the different needs of people of all gender, ages and abilities, CARE has already developed a four-step approach to promote gender equality and women's voice in humanitarian action:

- 1. **Rapid Gender Analysis:** Using <u>CARE's RGA Toolkit</u>, analyse the different needs and capacities of women, men, boys and girls during a humanitarian response, *including their specific experiences* of, coping strategies and response needs for gender-based violence (GBV).
- 2. **Minimum Standards/Commitments:** With reference to <u>CARE's 'Minimum Commitments'</u> and the <u>IASC GBV Guidelines</u>, mainstream gender and GBV mitigation in all response sectors.
- 3. Women Lead in Emergencies: Ensure women's voices count in planning and decision-making.
- 4. **Life Free From Violence:** Prevent, mitigate and respond to GBV, including domestic violence<sup>2</sup>, in humanitarian crises.

Within the strategic objective and work on *Life Free from Violence*, CARE has four key intervention models to address GBViE. These are in line with existing organisational expertise and knowledge:

- a. Create and manage 'Safe Spaces for Women and Girls'
- b. Provide adequate and appropriate gender-sensitive sexual and reproductive health services
- c. Work with communities to shift patriarchal social norms and address the root causes, exacerbating factors and impacts of GBV in crisis contexts
- d. Engage men and boys in preventing and addressing GBV.
- a. The establishment of Safe Spaces for Women and Girls<sup>3</sup> (SSWG) has emerged as a key strategy for supporting the protection and empowerment of crisis-affected women and girls. A safe space is a place where women and girls feel physically and emotionally safe, free of violence (or fear of violence) or abuse; free to express themselves without fear of judgment or harm; and able to mobilise and find their voice and the space/forums to raise it. The key objective of SSWGs is to provide a space and platform where women and girls can:
  - socialise and re-build their social and community networks
  - receive social support;
  - acquire contextually relevant skills
  - access safe multi-sectorial GBV response services (psychosocial, legal and medical)
  - receive information on and referrals to women's health services

<sup>&</sup>lt;sup>1</sup> CARE has CARE has adopted and adapted the work of the Global WASH Cluster WASH Minimum Commitments for the Safety and Dignity of Affected People as the primary approach to mainstreaming gender and diversity into its WASH programming. Minimum Commitments for Food Security and Livelihoods and Sexual and Reproductive Health are currently under development.

<sup>&</sup>lt;sup>2</sup> CARE defines domestic violence to include intimate partner violence (IPV) that is physical, sexual and/or psychological in nature; early, forced and child marriage; honour killings and other honour crimes; widow disinheritance and abandonment; and sexual exploitation and abuse including transactional sex (LFFV Theory of Change, 2018).

<sup>&</sup>lt;sup>3</sup> The information here is adapted largely from <u>UNFPA's guidance note on 'Women and Girl Safe Spaces' (2015)</u>, which was based on their experiences and those of their partners in Jordan, Lebanon, Iraq, Syria and Turkey.

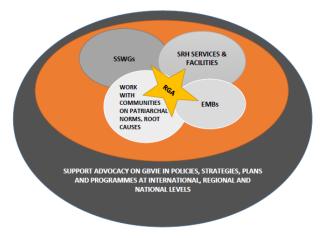


 explore, define and work on context-specific and community-based priorities and solutions to their own needs and issues.

Working closely with gender/GBV/protection, shelter/site planning and WASH colleagues and based on standards developed by the sector, CARE commits to establishing and operating SSWGs in emergency contexts as a central intervention of its overall GBViE model.

- b. Sexual and Reproductive Health (SRH) Services One of CARE's core sector areas is SRH and the organisation has established considerable skills, experience and reputation in this area. Because most forms of GBV lead to health and psychosocial outcomes, the CARE SRHR outcome area has developed expertise in ensuring women and girls can access clinical services, i.e. the clinical management of rape (CMR), as well as psychosocial support (PSS). The SRHR team has expertise in building skills of healthcare providers in CMR and PSS using international standards; training community volunteers to increase awareness, identify and refer cases and provide PSS to those in need; and collecting and analysing data collected to make programmatic decision that are appropriate for communities we serve. CARE will establish and enhance more deliberate and systematic linkages between SRHiE and GBViE in practice and policy.
- c. Working with communities to change patriarchal social norms and address the root causes, exacerbating factors and impacts of GBV in crisis contexts CARE recognises the interlinking structural (e.g. discriminatory legal and institutional frameworks) and social factors (e.g. harmful social and gender norms), material realities (e.g. household poverty and lack of economic opportunities) and individual factors (such as inequitable gender attitudes condoning GBV, as well as individuals' agency and aspirations) that prevent change in patriarchal social norms from occurring. CARE's strategy is to work with crisis-affected communities to design and implement interventions and strategies that address the most relevant factors in any given context.
- d. Engaging men and boys (EMB) CARE recognises that women and girls are most often the targets of GBV, which is overwhelmingly perpetrated by men, thus justifying CARE's approach to work with men and boys to mitigate this violence. CARE believes that it is critical to discuss issues around masculinity, including challenging aggressive stereotypes of masculinity. CARE will take measures to engage men and boys in GBV awareness and behaviour-changing initiatives and ensure that GBV prevention work also seeks to educate men and boys on the benefits to them, their households and communities of gender equality, dignity and respect for women.

CARE's 'four interventions' model for addressing GBViE informed by a GBV-focused RGA<sup>4</sup> and situated in the context of CARE's support to relevant GBViE policies, planning and programming<sup>5</sup>



<sup>&</sup>lt;sup>4</sup> Three of the four elements, SSWG, SRH services and facilities and child marriage intersect as there are clear linkages between these. The EMB piece does not connect with the SSWGs to denote that SSWG are women only spaces. The whole model is informed by a Rapid Gender Analysis that has a particular focus on gender-based violence.

<sup>&</sup>lt;sup>5</sup> As well as the four "intervention models", CARE supports advocacy on policies, plans and programmes at the international and regional levels and, at the national level, ensures adequate GBV response in Humanitarian Response Plans and/or national response strategies. This is a synergy with the EMB intervention model and the Women Lead in Emergencies work under the GiE approach.