

Evaluation of the Implementation of IASC Guidelines for GBV Interventions in Humanitarian Setting in Response to Syria Crisis

Background

As per a recommendation from the 2014 report by the International Rescue Committee (IRC) (2014) entitled *Are We Listening? Acting on Our Commitments to Women and Girls Affected by the Syrian Conflict*, the United Nations Population Fund and the United Nations High Commission for Refugees, in cooperation with the United Nations Children's Fund, the International Rescue Committee and the International Medical Corps conducted an evaluation, in 2015, to examine the extent to which the minimum standards for GBV prevention and response, outlined in 2005 IASC Guidelines on GBV interventions in Humanitarian Setting, were implemented in response to Syria crisis.

Methodology and Geographical Coverage

The evaluation was conducted in the Kurdistan Region of Iraq, Jordan, Lebanon and Northern Syria focusing on Health, Shelter, Water, Sanitation and Hygiene sectors as prioritised by the countries' GBV sub-cluster/SGBV working groups. Semi-structured in-depth interviews with respondents representing donor institutions, local and international humanitarian organisations programming in the selected sectors, as well as, focus group discussions with women, girls, men and boys and desk review were conducted during the evaluation.

Key Findings

The key evaluation findings include: (1) the IASC Guidelines for GBV interventions are not well known and are not being used in programming; (2) the standards in the GBV Guidelines are not incorporated consistently in organisational or sector-specific strategic documents and standards; (3) sectors are not held accountable for failing to incorporate the GBV response and prevention minimum standards outlined in the GBV Guidelines; (4) sectors expect and assume that SGBV working groups/ GBV sub-clusters are exclusively responsible for sensitisation, monitoring and implementation of the GBV Guidelines; and (5) sectors rarely include, engage with or hold themselves accountable to women and girls in a meaningful, consistent and routine manner.

Limitations and Good Practices

The limitation of the evaluation includes focusing only on two sectors per country due to time and financial constraints; limiting the field evaluations to five days per country; involving three different evaluators due to logistical and time constraints; not conducting focus groups discussions in Northern Syria due to logistical constraints and security concerns. The evaluation identified a number of good practices implemented by Health, Shelter and WASH organisations. These practices present efficient and creative ways in which GBV prevention and response is being integrated in Health, Shelter and WASH sector responses to the Syrian crisis. These examples should be replicated and expanded.

Recommendations

The evaluation has informed the subsequent detailed sector specific, country specific and general key recommendations for addressing the identified gaps and ensuring that the new 2015 IASC GBV Guidelines are incorporated in a comprehensive and consistent way by all sectors to effectively mitigate, prevent and respond to gender-based violence within the Syrian humanitarian response. The key recommendations are addressed to (1) Humanitarian Coordinators (HC) and Refugee Coordinators; (2) Humanitarian Country Teams (HCT) and Inter Cluster/Inter Sector Working Groups (ICWG/ISWG) / Inter Sector Cluster Coordination Group (ISCCG); (3) Cluster/Sector Leads (Including Whole of Syria Actors); (4) Donors; (5) GBV Sub-Cluster/SGBV Working Groups; and (6) All Humanitarian Actors (please see the report for details).

Way Forward

The UNHCR and UNFPA, in coordination with the Evaluation Steering Committee members organised a one day regional dissemination workshop, on September 13th in Amman, Jordan, bringing together all the humanitarian stakeholders from the countries who participated in the evaluation process, to hear the findings, review the recommendations and discuss the way forward for further dissemination of the evaluation outcome. The evaluation report has been finalized in English and circulated to the humanitarian actors, and it is currently being printed and translated into Arabic. UNFPA has made a presentation on key evaluation findings and recommendation to DFID in London on September 29th and shared copies of the report.

Following the regional workshop the Evaluation Steering Committee members have finalized a Dissemination Strategy, including but not limited to (1) briefing donors, GBV AoR members, Global Coordination Cluster Group and GADNet on the results of the evaluation at the global level; (2) Continue discussions on implementation of the key recommendations at regional level, including with 3RP Technical Committee; (3) support donor briefing, meeting with Humanitarian Coordinators and Refugee Coordinators, meeting with SGBV WG/TF/SC, Health, Shelter and WASH sector members and support one dissemination workshop in each of respective countries.

One of the key recommendations made by actors at the regional dissemination workshop was to have support from the GBV AoR as a lead in coordination the GBV prevention and response in humanitarian settings to roll out the IASC GBV guidelines. Other support requested referred to the 3RP Technical Committee as a lead in multi-sectoral response to Syria crisis at regional level, as well as, senior management at country level such as Humanitarian and Refugee Coordinators, HCT and Inter-cluster Coordination Team to ensure the implementation of the key recommendations of the evaluation by different sectors.

Conclusion

All humanitarian actors responding to the Syria crisis but also actors responding to crisis will benefit from the outcome of the evaluation, as it clearly presents the bottlenecks and facilitators in implementation of the minimum standards for GBV prevention and response in humanitarian settings and provides clear recommendations for addressing the gap between policy and practice in a protracted displacement situation like Syria crisis. Addressing the findings and recommendations from the evaluation, by the humanitarian actors, would strengthen the 3RP for responding the Syria crisis at regional level, improve future GBV programming, as well as, inform the roll out and implementation of the revised 2015 IASC Guidelines for GBV Interventions in Humanitarian Setting.