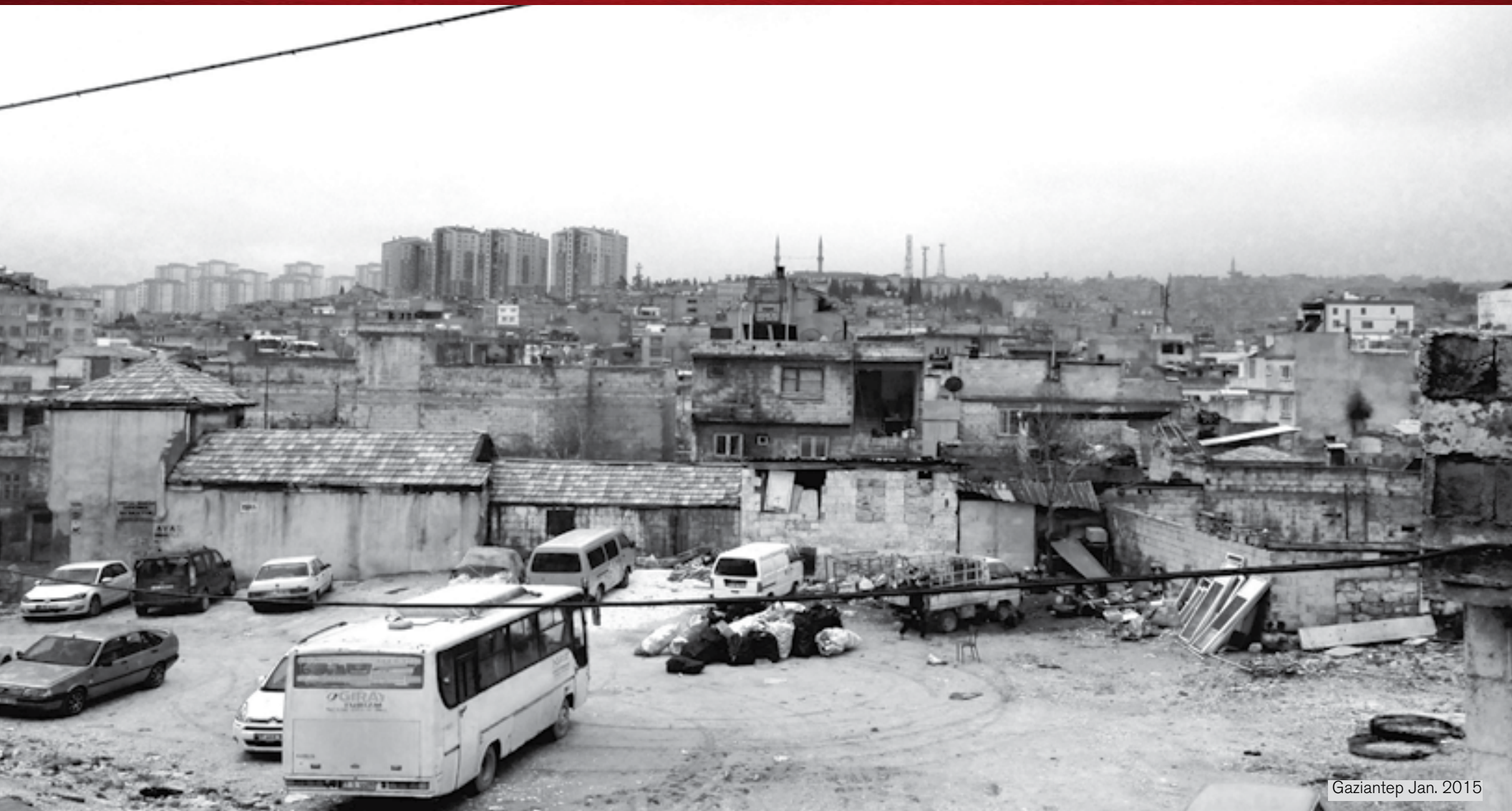




I'm Here: Steps & Tools to Reach Adolescent Girls in Crisis

Updates & Learning from implementation in 6 countries, 25+ communities...



Gaziantep Jan. 2015



USAID
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The primary audience for this document is humanitarian practitioners who (a) seek to reach the most vulnerable adolescent girls from the start of an emergency and (b) aim to ensure their sector's operations are safely, effectively, and measurably benefiting the most vulnerable and hardest-to-reach adolescent girls. For additional information, please contact the Women's Refugee Commission at info@wrcommission.org.

Why is change necessary? The status quo isn't working.

Most humanitarians intuitively understand that crises do not impact everyone equally; not everyone has access to the same information, resources, or social networks to safely navigate a crisis. One of the most marginalized and consistently overlooked populations by humanitarians, according to real-time evaluations, is adolescent girls. A default, one-size-fits-all reflex persistently bundles adolescent girls' needs and vulnerabilities with those of younger children or adult women. This status quo approach relies on misplaced assumptions that compromise all adolescent girls' safety and well-being. In addition, this “business as usual” practice disproportionately sidelines the most vulnerable girls who are least likely to safely access life-saving services or, if available, targeted programs.

Shifting this status quo is necessary for the humanitarian community to better meet the needs of adolescent girls and their families. New field-tested approaches, tools, and collaborations can help.

The reality is that adolescent girls (10-19 years)—who account for an increasing proportion of displaced persons—are at a comparative disadvantage both before and after humanitarians arrive to support displaced populations. Flight intensifies these disadvantages. Because of their age and sex, the roles and responsibilities that adolescent girls assume during crises swiftly isolate them, funnel them into adult roles, leave them dependent on others, and make them vulnerable to exploitation, abuse, and violence. Compared to their male peers or to adults, adolescent girls disproportionately lack the information, skills, and capacities to navigate the upheaval that follows displacement. Limited assets, agency, and mobility restrict girls from accessing life-saving resources, information, and social networks. Even well-meaning relatives isolate girls within their homes, shielding them from real threats, but also from programs that could benefit them.

Adolescent girls' needs and vulnerabilities vary based not only on the social and gender dynamics that constrict their lives and infringe upon their rights, but also on how humanitarian sectors respond (or do not respond) to their specific needs, risks, and disadvantages. Adolescent girls' isolation and their gender-based vulnerabilities have implications for how all humanitarian actors set out to achieve their goals and objectives; adolescent girls' safety and well-being are not solely the concern of gender advisors, protection officers, or “those girl-focused” organizations. Being more responsive and accountable to adolescent girls from the start of an emergency is everyone's responsibility. It also advances results.

From the shadows. At the onset of a crisis, taking proactive steps to identify and engage *all* girls helps to ensure that they can access life-saving services without experiencing violence, abuse, or exploitation. If girls have been consulted and are able to safely access emergency services, humanitarian actors and development practitioners who respond after the acute phase are well positioned to deliver evidence-based interventions. Actions taken in the early days of a response are an opportunity to support girls' development and actualize their rights.

When needs outpace resources and where practitioners are pressed for time, informed decision-making that safely links adolescent girls to life-saving resources and to substantive programs may seem unrealistic. It's not.



What change is necessary? Be proactive, intentional, and data driven.

Humanitarians' choices during emergency preparedness, planning, and response have implications for adolescent girls' survival, for their recovery, and for their resilience against violence and future shocks. Yet, a pervasive belief exists within the humanitarian community that the weeks immediately after an emergency are not a reasonable time for nuanced delivery of aid. The rationale is that overwhelming need, weakened infrastructure, and limited capacity offer little time for data collection, analysis, and use; emergency work is somewhat generic and the best actors can do is to avoid intentionally excluding people.

Here's a commonplace statement: "We build the facilities, distribute the aid without prejudice, so everyone has access." The problem, however, is a lack of intentional inclusion—merely making a service available is insufficient. Additionally, when asked how humanitarian operations benefit girls, another common response from practitioners is, "We don't do girl programming." This response mistakenly diverts the responsibility to reach adolescent girls onto a few select advisors, sectors, or agencies.

Ensuring adolescent girls benefit from relief operations is every sector's responsibility. It requires all actors to be proactive, intentional, and data-driven. Action and analysis are not mutually exclusive; these are mutually reinforcing concepts that enable more effective and accountable humanitarian response.

Is change possible? Yes!

Based on a literature scan and key informant interviews with more than 100 practitioners carried out in 2013, the Women's Refugee Commission (WRC) set out to identify a series of accessible steps and tools that produce "actionable information." Most practitioners requested support in translating their commitment into concrete, programmatic actions that benefit adolescent girls.

In April 2014, the WRC piloted a new approach in South Sudan. The result: the [I'm Here Approach](#)—a series of steps and complementary field tools. Since the first pilot, the WRC and its operational partners have adapted the *I'm Here Approach* for implementation in more than 25 communities across six humanitarian settings. Each implementation has generated new learning, new adaptations, and new field tools. Each implementation has made clear that change *is* possible—change that most always starts when practitioners view the actionable information and utter three words: "I didn't know." What often follows this moment is practitioners themselves identifying opportunities to improve response.

ACTION LEARNING | 2013-2016



What Is the *I'm Here* Approach?

The *I'm Here* Approach refers to a series of steps and a complementary set of smartphone-based tools that rapidly enable humanitarianians to:

1. Use GPS technologies to identify and map existing services within a predetermined service-area, as defined by girls' mobility;
2. Produce a context-specific profile of the hardest-to-reach adolescent girls (and boys) within the service area where humanitarian operations are underway or are being planned;
3. Assess if current/ongoing operations are reaching and inclusive of the most vulnerable adolescents;
4. Identify priority needs, protection concerns, and proposed solutions from adolescents themselves; and
5. Inform the design and implementation of asset-building programming tailored to specific adolescents.

The *I'm Here* implementation—the capacity building, the steps, the tools, the results, the outputs—provide insights to the following questions:

- » What key resources exist within the service area where <insert humanitarian actor> plans to design programming for adolescent girls? And what differences exist between each area?
- » What is the vulnerability-capacity profile of adolescent girls (and boys) within each service area, with an emphasis on noting the baseline numbers of harder-to-reach sub-populations of adolescent girls, for example, out-of-school and married girls? How are vulnerability-capacity profiles different or the same for girls and boys within, and across, service areas?
- » What should be the baseline estimates for the number of girls reached, specifically girls from vulnerable, harder-to-reach sub-populations?
- » What are adolescent girls' (and boys') self-expressed priority needs and fears, with an emphasis on seeking insights among girls and boys who have similar experiences and vulnerabilities?
- » What are the program implications, based on the actionable information collected through the service-area resource scan, the adolescent mapping, and the targeted focus group discussions?
- » What are the priority considerations for humanitarian operations, with respect to immediately mainstreaming adolescent girls into operations and to designing targeted programming as soon as possible?

I'm Here—steps and complementary field tools to help humanitarian actors reach the most vulnerable adolescent girls and be accountable to their safety, health, and well-being from the start of a response to crisis.



I'm Here Approach

To be carried out within a defined area that humanitarian organizations, sectors or coordinating bodies deliver emergency information and services:

The Steps

Identify the specific crisis-affected community where displaced adolescent girls are concentrated and map its key service points where humanitarian actors are delivering emergency information and services. Be attentive to services provided by host communities.

Make visible the diverse context-specific profile of adolescent girls, identify girls based on basic vulnerability and capacity categories, e.g., age, education, disability, marital status, accompaniment status, and childbearing status. Be gender synchronized: also identify boys.

Hold group meetings with adolescent girls of similar vulnerabilities or capacities to learn girls' top-line needs, fears, and protection concerns, as well as to record the vital information, skills, and assets they need. Be inclusive of girls with disabilities and engage caregivers.

Elaborate specific plans that respond to the context-specific profile of girls' vulnerabilities, capacities, needs, and risks, e.g., link girls to adolescent-sensitive services, set up safe and inclusive physical spaces where girls can immediately learn and receive vital information and services, and, as soon as possible, benefit from targeted, asset-building support.

Rally support across humanitarian sectors and local actors to be active partners who ensure adolescent-sensitive emergency response, strategies, indicators and rights across all sectors and clusters.

Engage the capacity of adolescent girls to continuously inform and actively support humanitarian response and recovery operations.

The Tools

Service area resource scan using GPS smartphone applications.

Adolescent smartphone-based mapping tools, including the *Girl Roster* developed by the Population Council and *Boy Matrix* and *Inclusion Now* developed by the WRC.

Focus groups via the Participatory Ranking Methodology developed by scholars at Columbia University.

Assumption Crosscheck Exercise, Actionable Insights PPT, Availability Snapshot PPT, Emergency Girl Integration Matrix, & I'm Stronger Core Indicators developed by WRC to support response design, implementation, and evaluation.

Real-time monitoring tool & analytics dashboard to facilitate analysis and decision-making, to monitor collective action, and to track girls' use of existing services and changes in their protective assets (forthcoming).



Overview: Action Learning 2013–2016

South Sudan—April 2014, April 2016

Operational Partner: ACF International, Oxfam

Donor: USAID/OFDA

Key Learning: The initial pilot demonstrated that the tools—specifically the service-area scan, *Girl Roster* and PRM focus groups—could not only be applied in an IDP camp setting, but also generate actionable information for improved decision-making. The second implementation focused on promoting girls' safer livelihoods by integrating *I'm Here* and the WRC Cohort Livelihood and Risk Analysis (CLARA) tool. Detailed summary for pilot implementation available [here](#). Case-study report on *I'm Here*-CLARA pilot available [here](#).

Egypt—January 2015

Operational Partner: Save the Children Egypt, with UNHCR support

Donor: Nike Foundation

Key Learning: The first implementation in an urban setting demonstrated that the approach and tools could be used in concert with UNHCR registration data. Additional learning: adolescent girls' involvement in service-area scan offers valuable insights; a tele-bank implementation model is possible; and girls' safe participation in implementation is possible, and meaningful. A first-person account and video available [here](#).



Turkey—February 2015, ongoing

Operational Partner: Mercy Corps

Donor: Oak Foundation

Key Learning: Door-to-door implementation is possible. Refugee and local youth—who together spoke Arabic, Turkish, and Kurdish—collaborated and led field work. A Mercy Corps/WRC implementation brief available [here](#).

New Output: Contact list, encrypted and color-coded by vulnerability and designed to support targeted engagement. Also, developed the ability to sort the *Girl Roster* by nationality (a proxy for displacement).

Nigeria—March 2016

Operational Partner: Mercy Corps

Donor: USAID/OFDA

Key Learning: Implementation in 6 crisis-affected areas across 3 states highlighted that girls' vulnerabilities are a combination of their displacement and gender. For example, in some areas, girls from host and IDP families are equally vulnerable.

Iraq—June 2015, ongoing

Operational Partner: Mercy Corps

Donor: Oak Foundation

Key Learning: The approach and tool can be used to inform the start of a targeted intervention for adolescents—girls and boys. Additionally, the implementation process provides insights for staff, and participant consent is tracked electronically, inclusive of why consent is not secured.

New Tool: *Boy Matrix*, a mobile-based mapping tool that captures boys' topline vulnerability-capacity profiles—a complement to the *Girl Roster* to promote equity and gender-synchronized response.

New Outputs: Actionable Insights & Availability Snapshot PowerPoints—two slide decks that capture top-line information for decision-making.

Lebanon—October 2015, ongoing

Operational Partner: Danish Refugee Council

Donor: US State Department (BPRM)

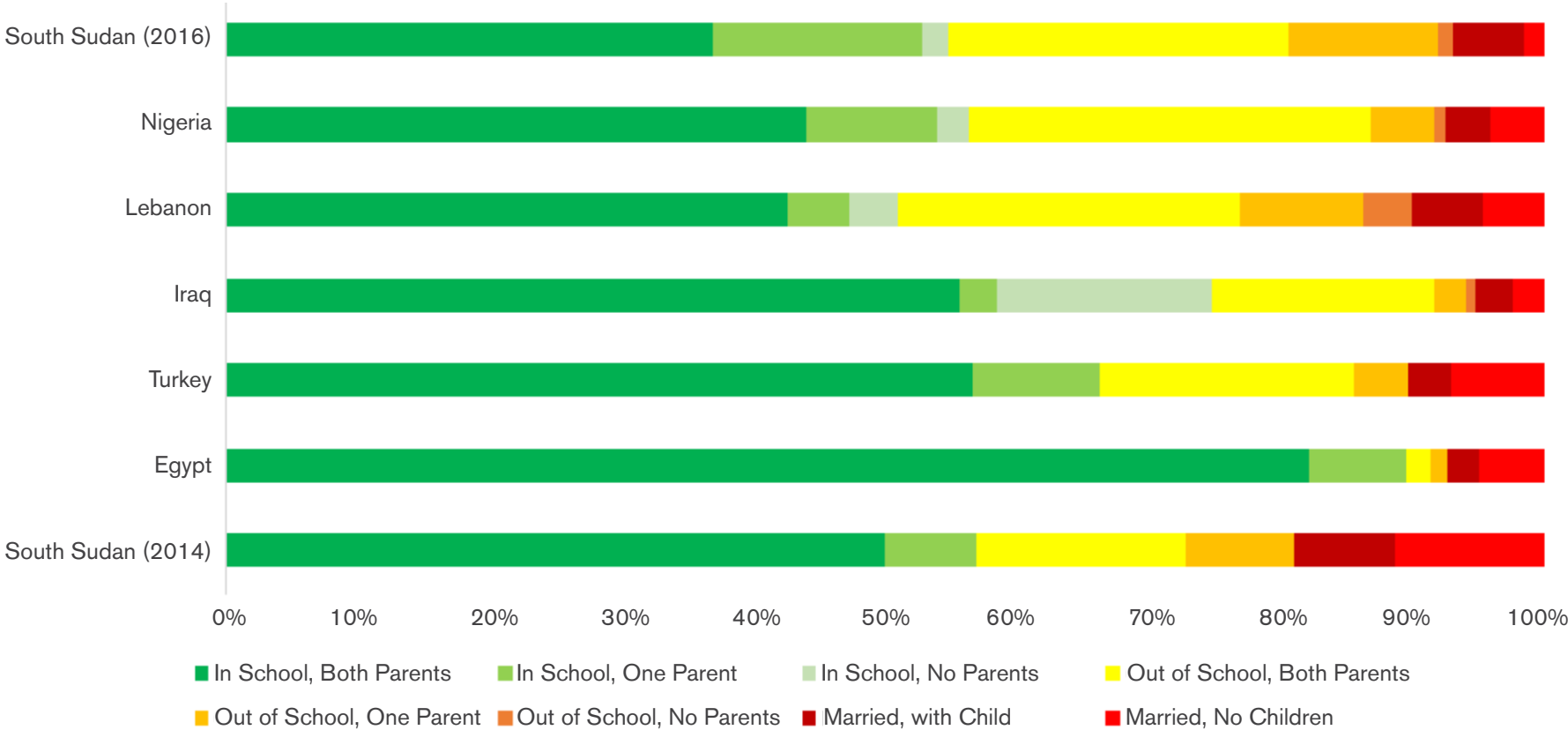
Key Learning: Field teams able to identify and engage already-married girls, girls at risk of child marriage, and girls with disabilities or who live in a household with an adult who has a disability.

New Tool: *Inclusion Now*, a mobile-based module that adapts the Washington Group's [Short Set of Questions on Disability](#) for use in humanitarian settings. Additionally, the *Boy Matrix* is now inclusive of ability to rapidly sort by nationality and boys' accompaniment status.



Key Message: Vulnerability-capacity profiles are context-specific to the humanitarian setting. Girls with greater agency and support are more likely to access available services. The imperative is on actors to be inclusive of and accountable to the most vulnerable, hardest-to-reach adolescent girls.

Adolescent Girls' Vulnerability-Capacity Profiles*
Results from the Girl Roster, developed by the Population Council



* The purpose of this chart is to demonstrate that it is possible to identify and be inclusive of the most vulnerable segments of adolescent girls, their brothers, and their families. It collapses select Girl Roster results to visually capture macro-level differences across countries. Therefore, the chart masks the critical, context-specific differences that exist across different humanitarian settings within the same country. The Girl Roster and Boy Matrix, for example, capture and present information by the following age categories: 10-11; 12-15; 16-18, 19-24.

What are the next steps for the action learning agenda? To document, to refine, to engage, to catalyze change in practice.

Next steps for this learning agenda focus on field documentation, tool refinement, and stakeholder engagement. In collaboration with a diverse range of partners across sectors and settings, the aim is to catalyze changes in humanitarian practice that deliver results for *all* adolescent girls within a crisis-affected community, inclusive of the most isolated and hardest-to-reach girls.

Field documentation. In the coming year, the WRC will continue to document how *I'm Here* implementation informs operational decision-making and results in improvements in girls' safety, health, and well-being. Field learning has confirmed that humanitarian actors can rapidly generate an actionable snapshot of the number of girls who are heads of households, pregnant, parenting, married, out of school, unaccompanied, or who have disabilities. Even in settings where staff capacity to facilitate focus groups is limited, field learning has confirmed that humanitarians can also incorporate input from girls' themselves, their brothers, and their parents. With this information, humanitarians across different sectors can link girls to life-saving services and mainstream their safety. However, the *I'm Here* Approach and tools are a starting point, not the end goal for this work. As a result, WRC commits to monitoring how previous, current, and future implementations facilitate improved response.

Tool refinement. Based on partners' feedback, WRC will continue to improve existing tools and create new ones. Field learning has already revealed a key gap in the tool suite: the inability to monitor girls' use of existing life-saving services and their participation in targeted programs that confer protective effects against gender-based violence. In the coming year, the WRC will work with partners to develop and pilot real-time monitoring tools. This work will take place in concert with a multi-stakeholder initiative to develop data visualizations that better enable field staff to make informed decisions after *I'm Here* implementation. The planned output: a step-by-step guide on how to implement the *I'm Here* Approach, inclusive of different sectors' insights and of updates to all profiling tools (*Girl Roster*, *Boy Matrix*, and *Inclusion Now*).

Stakeholder engagement. To date, the WRC has principally supported partners that are implementing programs focused on building girls' protective assets, including safer livelihoods. The WRC will continue providing technical assistance with capacity building and field implementation. In the coming year the WRC will strategically engage a diverse range of humanitarian practitioners, clusters, and mechanisms. The goal is to identify entry-points for collaboration, specifically how to cross-pollinate, adapt, and permeate learning from this action research with, and for, adolescent girls. This strategic engagement will marry learnings, avoid duplicating efforts, and seek to harmonize response through capacity building. The aim: to catalyze collective change in practice. The WRC will carry forward this work in concert with the Girls in Emergencies Collaborative—a group of international NGOs that has united around a statement and [“three urgent, doable actions”](#): (1) To identify and gather critical information about girls in the earliest days of an emergency when risks may be the highest; (2) To develop specific and visible mechanisms that connect girls to basic human needs services and logistical support; and (3) To engage girls in the relief and recovery process.

“I didn't know. And **with this information, I can do something.** Not acting decisively after seeing this would be wrong, maybe irresponsible.”
— Field staff, South Sudan

“This is great. It's so much easier ... **We can do this.**”
— Field staff, Iraq

“*I'm Here*, where is the meeting for girls?”
— 12-year-old displaced adolescent girl, South Sudan.



Annex I – Immediate Considerations for Mainstreaming

From the start of a humanitarian response, every sector can mainstream adolescent girls into their responses. For example:

FOOD & NUTRITION

- » Are food security and nutrition indicators disaggregated by sex and age?
- » Have consultations with adolescent girls informed distribution times and sites?
- » Are adolescent girls' nutrition needs noted in needs assessments, e.g., iron deficiency?
- » Are young adolescent mothers and their food and nutrition priority needs addressed in strategies and service delivery?
- » Is there consideration for adolescent girls' roles in caring for families and dependents, e.g., decisions regarding size of rations, appropriateness of rations, distribution channels, and the monitoring of distribution, collection, and use?
- » Are there school feeding programs to encourage girls' school attendance/retention?
- » Are older girls engaged in food distributions and field monitoring?

WATER, SANITATION, AND HYGIENE (WASH)

- » Females often hold the primary responsibility for water collection and use. Have consultations with adolescent girls informed WASH sector's understanding about adolescent girls' roles, responsibilities, and needs in ensuring household water supplies are met?
- » Are the location of bore holes, water points, and latrines decided upon in consultation with adolescent girls? Are water supplies accessible and safe for adolescent girls (as well as for women and men)?
- » Are sanitation and hygiene messages and kits adolescent friendly in content, structure, and delivery? Schools or formal learning centers should not be the only dissemination strategy.
- » Are privacy and sanitary needs for girls' menstrual hygiene addressed?

HEALTH

- » Are adolescent girls' priority needs and risks incorporated during the implementation of the Minimum Initial Services Package for reproductive health?
- » Are adolescent mothers and pregnant girls identified and safely referred to health services?
- » Are health practitioners—both international and local staff—adequately trained to deliver adolescent-friendly sexual and reproductive health services and to recognize and report signs of abuse or violence? The ratio of female-male health staff should reflect the composition of the population.
- » Are birth control information and methods and family planning services available to adolescent girls?
- » Have adolescent girls been consulted on the hours that health facilities operate?
- » Are key, life-saving health messages tailored to adolescent girls' developmental stages and delivered via channels that reach (most-at-risk) girls?
- » Are food security and nutrition indicators disaggregated by sex and age?



SHELTER, CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

- » Have adolescent girls been consulted on camp layout and the location of services?
- » Are girls able to safely access available services?
- » Is lighting adequate for safe use of latrines and water points at night?
- » Have safety mapping exercises been carried out in the camps to identify unsafe areas and plans put in place to make those locations safer for girls?
- » Are girls able to participate in camp management structures?
- » Have girls' groups and youth groups been established within the camps? Do girls have a voice in camp management decisions?
- » Have safe spaces for girls been identified?
- » Have girl-only times been established at youth centers?
- » Do girls have the same opportunities as boys to engage in recreational activities? Are times at sporting venues and recreational centers (e.g., soccer pitches and "youth centers") reserved for girls?

PROTECTION

- » Were adolescent girls consulted to record their protection risks and concerns, including areas where they feel insecure and their recommendations for improving their safety and access to services?
- » Are physical spaces where adolescent girls can convene and receive age-appropriate information and/or services available to them?
- » Is a system in place to identify and register unaccompanied adolescent girls?
- » Based on the vulnerability profile of adolescent girls in the service-delivery area, are girls' unique protection risks taken into account by actors across sectors?
- » Are the context-specific protection risks (e.g., kidnapping, human trafficking, child marriage, sexual abuse, recruitment into armed groups) being mitigated by strategies and humanitarian action?

EDUCATION

In consultation with girls, families, and camp committees:

- » Are informal learning opportunities for out-of-school adolescent girls established?
- » Are barriers to adolescent girls' participation in formal schooling being addressed?
- » Are bridging and accelerated learning opportunities available to girls to assist with re-entry into formal education?
- » Are daily routines, caretaking responsibilities, and time poverty considered in learning initiatives (formal and informal) for adolescent girls?
- » Are emergency education initiatives inclusive of girls with heightened vulnerabilities, including unaccompanied adolescent girls, out-of-school girls, married girls, young mothers, and adolescent girls with disabilities?
- » Are incentives needed to promote girls' school attendance and retention, such as school feeding programs, extra distributions of non-food items, or conditional cash transfers?



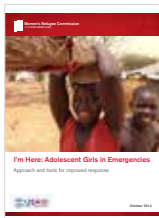
Annex II – Considerations for (as Soon as Possible) Targeted Programming

In addition to modifying relief efforts based on results from *I'm Here* implementation, particularly girls' inputs and results from the *Girl Roster* developed by the Population Council, humanitarian actors should design targeted, girl-centered programs that respond to the context-specific profile of adolescent girls as soon as possible. Based on the 2014 WRC report [Strong Girls, Powerful Women: Program Planning and Design for Adolescent Girls in Humanitarian Settings](#),* the WRC recommends:

- » Allocating and prioritizing time for staff to consult with girls
Participatory consultations help ensure that interventions are responsive to girls' needs, concerns, and capacities in the crisis-affected area where staff oversee relief and recovery operations.
- » Setting up safe spaces to bring girls together
With girls' input, identifying a physical space promotes safety and establishes a platform through which to deliver targeted programming.
- » Maintaining a focus on girls as the primary beneficiaries
Center interventions on girls, create girl-centered indicators, and involve them at every step of the response and recovery cycle.
- » Integrating mentorship and leadership models into programs
Girls and communities mutually benefit from mentorship and leadership. Strong networks of girl leaders improve the status of females in the community.
- » Integrating programs with critical health-related information and services, as well as economic strengthening activities
Adolescence is a critical time for girls' sexual and reproductive health (SRH) and for them to acquire skills that support their development. Interventions should ensure that girls receive adolescent-friendly and age-appropriate SRH information and services, as well as the financial literacy, savings, and vocational skills training that can improve girls' well-being and opportunities.
- » Ensuring programs are developmentally and contextually appropriate
Health and life skills activities for younger girls should focus on different issues than for pregnant, married, and parenting girls; for financial literacy skills, interventions should help younger girls to practice saving and older girls to access loans.
- » Involving men and boys in programs as partners and allies
Men and boys can be supportive allies who support and enable girls' participation and improved outcomes for girls.

* The *Strong Girls, Powerful Women* report captures key learning from a three-year global advocacy project, the Protecting and Empowering Displaced Adolescent Girls Initiative. More information about this initiative, including evaluation results (forthcoming, Winter 2016) is available at wrc.ms/strong-girls-report.

Resources



I'm Here Approach
<http://wrc.ms/lmHere-page>



Strong Girls, Powerful Women: Program Planning and Design for Adolescent Girls in Humanitarian Settings
<http://wrc.ms/strong-girls-report>



Statement and Action Agenda from the Girls in Emergencies Collaborative
<http://wrc.ms/Girls-statement>



I'm Here: Adolescent Girls in Emergencies (South Sudan Field Test)
<http://wrc.ms/lmHere-fieldtest>



Girl Roster
http://www.popcouncil.org/uploads/pdfs/Girl_Roster_flyer.POPCOUNCIL.2015.pdf



Adolescent Girls as Humanitarian Partners (first-person account and audio)
<http://wrc.ms/AGasPartners>



"The Most Vulnerable" Adolescents in Gaziantep: Proactive Research to Ensure Programming Responds to Their Needs
http://wrc.ms/AG_Gaziantep



CLARA guidance and tools
<http://wrc.ms/CLARA-0116>

Short Set of Questions on Disability
<http://wrc.ms/CDC-WG-shortset>

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