

**Protection Cluster & Gender-Based Violence AoR  
Key Messages  
October 2019**

The Protection Cluster/GBV AoR is concerned about the following GBV issues identified in Ethiopia<sup>1</sup>:

- **Increase in severity and scale of conflict related violence, including rape, sexual violence and physical attacks in and around displacement sites and areas of return.**
  - GBV is exacerbated in emergencies and while GBV is grossly underreported at least 143,000 women and girls are currently affected by at least one type of GBV and 550,000 by harmful practices.
- **Lack of availability of skilled social work force for provision of Case Management and MHPSS for survivors.**
  - IDPs experience high level of psychosocial distress and only 9% of all sites have any type of MHPSS interventions, even less have focused interventions or clinical services for survivors<sup>2</sup>.
  - Over 1M do not have access to social workers and GBV referral mechanisms for multi-sectoral response services.
- **Lack of availability and accessibility of health services, including Clinical Management of Rape (CMR).**
  - 580,000 women and girls do not have access to CMR services and health centres lack medical commodities - resulting in potential unwanted pregnancies, STIs, HIV, lack of forensic evidence, unsafe abortions and preventable maternal deaths.
  - Reports on barriers in access to life-saving health care including discrimination, distance, high cost and unavailability of medicines.
- **Women and girls are adopting negative coping mechanisms as a result of displacement.**
  - Increase in reported engagement in survival sex to meet basic needs and increase in harmful practices as coping mechanisms, including transactional sex for goods and services.
- **Adolescent girls are an underserved population- married and out of school girls among the most vulnerable.**
  - Social norms change even in times of crisis and additional programming needed to ensure that the most immediate needs are met and girls can achieve equal rights and control over their lives.

**Key Priorities and Needs:**

- **Focusing on systems strengthening and capacity support for service providers** to meet global standards of care.
- **Significant need for investment in risk mitigation to reduce exposure to GBV across all sectors** - failing to act means we are failing to keep affected populations safe and risking further harm.
- **Increased PiN and target in HRP MYR:** 1,028,910 people in need at highest risk. Funding requirement is 4,6 M USD. Current gap around 50% for prevention and response activities and dignity kits for targeted populations.
- **Geographic areas in urgent need of scale up:** West Wallega, Kamashi, East and West Hararghe, Central and West Gondar and Dawa and Sitti zone and Zone 3 in Amhara.

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<sup>1</sup> DTM 17

<sup>2</sup> 4Ws MHPSS mapping, UNICEF, March 2019