

## GBV Strategy

A three year (2014 to 2016) strategy was developed with the main goal of helping Somalis reduce GBV through preventing GBV and providing quality and timely multi-sectoral services to survivors. To reach this goal, four objectives were developed:

- (1) prevention
- (2) response
- (3) access to justice and rule of law
- (4) coordination

The Strategy was approved by the UN Country Team on 20 February 2014 and by the Humanitarian Country Team on 25 February 2014. The cost to implement the Strategy stands \$15.5 million for all three regions of Somalia.

### Strategic Goal

The goal of the three year strategy is to reduce GBV through prevention including conflict related violence and by providing quality and timely multi-sectoral services to survivors.

### Outcomes, Outputs and Operationalization of the Strategy

The Strategy has four Outcomes and the corresponding Outputs as described below. Costed operational plan of the Strategy is also prepared to ensure the smooth implementation of the Strategy.



## Alignment to the New Deal Compact

The strategy is aligned to the New Deal with a broader goal of promoting the human rights of women, men girls and boys through preventing gender-based violence and providing quality, multi-sectoral services to survivors. The strategy captures up-stream support to policy and legal framework development across Somalia, mid-stream capacity building over the whole lifespan of the Compact, as well as immediate down-stream delivery of prevention, protection and support programs to vulnerable groups and survivors of GBV.

In addition to the New Deal, another cornerstone of this Strategy is the Consolidated Appeal Process (CAP), which serves as the anchor for humanitarian interventions. Under CAP, Protection Cluster places priority on availability of qualified services providers for GBV survivors as well as GBV prevention through advocacy, sensitization and community engagement. These are also the key areas addressed by the GBV Strategy.



**Protection Cluster**

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# SOMALIA

## GENDER-BASED VIOLENCE WORKING GROUP

2014 - 2016 STRATEGY



**Protection Cluster**

## Background

Gender Based Violence (GBV) is widespread in Somalia. Despite uncertain statistics and data about the scope of the violence, the Federal Government of Somalia (FGS), the local authorities in Somaliland and Puntland, and the international community all agree that GBV exists at unacceptable levels and must be curbed.

Decades of conflict, insecurity, environmental shocks, and the widespread use of harmful traditional practices has meant that women and girls in particular are at risk of GBV in Somalia. Internally Displaced Persons (IDPs) are particularly at risk of GBV and sexual exploitation due to limited security in the IDP settlements, general poor living conditions, the requirement to undertake risky livelihood practices to survive, and limited clan protection. Among the IDP population women and girls are at greater risk, and especially those from minority clans, or are female-headed households, or female elderly persons.

The continued emphasis on governance and on the adherence to the rule of law by the FGS as well as the Somaliland and Puntland authorities to address sexual violence in conflict and post conflict was the catalyst for the development of a GBV strategy. At the request of the Resident and Humanitarian Coordinator for Somalia and the Humanitarian Country Team, the GBV Working Group was tasked to spearhead the drafting of the strategy, as it is the main humanitarian body coordinating GBV interventions.



Outcome 1: Communities empowered to be agents of change to prevent GBV	
Outputs	Budget Estimation
1.1.1 Community based social norms guidance notes and implementation tools, training package, and monitoring tools designed and disseminated	\$360,000
1.1.2 Participatory Community based prevention IEC/BCC Materials Available and Standard Guidance Notes on how to use them	\$430,000
1.1.3 Evidence based Community mitigation and safety mechanisms guidance and tools developed and disseminated	\$700,000
1.1.4 Community and policy engagement and dialogues on GBV and FGM/C total abandonment enhanced	\$3,010,000
<b>Total Outcome 1</b>	<b>\$4,500,000</b>
Outcome 2.1: Improved access for survivors to competent, confidential and compassionate clinical care	
Outputs	Budget Estimation
2.1.1 Protocols and technical guidelines for clinical response to sexual assault survivors developed and implemented	\$185,000
2.1.2 Improved technical capacity of health workers to provide efficient and effective response to GBV survivors	\$1,425,000
2.1.3: Improved physical infrastructure, equipment and supplies for the effective and ethical treatment of GBV survivors	\$1,570,000
<b>Sub-total Outcome 2.1</b>	<b>\$3,180,000</b>
Outcome 2.2: Improved access to quality case management and psychosocial support services for GBV survivors	
Outputs	Budget Estimation
2.2.1: Strengthened identification, reporting and referral pathways	\$295,000
2.2.2: Standardised Case Management System, which takes into account Data Management and Accountability	\$215,000
2.2.3: Improved Human Resources Capacity of Staff Involved in GBV Case Management	\$1,125,000
2.2.4: Improved guidance and capacity of staff involved in GBV psychosocial support	\$170,000
2.2.5: Improved technical guidance on alternative livelihoods for GBV survivors	\$25,000
<b>Sub-total Outcome 2.1</b>	<b>\$1,830,000</b>
Outcome 2.3: Improved post-incident referrals and safety response for GBV survivors	
Outputs	Budget Estimation
2.3.1: Technical support provided to establish safe spaces for GBV survivors in need of temporary protection	\$376,000
2.3.2: Media and other actors engaged on the importance of confidentiality for the safety of survivors and their families	\$335,000
<b>Sub-total Outcome 2.1</b>	<b>\$711,000</b>
<b>Total Outcome 2</b>	<b>\$5,721,000</b>



Outcome 3.1: Adoption of laws, policies and international instruments to protect women, men, boys and girls and vulnerable groups from all forms of gender-based violence	
Outputs	Budget Estimation
3.1.1: Existing laws reviewed to identify gaps on the implementation of international treaties	\$30,000
3.1.2: Technical assistance provided to the actors and stakeholders involved with the drafting of GBV-specific laws and policies	\$280,000
3.1.3: Advocacy conducted for the enactment and implementation of GBV specific laws	\$180,000
3.1.4: An improved PSEA secretariat administered complaints mechanism	\$110,000
<b>Sub-total Outcome 3.1</b>	<b>\$600,000</b>
Outcome 3.2: Formal and informal justice systems are equipped to uphold the human rights of GBV survivors	
Outputs	Budget Estimation
3.2.1: Approaches to improving access to justice are evidence based	\$40,000
3.2.2: Community-based and informal justice systems are enhanced to better respond to the human rights of GBV survivors	\$430,000
3.2.3: Formal justice systems strengthened to improve access to justice for GBV survivors	\$360,000
3.2.4: Increased awareness of Protection from Sexual Exploitation and Abuse (PSEA) by aid workers	\$770,000
<b>Sub-total Outcome 3.2</b>	<b>\$1,600,000</b>
Outcome 3.3: Security and humanitarian actors empowered to provide protection to populations vulnerable to GBV, and ensure dignity and respect for survivors	
Outputs	Budget Estimation
3.3.1: Strengthened capacity of security and humanitarian actors on the protection of survivors	\$725,000
3.3.2: Police capacity and protocols developed to improve GBV prevention and response	\$1,075,000
<b>Sub-total Outcome 3.3</b>	<b>\$1,800,000</b>
<b>Total Outcome 3</b>	<b>\$4,000,000</b>
Outcome 4.1: Strengthened coordination of prevention and response programmes among GBV working groups	
Outputs	Budget Estimation
4.1.1 Common operational procedures that maximise efficiency, harmonization and learning developed and implemented.	\$83,000
4.1.2 Harmonised systems for data management and analysis	\$150,000
4.1.3 A network of professional, qualified and experienced staff dedicated to GBV coordination created	\$806,000
4.1.4 Strong and motivated PSEA membership	0
4.1.5 Consistent and predictable support for GBV prevention, response and coordination	\$100,000
<b>Sub-total Outcome 2.1</b>	<b>\$1,139,000</b>
Outcome 4.2: Enhanced collaboration with the other actors, whilst ensuring preservation of humanitarian principles	
Outputs	Budget Estimation
4.2.1 Enhanced Policy dialogue and technical support with the government to set national standards and protocols based on GBV best practices	\$30,000
4.2.2 GBV capacity building activities conducted with representatives from key government ministries	\$60,000
4.2.3: Framework defined and implemented outlining effective coordination within the UN integrated mission for effective GBV prevention and response	0
4.2.4: Mainstreaming of GBV prevention and response across key humanitarian clusters enhanced	\$50,000
4.2.5: Somali civil society and women's groups engaged in GBV prevention and response	0
4.2.6: Mainstreaming PSEA within relevant clusters	0
<b>Sub-total Outcome 2.1</b>	<b>\$140,000</b>
<b>Total Outcome 4</b>	<b>\$1,279,000</b>
<b>GRAND TOTAL</b>	<b>\$15,500,000</b>