ANNEX K: Case Study of Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts (2014-2019)

Evaluation of the Danish National Action Plans for the Implementation of UN Security Council Resolution 1325 on Women, Peace and Security

Social Development Direct

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1 Summary

The *Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts* programme has been **successful in contributing to the mitigation of protection risks** facing women and girls in emergencies, improving GBV survivors' access to high-quality lifesaving SRH and GBV services, and reducing the impact of GBV. The programme has made a positive contribution to the prevention, protection and relief and recovery pillars of the UNSCR 1325 and the Women, Peace and Security agenda. It has helped contribute to the prevention of conflict and violence against women and girls, sought to protect and uphold their human rights, and address their needs in relief and recovery efforts.

Although earlier project documentation makes less reference to specific categories of vulnerable populations, more recent project documents make explicit reference to **reaching specific categories of women and girls**, such as young girls being particularly vulnerable to trafficking, and women and girls with disabilities. However, these references appear to be **country-specific rather than mainstreamed** throughout the project. A targeted intersectional approach that identifies vulnerability according to the interconnected identities of women and girls would enhance impact in reaching the most vulnerable populations.

The programme appears to be a **relevant, appropriate and strategic investment** by the Government of Denmark, as part of its efforts to contribute to the implementation of UNSCR 1325 and the advancement of the WPS agenda. The programme is also in line with the priorities set out in the third Danish National Action Plan (2014-2019), which includes supporting humanitarian partners to protect women and girls from the threat of sexual and gender-based violence and provide essential services to survivors.

The design, implementation, monitoring and evaluation of the programme, however, appears to have been done **without reference to the third Danish NAP** but has instead been influenced by UNFPAs own organisational policies, strategies and action plans. This raises a question mark over the utility of third Danish NAP as an influential policy document. Furthermore there is no accountability mechanism in place, which makes clear the contribution of the programme to the third Danish NAP, whether the results from this programme will inform global results framework for the Danish NAP, and if so, how.

2 Introduction

This report consists of one of six case studies conducted for the evaluation of the Danish National Action Plans for the Implementation of UN Security Council Resolution 1325 on Women, Peace and Security (2008-2013, and 2014-2019). As outlined in the inception report, the case studies form one of the core methodologies of the evaluation.

The structure of the case studies is based largely on the first and second evaluation questions as outlined in the evaluation terms of reference:

1. What results have been achieved in portfolios related to the NAPs?
2. Based on EQ1, what are the results of the NAPs against their stated objectives to address and enhance women's full and equal participation, protection of women, transitional justice and mainstreaming of gender equality in humanitarian efforts and international operations?

The structure of the case studies has also been guided by the sub-evaluation questions organised according to the OECD/DAC criteria and included in the evaluation matrix (see Annex B).

Interviews for this case study took place remotely through phone or online calls. Interviewees included two implementing partners, with the majority of data collected through a desk review of available documentation. Whilst all interviews were transcribed, quotes and perspectives in this case study have not been attributed to specific interviewees to maintain a degree of confidentiality.

3 Background

3.1 Programme Summary

Since April 2014, the Government of Denmark has funded UNFPA to implement the following programme: *Innovations to Eliminate Gender-Based Violence (GBV) in Humanitarian Contexts*. Over the past five years, this has amounted to an award of 16 million Danish Kroner each year. During this time, the programme has been adapted in response to changing contexts and lessons learnt in the course of implementation, but the overall goal has remained the same, which is to mitigate GBV protection risks for women and girls and facilitate GBV survivors' quality and timely access to lifesaving SRH and GBV services to reduce the impact of GBV.

To achieve this goal, the programme has three overarching outcomes:

1. Increase survivor access to high-quality services, with a focus on lifesaving clinical management of rape (CMR) and psychosocial support;
2. Facilitate national and sub-national inter-agency GBV coordination that supports joint action and minimizes project redundancy; and
3. Promote safe and ethical data collection and information management, including to identify GBV risks and gaps in service quality and coverage and to enable systems for interagency GBV data collection and sharing.

The programme is being implemented in five countries: Bangladesh, Mali, Pakistan, Palestine and Sudan. These countries represent a broad range of crises: forgotten crises (Mali and Sudan), fragile contexts (Pakistan and Palestine), and newly declared emergencies (Bangladesh). For this case study, we will focus on results achieved at the global level and in Palestine and Mali in particular.

3.2 Programme Context

3.2.1 Global level

Women and girls are at significant risk of experiencing multiple forms of life-threatening GBV in times of conflict and crisis, including intimate partner violence, sexual violence, trafficking, and harmful traditional practices such as early child and forced marriage. This can be due to a combination of complex factors, which might include heightened tensions inside the family home; or alternatively, separation from the family and community and social support systems, closure of health facilities and police stations, a breakdown in law and order and

resulting culture of impunity, and the use of sexual violence to trigger displacement. Many women and girls in emergencies lack access to lifesaving sexual and reproductive health, clinical management of rape, and psychosocial support services, which heightens their vulnerability to unwanted pregnancies, sexually transmitted infections and suicide.

3.2.2 Mali

In 2012, food insecurity, political turmoil, and a military coup leading to the occupation of large segments of the country by Islamic militant and separatist groups plunged Mali into a state of crisis. Sexual violence has and continues to be used to terrorize and displace communities, leaving women traumatized and stigmatized, particularly in the case of survivors who then have children born of rape. The availability of and access to GBV services is minimal, due to insufficient governmental oversight and investment and a chronic shortage of technical expertise.

3.2.3 Palestine

The protracted conflict with Israel and the occupation of Palestinian territories and the resulting humanitarian situation have had a disproportionate impact on women and girls, exacerbating multiple forms of GBV, including sexual violence, intimate partner violence, and early child and forced marriage. Women and girls bear the brunt of the intense feelings of anger, frustration and aggression the ongoing military occupation triggers in Palestinian men and boys. Restrictions on women and girls' mobility, coupled with a fear of stigma and reprisal attacks, limits survivors' access to and utilization of services, the quality of which is often poor due to insufficient investment and a shortage of technical expertise.

3.3 Summary of Denmark's support

Since 2014, the Government of Denmark has provided 16 million Danish Kroner each year to UNFPA to implement the *"Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts"* programme. The programme has has provided sustained funding to enhance the operational capacity of the UNFPA Global GBV Team at Headquarters and the multi-disciplinary Roving Team, which together provide country-specific technical guidance and support.

3.3.1 The Roving Team

The Roving Team includes GBV and CMR Specialists who provide dedicated support to all five countries in designing, implementing and evaluating coordinated GBV responses. Field level support from the Roving Team has included implementation of rapid needs assessments, service mapping and health facility assessments, development of CMR assessment tools, and the integration of SRH and GBV within humanitarian coordination mechanisms. The Roving Team also supports capacity building which benefits the entire humanitarian system through training of national partners, service providers and key stakeholders involved in GBV programming through multi-day training on GBViE, psychosocial support and CMR. Roving Team members also liaise with the GBV AoR Coordination Team in Geneva and with their relevant GBV AoR Regional Emergency GBV Adviser (REGA) to engage at key points with national and sub-national GBV sub-clusters to develop interagency capacity and country-specific strategies.

3.3.2 The GBV Area of Responsibility Team

The GBV AoR Team oversees programming and ensures coherence and quality control for all capacity development and information management activities, as well as the implementation of the UNFPA Minimum Standards for Prevention and Response to GBV in Emergencies. Denmark has funded the position of the GBV Team Leader, the GBV Capacity Development Specialist, the GBVIMS Inter-Agency Coordinator, and the GBViE Programme Analyst.

4 Results

4.1 Results against internal results framework

As part of the *"Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts Programme",* in 2017 UNFPA developed a global results framework, in line with the UNFPA Minimum Standards for Prevention and Response to Gender-Based Violence in Emergencies. The development of the global results framework follows on from lessons learned from previous iterations of the project, which demonstrated the need to move away from a model where country offices set their indicators to instead agreeing on global level indicators which clarify what must be achieved to effectively prevent and respond to GBV and deliver multi-sector services to survivors in humanitarian settings.

According to a Programme Funding Report[1] produced and shared by UNFPA in March 2019, Country Offices have for the first time succeeded in sharing the necessary information to produce a complete global results framework spanning nine months of implementation in 2018. This is an achievement in itself, as UNFPA has demonstrated leadership in setting minimum standards and providing clarity for what constitutes effective GBV prevention and response programming. Furthermore, UNFPA appears to be on track to achieve its goal through this programme of mitigating GBV protection risks for women and girls and facilitate GBV survivors' quality and timely access to lifesaving SRH and GBV services to reduce the impact of GBV.

4.1.1 Global Level Results

- GBV Interagency Global Minimum Standards – In addition to supporting the development, publication and rollout of UNFPA's Minimum Standards for Prevention and Response to GBV in Emergencies, funding from Denmark is also facilitating the drafting and rollout of the forthcoming Inter-Agency Minimum Standards for Prevention and Response to GBV in Emergencies, the aim of which is to build a consensus and enhance accountability among GBV actors in the humanitarian sector. In 2018, UNFPA hired a consultant to lead the drafting of the Inter-Agency GBV Minimum Standards and facilitate and co-chair the Inter-Agency GBV Minimum Standards Task Team, together with Unicef and IRC. As part of the development process, all members of the GBV AoR core membership, Call to Action Steering Committee, field-based GBV Sub-Cluster Coordinators and Regional Emergency Gender Advisors were solicited to provide their feedback via an online survey.

[1] See pages 9 and 10.

Collecting feedback from field level GBV practitioners has also been critical to the process to ensure the resource is a comprehensive field-informed tool. A full draft of 16 Minimum Standards now exists, and a resource should be published in late 2019.

- Roving Team and Surge Support – In 2018, the roving team conducted 26 missions for a total 264 mission days, which included deploying GBV specialists to emergencies and leading or co-leading 19 capacity-building training of 441 humanitarian actors on different technical areas related to GBV prevention and response programming.

4.1.2 Country-Level Results

In 2018 alone, in the five countries supported with funding from Denmark, UNFPA:

- Reached 135,740 beneficiaries, including 93,083 women and girls with lifesaving care and an additional 42,657 community members with information on GBV risks, consequences, and care, including how to access available services.
- Supported 82 health facilities, 32 mobile clinics, 19 women's friendly spaces and 9 safe houses to improve the quality and availability of GBV services.
- Trained 2,767 health and other service providers to provide quality care to GBV survivors, including 411 on the clinical management of rape.
- Distributed 6,904 dignity kits, post-rape kits, and reproductive health kits.
- Established and supported 519 community protection committees/networks.
- Expanded the Roving Team to five members, who completed 26 missions over 264 mission days and delivered 19 training for 411 participants.
- Strengthened GBV information management systems, including the rollout of the GBVIMS in all project countries and training 141 providers on safe and ethical GBV data management.
- Continued to support all countries with formalized GBV Sub Cluster Coordination structures.

Although there is reference throughout project documentation to the most vulnerable populations being reached, including migrants, refugees and IDPs, there is little mention of specific types of vulnerabilities within these populations in earlier documentation. However, the 2018-2019 project document makes explicit reference to reaching vulnerable populations in most need of support. For instance, there is reference to specific categories of women and girls, such as young girls being vulnerable to trafficking, and women and girls with disabilities being targeted by the project. However, there is no explicit reference to an intersectional approach and attention to some intersecting identities such as women and girls with disabilities appears to be country-specific.

4.1.3 Country-Specific Results

Mali

Highlights include:

- **Increased access to high-quality GBV services**, resulting from the establishment of two One-Stop centres in Bamako and Mopti, which provide a holistic set of services which span medical care, psychosocial support, legal advice, and shelter provision. In 2018, these two One-Stop centres served a total of 602 women. UNFPA also supported 104 health facilities, mobile clinics, women friendly-spaces to provide

GBV-related services and trained 50 health facilities to provide high-quality care to GBV survivors, with a focus on clinical management of rape and psychosocial support.

- **The Leadership of the national GBV sub-cluster** in partnership with the Ministry of Women's Empowerment, Children and Family, which is now meeting regularly, conducting assessments on the availability and accessibility of GBV services, ensuring GBV referral pathways are in place and supporting humanitarian actors to undertake GBV risk mitigation measures.
- **Rollout the GBVIMS**, which has now become an essential reference tool used by government and other actors to identify GBV risks, show trends in GBV prevalence and inform interventions. The Information Sharing Protocol has been signed by 32 partners, including 25 national NGOs, 3 ministerial departments and 4 UN agencies. UNFPA has sought to build stakeholders capacity through the provision of trainings on the safe and ethical collection and use of GBV data.

Palestine

Highlights include:

- **Increased access to high-quality GBV services**, resulting from a combination of advocacy and targeted training of GBV service and healthcare providers. Stakeholder meetings have been organised in Gaza and the West Bank to advocate for improved availability and access to GBV response services. UNFPA organised six orientation sessions on the UNFPA Minimum Standards for Prevention and Response to Gender-Based Violence in Emergencies, targeting 120 service providers in six districts of the West Bank, with the view to enhancing their understanding of what constitutes effective and appropriate GBV prevention and response programming. A further 275 healthcare providers have been trained on the medical response to GBV, paying particular attention to the clinical management of rape. Several community outreach activities have also been conducted to raise awareness about GBV and available services. More than 5,000 members of the community have been reached, including 3,000 women.
- **Leadership of the GBV sub-cluster in the West Bank and Gaza**, which has resulted in the development of a GBV prevention and response strategy, the inclusion of GBV in the 2018 Humanitarian Response Plan, and the rollout of the first GBV Standard Operating Procedures which were created in partnership with the Ministry of Health, Ministry of Interior, Ministry of Justice, Ministry of Social Development and NGOs, and which set out guiding principles, procedures, roles and responsibilities in the prevention of and response to GBV. A total of 280 health care providers have been trained on how to apply the SOPs in their work with GBV survivors. The GBV Sub-Cluster has also published a policy paper "The Palestinian Women and the Great Return of March in Gaza Strip", with the aim of raising awareness and understanding of the disproportionate impact the crisis in Gaza has had on women and girls.
- **Established online information management platform to facilitate interagency GBV data collection and management**, so actors working on GBV can report on their GBV cases, services and programmes. The information collected through this platform is used to help identify GBV risks and prevalence, publish fact sheets, inform

meetings with stakeholders, identify gaps and challenges with GBV service provision, and inform project and programme design. To ensure partners collect, input and manage their GBV data in a safe and ethical manner, UNFPA has provided training to 30 GBV sub-cluster members. In 2018, 21 national organisations reported quarterly on their GBV programmes and more than 32,000 GBV cases were recorded in the system.

In addition to results provided by the Programme Funding Report[2] produced and shared by UNFPA in March 2019, an independent external evaluation was carried out on the "*Working Together to Stop Gender-Based Violence'* project in Palestine, which was implemented in two phases between 2014-2016. The project is described as "packed with revolutionary achievements and brilliant successes."[3] One of the success of UNFPAs work in Palestine during this period (which lay the groundwork for future success) was its engagement with the Ministry of Women Affairs and the Ministry of Health, creating political will to include prevention and response to GBV in the National Health Policy Strategy and create a national GBV Referral System, involving and building the capacity of government health providers to deliver GBV services, and passing a decree exempting survivors from having to pay medical fees for medical certificates. These efforts have helped ensure the sustainability of services, as they are now institutionalized within government structures.

Lessons Learned

Lessons learned from the project to date include:

- An enhanced understanding of the benefit of integrated GBV and SRH services as a critical entry point to providing GBV and CMR services in difficult contexts.
- High demand for CMR training by service providers in countries where there are perceived barriers to providing services.
- The importance of engaging survivors and national authorities at all stages of project design and implementation.
- The UNFPA continuum approach is necessary to ensure project sustainability in a complex operating environment where the development-humanitarian divide is relatively artificial.
- The reality that critical gains in GBV information management systems, national level advocacy and capacity building can take years to be seen.
- The success of country offices to support global level monitoring if a measured multi-step approach to GBV information management is taken.
- The continued need to provide guidance and support to Country Offices to ensure safe and ethical data collection as well as high-quality survivor care.
- More attention needs to be given to reaching women and girls with disabilities, and other intersecting identities.

[2] UNFPA March 2019, *Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts Final Report 2018 Funding* P.9-10.
[3] Ayesha AlRifai February 2016, *Final Evaluation of Working Together to Stop Gender Based Violence in Palestine* p.8.

Priorities Moving Forward

- In 2018-2019, UNFPA will focus on scaling-up interventions especially for hard to reach and vulnerable populations, improving quality of care particularly for CMR services, formalizing national and sub-national inter-agency GBV coordination mechanisms, and ensuring country-level reporting against a global results framework which provides a common set of global indicators. The 2018-2019 project document also noted greater attention to outreach to detect GBV survivors with disabilities.

4.2 Results against NAP indicators

The results generated by the *"Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts"* programme are in line with the stated priorities and intended activities set out in the third Danish National Action Plan (2014-2019), which include:

(i) Support humanitarian partners working on implementing humanitarian responses that include protection of women and girls from the threat of sexual and gender-based violence and providing essential services to survivors of gender-based violence as part of the first stage of an emergency response.

(ii) Work towards better integration of longer-term humanitarian assistance and long-term development also to ensure the short-term interventions transit into longer term interventions with a focus on women's inclusion and gender equality.

That said, there are weaknesses in the third Danish National Plan's Results Framework, as the indicator which corresponds to these two activities- "Utilization of IASC GEN CAP gender markers reported by the organisations"- is poorly formulated, as it does not measure successful implementation and achievements. Thus, it appears there is no accountability mechanism in place, which makes clear the contribution of the *"Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts"* programme to the third Danish National Action Plan, whether the results from this programme will inform global results framework for the third Danish National Action Plan, and if so, how.

5 Case study contribution to Danish NAP

5.1 Contribution of engagement to NAP objectives

The *"Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts"* appears to be a relevant, appropriate and strategic investment by the Government of Denmark, as part of its efforts to contribute to the implementation of UNSCR 1325 and the advancement of the WPS agenda. The programme is also in line with the priorities set out in the third Danish National Action Plan, which includes supporting humanitarian partners to protect women and girls from the threat of sexual and gender-based violence and provide essential services to survivors. The programme has been successful in contributing to the mitigation of protection risks facing women and girls in emergencies, improving GBV survivors' access to high-quality lifesaving SRH and GBV services, and reducing the impact of GBV.

5.2 Relevance of the NAPs to the case study engagement

Given that no reference is made to the third Danish National Action Plan in any of the programme documentation, and interviewees were not familiar with it or aware of its

relevance to the "*Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts"* programme, this raises a question mark over its utility. It also brings into question whether the significant results that have been achieved through this programme can be attributed to the third Danish National Action Plan, or if in fact other multilateral, bilateral and organisational policies, strategies and action plans have been more influential.

5.3 The role of civil society

Although there is evidence of close collaboration with national authorities in the leadership of GBV coordination mechanisms, and with government health service providers, there appears to have been limited consultation with and involvement of civil society, in particular women's rights organisations (WROs), in the design, implementation, monitoring and evaluation of the "*Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts"* programme. This represents an oversight on the part of both the Danish MoFA and UNFPA, given that the value of such engagement is formally recognized by global humanitarian policy frameworks, including UNSCR 1325 and the Women, Peace and Security (WPS) agenda[i], the Call to Action on Protection from GBV in Emergencies[4], and the World Humanitarian Summit's (WHYS) five core commitments to women and girls,[ii] and the Grand Bargain Agreement.[5]

WROs have an important role to play in humanitarian action, particularly in the context of preventing and responding to GBV. As trusted and established members of the community, they are well placed to understand the distinct needs of women and girls in the specific context and respond appropriately. If adequately resourced and supported, WROs are also well placed to bridge the humanitarian-development nexus. Interventions in crisis-affected contexts typically require both short-term emergency responses as well as longer-term programming that meets immediate needs and also lays the foundation for sustainable and peaceful recovery. WROs are on the ground before, during and after a crisis and can therefore respond to the immediate humanitarian needs of women and girls; build their resilience so they are better able to withstand and recover from future shocks; and, promote gender equality and women's empowerment, so women and girls are better able to claim and exercise their rights.

5.4 Sustainability and resourcing

The funding received from the Danish Government as part of the *Innovations to Eliminate Gender Based Violence in Humanitarian Contexts* programme has significantly strengthened UNFPA's operational capacity, particularly through the roving team mechanism. These roving teams have helped UNFPA to deliver much-needed support to country teams facing emergencies, temporarily fill gaps in human resources, at the same time as building national capacities.

Following on from the success of the *Innovations to Eliminate Gender Based Vilence in Humanitarian Contexts* programme, UNFPA proposed a further three-year programme of

[4] Outcomes from the WHS included a strong core commitment around women and girls, and a sub-commitment specifically on GBV in humanitarian action. For more information, see https://www.agendaforhumanity.org/resources/world-humanitarian-summit#core-commitments
[5] For more information on the Grand Bargain, see https://www.agendaforhumanity.org/initiatives/3861

cooperation with the Government of Denmark. Denmark has since agreed to award 25 million Danish Kroner per year to the UNFPA's *Transformative Humanitarian Funding* programme (2019-2021). The aim of this programme is to build upon the previous initiatves and adapt them, which if successful and scaled up, would result transform how UNFPA (i) relates to clients through expanding cash-based programming, (ii) funds emergencies through accessing a more flexible and rapid mechanism, (iii) provides technical support to the field by making it more regional/country focused, (iv) uses GBV data clection and analysis for system-wide coordination, and finally (v) how GBV in emergencis is addressed in One UN structures at the country level.

6 Conclusion and recommendations

The "*Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts"* programme has been successful in contributing to the mitigation of protection risks facing women and girls in emergencies, improving GBV survivors' access to high-quality lifesaving SRH and GBV services, and reducing the impact of GBV. The programme has made a positive contribution to the prevention, protection and relief and recovery pillars of the UNSCR 1325 and the Women, Peace and Security agenda, insofar as it has helped contribute to the prevention of conflict and violence against women and girls, sought to protect and uphold their human rights, and address their needs in relief and recovery efforts.

Although earlier project documentation makes less reference to specific categories of vulnerable populations, more recent project documents make explicit reference to reaching specific categories of women and girls, such as young girls being particularly vulnerable to trafficking, and women and girls with disabilities. However, these references appear to be country-specific rather than mainstreamed throughout the project. A targeted intersectional approach that identifies vulnerability according to the interconnected identities of women and girls would enhance project impact in reaching the most vulnerable populations.

The programme appears to be a relevant, appropriate and strategic investment by the Government of Denmark, as part of its efforts to contribute to the implementation of UNSCR 1325 and the advancement of the WPS agenda. The programme is also in line with the priorities set out in the third Danish National Action Plan, which includes supporting humanitarian partners to protect women and girls from the threat of sexual and gender-based violence and provide essential services to survivors.

The design, implementation, monitoring and evaluation of the *"Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts"* programme appears to have been done without reference to the third Danish National Action Plan, but has instead been influenced by UNFPA own's organisational policies, strategies and action plans. This raises a question mark over the utility of the third Danish National Action Plan as an influential policy document. Furthermore, there is no accountability mechanism in place, which makes clear the contribution of the *"Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts"* programme to the third Danish National Action Plan, whether the results from this programme will inform global results framework for the third Danish National Action Plan, and if so, how.

There is a clear need for a communications campaign to raise awareness about the third Danish National Action Plan internally within the Danish Ministry of Foreign Affairs and externally among implementing partners, to ensure that the UNSCR 1325 and WPS considerations deemed to be a priority by the Danish Government are strategically and meaningfully factored into funding decisions and its programmes portfolio. There is also a need to revise the existing Danish National Action Plan results framework, so it is better able to capture the full range of UNSCR 1325 and WPS related activities which the Government of Denmark is funding and record achievements and results.

7 References

UNFPA March 2019, Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts Final Report 2018 Funding

UNFPA February 2019, Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts Programme Document (2018-2019)

UNFPA March 2018, Innovations to Eliminate Gender-Based Violence in Humanitarian Contexts Final Report 2017 Funding

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