



# I'm Here: Adolescent Girls in Emergencies

## Approach and tools for Improved Programming

### Executive Summary and the I'm Here Approach

*I'm Here: Adolescent Girls in Emergencies* is a resource for emergency response staff. It outlines an operational approach and recommendations that can help humanitarian sectors be more accountable to adolescent girls from the start of an emergency. Key rationale, findings and recommendations are based on a literature scan, expert interviews, and a field assessment and pilot testing of mobile-based tools in South Sudan. The report structure allows readers to read the full narrative or to access specific sub-sections. Each section begins with a summary of key findings and messages, followed by supporting information. Annexes contain supplementary material and tools. The report is available at <http://wrc.ms/ImHereReport>.

#### Why this report?

When humanitarian system responds to a crisis, the “starting line” is not the same for everyone affected by the disaster. In the hours, days and weeks following sudden-onset crises, people are not equally equipped with the knowledge, the mobility or the assets—physical, human, social, economic and political—that enable safe access to life-saving services. Displacement also affects people’s daily routines, needs and vulnerabilities in different ways.

Yet a pervasive belief exists within the humanitarian community that the days immediately after an emergency are not a reasonable time for nuanced delivery of lifesaving information and services. With some exceptions, the rationale is that overwhelming need, weakened infrastructure and limited capacity offer little time for data collection, analysis and use. Emergency responses are, by default, somewhat generic.

This claim is not without some merit, and it is important to understand and acknowledge the context in which emergency personnel operate. When the scale of need is vast, the reach of services limited and the funding tight, the balancing act between decisive action and timely analysis is a challenge.

Emergencies and their challenging contexts, however, do not absolve humanitarian actors across sectors from prioritizing actions and using tools that can improve response effectiveness and accountability, including abiding by the humanitarian principle to *do no harm*.

There are many subpopulations whose needs and risks humanitarian actors must take into account when a sudden-onset conflict or a natural disaster occurs. Of these subpopulations, adolescent girls (aged 10-19) are too often overlooked.

Adolescent girls—who account for an increasing proportion of displaced persons—are at a comparative disadvantage before, during and after crises. In countries where emergency personnel routinely respond to crisis, this transitional period between childhood and adulthood is also when girls begin to assume adult roles, but without key skills, capacities and networks that enable others to safely navigate forced displacement. Additionally, the risks in these contexts—rape, abuse, early marriage and abduction—are greater for adolescent girls compared to other population groups.

When humanitarian actors do not collectively account for adolescent girls, then humanitarian sectors can constrict girls’ abilities to safely access life-saving information, services and resources. Proactive action is not solely about reducing adolescent girls’ vulnerabilities and mitigating their risks, but also about ensuring that relief operations link girls to resources and harness their capacity to support aid delivery and recovery efforts.

Compensating for adolescent girls' comparative disadvantages from the outset of an emergency response is a matter of improved effectiveness and accountability. It advances results—an outcome all humanitarian sectors prioritize.

## Key findings

### *Summary*

Results from an intersectoral sample of expert interviews and from a field assessment in South Sudan find that adolescent girls are rarely consulted in emergency relief operations. Practitioners' awareness about adolescent girls' vulnerabilities and needs differs across humanitarian sectors, including limited understanding about how each sector plays a part in mainstreaming adolescent girls into their response operations and in supporting targeted interventions. There is also a lack of clarity about which operational decisions within and across sectors can help link adolescent girls to life-saving resources or harness the capacity of adolescent girls to support relief operations. Adolescent girls are at a comparative disadvantage, with unique needs and subject to particular protection risks; findings suggest that emergency responses do not account for how their routines, roles and assets shape their abilities to safely access vital resources.

### *Field assessment findings*

At an internally displaced persons (IDP) camp in Warrap State, South Sudan, humanitarian actors had not previously spoken to adolescent girls or modified existing services to accommodate their needs, risks or routines. However, when asked for their input via focus group discussions, girls raised and prioritized different needs and fears than adults and boys. Simply making time for participatory consultations with adolescent girls revealed the need to increase health providers' sensitivity to girls' health needs in the camp. Asking girls to describe and prioritize their fears also elevated their safety concerns, including hazards associated with poor lighting and privacy. Additionally, the field assessment found that operational agencies almost exclusively relied on a school to deliver services to

adolescents. Sole reliance on the school to deliver information and services neglected to consider that three out of four girls felt unsafe away from their tents and that almost half of girls in the camp were not attending school.

### *Literature scan findings*

The Women's Refugee Commission (WRC) field assessment findings in South Sudan are in alignment with findings in other emergency settings. A scan of the literature on humanitarian responses in 17 focus countries where humanitarian actors routinely respond did not document any rigorously evaluated emergency interventions that recorded adolescent girl-centered outcomes during the acute phase of a crisis. Program research from development and protracted humanitarian settings, however, has found that structured group learning in a safe physical space confers protective effects against experiencing violence and promotes girls' development and well-being.

## What steps can help improve results, effectiveness and accountability?

### *Piloting a new approach*

Grounded within these realities of sudden-onset emergencies, the WRC and Action Against Hunger International (ACF), with technical support from the Population Council, sought to demonstrate what is possible in an emergency context. In South Sudan, the WRC piloted a combination of mobile technologies (the Girl Roster), participant-driven focus group discussions and the Emergency Girl Analysis Integration Matrix (eGAIM) that, implemented together, might rapidly yield operational data that could inform the immediate delivery of emergency services and later-stage design of targeted programming for adolescent girls.

### **The implementation timeline & key outputs:**

Within three hours of initiating the pilot, the field team had used smart-phones to produce a visual map of a camp perimeter and its service points. Within three days, the WRC implemented the Girl Roster and produced a timely, concrete profile of adolescent girls within the camp. This profile outlines the ages of

girls within a service area, as well as their vulnerabilities (marital status, parental status, accompaniment status and in-school vs. out-of-school status). Within seven days, the research team completed focus group discussions and presented findings to key actors in South Sudan. The research team used the eGAIM to guide briefings with operational actors at the IDP camp in Warrap State and with key coordinating structures in Juba.

### The tools:

The **Girl Roster** enables emergency actors from any sector to rapidly identify the specific profile of adolescent girls in the emergency setting and to safely connect adolescent girls to information and services. The Girl Roster also generates a service-area mapping image. For focus group discussions, the approach relies on the **Participatory Ranking Methodology (PRM)**. The PRM is a rapid appraisal method for needs assessments in humanitarian settings.

The **eGAIM** helps humanitarian actors determine how results from the Girl Roster, focus group discussions and secondary data sources will be mainstreamed and integrated into emergency response design, implementation and evaluation. The eGAIM informs the planning and implementation of emergency programming by supporting technical staff to outline adolescent girls' vulnerabilities and needs; answer key girl analysis questions; and determine how to incorporate these considerations into their work.

### Learning from pilot implementation:

The research team and several partners—local and international—determined that this new approach enables humanitarian actors across sectors to prioritize actions that (1) mainstream girls into emergency response from the outset of an emergency and (2) build the information base that can inform modifications to ongoing delivery of aid and the development of targeted programming as soon as possible.

## **I'm Here | An approach to safely link adolescent girls to life-saving information, services and resources *from the start of an emergency***

Program learning from the literature scan, expert interviews and piloting of the Girl Roster, focus group discussions and the eGAIM informed the development of the *I'm Here* approach.

Its aim is to advance operational results and to support more responsive and accountable humanitarian action that safely meets adolescent girls' needs, engages them in emergency response and ensures their rights from the onset of an emergency through recovery.

From the start of an emergency, all humanitarian sectors<sup>1</sup> have both an obligation and an opportunity to mainstream the protection, safety and needs of adolescent girls into their response preparation, design and implementation. With emphasis on achieving sector-specific goals—that humanitarian assistance measurably responds to adolescent girls' unique needs—during the immediate aftermath of a natural disaster or conflict, humanitarian actors can:

- Identify girls and their vulnerabilities (Girl Roster tool)
- Identify their priority needs and risks (Girl Roster tool and participatory consultations)
- Collate and analyze findings to inform programming (eGAIM).

In collaboration with other sectors and affected communities, humanitarians can both rapidly collect timely information to inform emergency responses and proactively establish an information base upon which to design targeted, girl-centered programs. Over time, targeted girl-centered interventions should be funded and prioritized, with an emphasis on being responsive to the context-specific profile of adolescent girls within a service area.

Girl-centered programs focus on developing girls' assets in a safe environment. The structured delivery and acquisition of information and skills in formal and informal learning environments is associated with a protective effect against experiencing violence and with other positive outcomes for girls' social, physical, cognitive and economic development.

## I'm Here Approach

Within a defined area that an organization, sector or coordinating body delivers **emergency** information and services:

**I**dentify 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.

Reference secondary data sources and Girl Roster mobile-based mapping tool

**M**ake visible the *universe of girls*: sort adolescent girls into basic vulnerability and capacity categories, e.g., age, marital status, education, accompaniment status and childbearing status.

Reference Girl Roster output matrix

**H**old 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 to overcome the negative consequences of displacement and to mitigate their risks of experiencing violence.

Reference Participatory Ranking Methodology (PRM)

**E**laborate specific plans that respond to the *universe of girls* in the crisis-affected area, e.g., set up safe physical spaces where girls can immediately learn about and receive vital information and services, and as soon as possible, benefit from targeted, asset-building support.

Reference emergency Girls Analysis Integration Matrix (eGAIM)


**R**ally support across humanitarian sectors and with local actors around the need for adolescent-sensitive emergency response, strategies, indicators and rights.

Reference results of Girl Roster output matrix, Girl Roster mobile-based mapping tool and eGAIM

**E**ngage the capacity of adolescent girls to support humanitarian response and recovery operations.

Reference eGAIM

**I'm Here: Prioritizing Results for Adolescent Girls  
Mainstreaming and Targeted Operations in Emergencies**



**Targeted**  
Customized programs for girls, as soon as possible  
How? *Asset-building model*




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**Mainstreaming**  
All sectors, from Day 1

How? *I'm Here* approach

1. Girl Roster | mobile-based resources
2. Participatory consultations
3. emergency Girls Analysis Integration Matrix (eGAIM)

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Protect | Serve | Engage in Recovery

## Mainstreaming considerations

From the start of a sudden-onset emergency, every sector can mainstream adolescent girls into their responses. For example:

### **FOOD & NUTRITION**

- 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 food security and nutrition indicators disaggregated by sex and age?

### **WATER, SANITATION AND HYGIENE (WASH)**

- Females often hold the primary responsibility for water collection and use. Have consultations with adolescent girls informed WASH sectors' 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.

### **SHELTER & CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)**

- The views of adolescents, youth and the disabled often differ from those of traditional adult representatives.
- Are measures taken to provide for adolescent girls' privacy in group or transit shelters such as schools, public buildings or "child- and safe-spaces" for girls?
- Are young mothers, unaccompanied adolescent girls and/or girl-headed households provided with assistance in building shelters or setting up tents?
- Are adolescent girls represented on camp committees? Participation should not be tokenistic.



**HEALTH**

- Are adolescent girls' priority needs and risks incorporated during the implementation of the Minimum Initial Services Package?
- Are adolescent mothers 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.
- 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?

**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, among others) 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 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?

## Targeting considerations

*In addition to modifying relief efforts based on the Girl Roster output matrix and the PRM focus group discussion, humanitarian actors should plan and 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 titled 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, creating girl-centered indicators and involving 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 their acquiring 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' wellbeing 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 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. The WRC initiative focused on a literature review and pilot program implementation in three countries: Ethiopia, Tanzania and Uganda. In collaboration with the Girls in Emergencies Working Group, the WRC will continue piloting and assessing the I'm Here Approach, including the Girl Roster and other rapid response tools.

## The diversity and intersecting vulnerabilities of adolescent girls' lives



Read the full report at  
<http://wrc.ms/ImHereReport>



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