

Syria Humanitarian Response Plan 2020 : WoS GENDER BASED VIOLENCE (GBV) RESULTS FRAMEWORK

HRP Objective: Survivors have access to quality and life-saving GBV response services and measures are in place to prevent and mitigate risks of GBV
 • Relates to Strategic Objective-01 SO-02 SO-3

Target group: Women and girls and especially vulnerable categories that emerged from the HNO: female headed households (widows, divorced), adolescent girls, women and girls with disabilities and older women.

Outputs

Indicators (this could also be formulated in terms of % against targets)

- # of communities/neighbourhoods with at least one type of GBV response services to GBV survivors and/or women and girls at risk (Output Ind. 3.1.1)
- # of GBV response services provided to survivors and/or women and girls at risk (Output Ind. 3.1.2)
- # of GBV actors trained on GBV (women/men) (Output Ind. 3.1.3)
- # Women, men, girls and boys reached by GBV prevention and empowerment activities (Output Ind. 3.2.1)
- # of humanitarian actors trained or sensitized on GBV (IASC etc.) (Output Ind. 3.3.1)

Measure: Beneficiaries and services

Activities	Outputs	Output Indicators	Output Indicator Descriptions	Notes	Guidance on Target Setting
3.1: Provide quality and life-saving GBV response services, including case management and psychosocial support, enhance vulnerable groups' access to these services (with a focus on women and girls with disabilities and adolescent girls) and reinforce referral pathways	GBV response services to survivors and women and girls at risk are available and accessible	3.1.1: # of community/neighbourhoods with (at least one) type of GBV response service to survivors and women/girls at risk	Indicator captures the location (community or neighbourhood for big cities) where GBV response services are offered to GBV survivors as well as women/girls at risk, including through static facilities, outreach teams or other forms of mobile response. GBV response services include: <ul style="list-style-type: none"> • Case management for GBV survivors • CMR and other health services for survivors • Focused PSS for GBV survivors (only) • Individual and group counselling/Focused PSS • Legal services • Other referrals of GBV survivors to GBV related services • Psychological First Aid (PFA) • Specialised mental health services for GBV survivors • Referral to legal services for GBV survivors • Referral to specialized psychosocial support • Referral to medical services • Referral to non GBV services (WASH, NFI, FSL etc.) Recipients of services can include women, girls, boys and men, with additional emphasis on adolescent girls, person with disabilities and older women	<ul style="list-style-type: none"> • Please ensure that the activity number (i.e. 3.1.1) is filled for all locations where survivors and women and girls at risk will be served in the locations overview on OPS. • Partners are encouraged to scale up their GBV emergency response (which will be captured in the 4Ws 2020) to specifically new displacements and/or acute emergencies, in areas such as Raqqa, Dara'a, Rural Damascus, Idlib and Deir Ez-Zor • When targeting adolescents, the response should be done in an adolescent girls-friendly manner. • When targeting people with disabilities, the response should be done in an inclusive manner as well as with dedicated capacity on how to support survivors/women and girls at risk with disabilities * Provision of health should be done in cooperation with the health sector. The GBV sector should work to enable access of survivors to GBV health services. The indicator will only include CMR and other health services for GBV survivors of partners reporting to the Protection Sector, besides other specialized services for survivors. Health partners will capture this information separately. *Services must be inclusive and take into consideration the specific needs and vulnerabilities of people living with disabilities, the specific needs of women, and girls, female-headed households, widows, divorcees.	The target for this activity should be the number of communities/neighbourhoods (for bigger cities) where GBV response services are provided to survivors and/or women and girls at risk
		3.1.2: # of GBV response service to survivors and women/girls at risk	Indicator captures GBV response services that have been provided to GBV survivors as well as women and girls at risk. These include: <ul style="list-style-type: none"> • Case management for GBV survivors • CMR and other health services for survivors • Focused PSS for GBV survivors (only) • Individual and group counselling/Focused PSS • Legal services • Other referrals of GBV survivors to GBV related services • Psychological First Aid (PFA) • Specialised mental health services for GBV survivors • Referral to legal services for GBV survivors • Referral to specialized psychosocial support • Referral to medical services • Referral to non GBV services (WASH, NFI, FSL etc.) Recipients of services can include women, girls, boys and men, with additional emphasis on adolescent girls and person with disabilities.	The number will capture how many GBV response services have been provided through static facilities, outreach teams, or other forms of mobile response. * Provision of GBV, health and MHPSS services should be done in cooperation with the health sector. The indicator will only include CMR and other health services for GBV survivors of partners reporting to the Protection Sector, besides other specialized services for survivors. Health partners will capture this information separately.	The target for this activities should be the number of GBV response services that are provided to survivors and/or women and girls at risk. The baseline should be taken from the 2019 4Ws.
	3.1.3: # of GBV actors trained on GBV (women/men)	Indicator captures structured professional development/capacity building initiatives that aim to improve the GBV programming response: Targeted participants include GBV actors (e.g. social workers, facilitators; lawyers, healthcare workers; case workers; etc...) and other GBV stakeholders (e.g. volunteers etc.) Trainings may include: <ul style="list-style-type: none"> • Case management training • Clinical management of rape training • GBV basic concepts training • Other GBV training • Psycho-social support training • Women empowerment & gender equality training • GBV risk mitigation in other sectors (possibly ToT) 	<ul style="list-style-type: none"> • Please do not include trainings of non-GBV technical trainings on 4Ws, FGDS, etc. 	• The target for this activity should be the total number of GBV actors trained.	
Training and coaching of GBV actors to respond to GBV through a survivor-centred and inclusive approach have been conducted					

3.2: Enhance strategies to empower women and girls, with a particular focus on most at risk groups (for ex. adolescent girls, divorced and widowed women and girls, women and girls with disabilities and older women) to prevent GBV and to change negative attitudes and beliefs that foster harmful social norms.	<p>Activities for empowering women and girls (including opportunities for skills building/vocational opportunities) are available and accessible</p>	<p>3.2.1: # Women, men, girls and boys reached by GBV prevention and empowerment activities</p>	<p>Indicator captures the number of women and girls that have been reached through activities conducted to empower them.</p> <p>Activities may include dignity kit distribution, recreational activities, life skills activities, individual and group counselling (non-specialised), Psychological First Aid (PFA) and skills building/vocational activities within the context of psychosocial support programs.</p>	<ul style="list-style-type: none"> • Activities under this indicator are usually considered part of broader/integrated GBV programming, although maybe delivered separately in hard-to-reach locations where sustained GBV presence/programming is not possible. • When targeting adolescents, the response should be done in an adolescent girls-friendly manner. • Skills building/vocational activities should attempt to avoid reinforcing existing gender stereotypes by offering activities on a variety of skills. • Skills building/vocational activities should be undertaken within the framework of psychosocial support interventions for women and girls (and within a protection framework) 	<ul style="list-style-type: none"> • The target for this activity should be the total number of women and girls served.
	<p>Activities to address negative attitudes and beliefs that foster harmful social norms are available and accessible</p>	<p>3.2.1: # Women, men, girls and boys reached by GBV prevention and empowerment activities</p>	<p>Indicator captures the number of women, girls, men and boys reached with activities addressing negative attitudes and beliefs, including changing social norms awareness raising, communication campaigns, researches, etc.</p> <p>Awareness activities can include awareness raising campaigns, strategies, events, sessions, TV/radio, theatre, engaging men and boys in preventing GBV as well as structural behavioural change programs. The topics of such sessions may include one or more of the following topics: Information/sensitization about GBV related services, information/sensitization on GBV and health, gender equality, domestic violence, child marriage etc. Sessions on the risk and use of technology/ social media are also encouraged</p>	<ul style="list-style-type: none"> • Changing social norms is a long term objective and it's normally very hard to measure concretely. Activities that will look at addressing changes in attitudes and beliefs will ideally contribute to the long-term transformative objective. • Activities under this indicator are usually considered part of broader/integrated GBV programming, although maybe delivered separately in hard-to-reach locations where sustained GBV presence/programming is not possible. • Avoid counting individuals reached through posters, brochures and other IEC materials that are delivered in isolation of other programming/broader outreach and community mobilization strategies. • Encourage prevention activities that have a focus on child marriage and domestic violence. *Prevention activities must be inclusive, engage the community and take into account the specific needs and vulnerabilities to GBV of female headed households, widows, divorcees, women and girls living with disabilities. 	<p>The target for this activity should be the total number of men, women, boys and girls reached with activities addressing negative attitudes and beliefs.</p>
	<p>Safe spaces for women and girls are established and accessible</p>	<p>3.2.2: # of women and girls accessing women and girls safe spaces and GBV services within community centres</p>	<p>Indicator captures the number of girls and women that access safe spaces.</p> <p>Women and girls safe spaces (WGSS) are places (either formal or informal) where women and girls feel physically and emotionally safe. "Safe" in this context refers to the absence of excessive stress, violence and /or fear of violence or abuse . It is a space where women and girls feel comfortable to come and to express themselves without fear of judgment or harm, where they can build their social networks, receive support from their peers and have fun.</p> <p>WGSS also provide a place where women can access confidential services, discuss issues and concerns with other women and professional staff.</p> <p>Finally, the WGSS also provide an entry point for women and girls to access referrals to other safe and non-stigmatizing GBV response services.</p>	<ul style="list-style-type: none"> • Please include beneficiaries from women and girls safe spaces and women centres. Please also include beneficiaries receiving GBV related services through community centres and health facilities and community wellbeing centers • Adolescent girl-friendly spaces and programming is encouraged. • Safe spaces/ community centres must be inclusive in their approach and take into account the specific needs and vulnerabilities to GBV of female headed households, widows, divorcees, women and girls living with disabilities. 	<ul style="list-style-type: none"> • The target for this activity should be the total number of women and girls in women and girls spaces, women centres, and the number of beneficiaries that received GBV services in community centres and health facilities and community wellbeing centers
3.3 Promote GBV risk mitigation into all aspects of the humanitarian response	<p>Humanitarian actors (non-specialist) have been engaged and trained to reduce risks of GBV and refer to specialised services</p>	<p>3.3.1: # of humanitarian actors trained or sensitized on GBV risk mitigation</p>	<p>Indicator captures the number of humanitarian actors trained on IASC GBV guidelines that reduce risks of GBV, including through mainstreaming efforts.</p>	<ul style="list-style-type: none"> • Please see www.GBVguidelines.org 	<ul style="list-style-type: none"> • The target for this activity should be the total number of humanitarian actors trained in GBV risk mitigation.
	<p>Other sectors supported to improve GBV mitigation strategies</p>	<p>3.3.2: # of support activities conducted with other sectors to improve GBV risk mitigation</p>	<p>Indicator captures the number of activities (other than trainings) conducted to support other sectors in their GBV risk mitigation efforts, including meetings with sector coordinators, presentations/interactions at Cluster meetings, products developed/updated guidelines, sensitization briefings, awareness raising messages, assessment tools and reports, surveys, etc..., meetings with staff working in other sectors within the same organization</p>	<ul style="list-style-type: none"> • Support to GBV risk mitigation in other sectors goes beyond the capacity building of non-GBV staff. It takes different forms, such as reviewing other sectors' guidelines, including GBV related questions in assessments, engaging with members of other Clusters or staff working in other sectors within the same organization to ensure a better understanding and action towards a more qualitative response. 	<ul style="list-style-type: none"> • The target for this activity should be the total number of activities (other than trainings) conducted in support to GBV risk mitigation in other sectors.
	<p>Advocacy (field, national and international level) has been provided to reduce risk of GBV</p>	<p>3.3.3: # of advocacy activities conducted to reduce the risks of GBV</p>	<p>Indicator captures the number of advocacy briefings/updates with humanitarian leadership, donors, institutions, governance structures at local, regional and global level that inform GBV risk mitigation actions.</p>	<ul style="list-style-type: none"> • GBV actors need to advocate to other sectors, at both field and national level, if and when risks of GBV have been identify in order for sectors to take corrective actions to make their response and interventions safer. 	<ul style="list-style-type: none"> • Target should be the total number of advocacy activities conducted to reduce the risks of GBV