

Urban Gender-Based Violence Risk Assessment Guidance: Identifying Risk Factors for Urban Refugees

Urban Risks

Refugees living in cities face high risks of gender-based violence (GBV), often on a daily basis. Some of these risks affect members of the host community as well. Where refugee women, for instance, experience sexual harassment or unwanted touching when taking public transportation, it may be the case that *all* women in that city encounter similar threats whenever they board a bus or take the metro.

It is also common, however, for refugees to face especially high levels of violence because of intersecting risk factors related to their status as refugees or being displaced. Refugees may stand out in urban crowds because of the language they speak, the way they dress, or the color of their skin. Refugees may be targeted for violence because it is assumed, often correctly, that they are unlikely to report incidents of violence, out of fear of drawing unwanted attention to themselves, or because they are unfamiliar with the local legal system. Certain subgroups of refugees may also face heightened risks because of where they live or the work they do, their age, or other traits like disability or diverse gender or sexual identities (e.g., lesbian, gay, bisexual, transgender and intersex (LGBTI) refugees).

Urban GBV Risk Assessment Guidance

The Women's Refugee Commission's (WRC) Urban GBV Risk Assessment Guidance contains essential urban risk questions that are intended to supplement whatever GBV risk assessment tools are currently being used by humanitarian practitioners in urban areas.¹ The questions are based upon input provided by urban refugees themselves, collected by WRC through focus group discussions and interviews conducted in four cities throughout 2015: Beirut, Lebanon; Kampala, Uganda; Quito, Ecuador; and Delhi, India.

The first section of the Guidance contains risk assessment questions relevant for all urban refugees; these are grouped by common risks such as those related to "Employment," "Public Transportation," "Housing," and "Urban Isolation." These questions can be asked of individual refugees, to identify an individual's Key GBV Risks and Potential Risk Mitigation Strategies that could be beneficial to them, including specialized referrals or their participation in certain programs or activities. Answers can also spotlight areas where refugees could use assistance in mitigating

1. For instance, this Urban GBV Risk Assessment Guidance is intended to complement, rather than substitute for, UNHCR's Heightened Risk Assessment Tool (Version 2), available at www.refworld.org/pdfid/4c46c6860.pdf.



an isolated GBV risk, such as insecure housing or threats from an employer. Answers are also intended to help program staff identify trends in refugees' vulnerabilities that must be addressed on a programmatic or community-wide level.

The next section of the Guidance contains additional questions for different groups of refugees. These are subgroups that face heightened risks of GBV: children and adolescent refugees, LGBTI individuals, persons with disabilities, refugees engaged in sex work, male survivors, and elderly refugees. These questions can be used either as a supplement to the general questions in the first section, or they can be used to frame or rephrase those questions. The essential point is that service providers ask tailored questions that demonstrate knowledge and sensitivity around the primary sources of risk and sites of violence reported by at-risk refugees themselves.

The answers to this Guidance are intended to serve two purposes:

- (1) To inform individual case management and service provision, including referrals and generate discussions about individual risk mitigation; and
- (2) To identify trends in GBV risks that are unique to a particular refugee subpopulation. Answers can then be used in developing short- and long-term risk mitigation strategies that are tailored to that subpopulation, and designed in consultation with them, and which can then be implemented on a programmatic or community-wide level.

For instance, if LGBTI refugees report feeling socially and physically isolated, then a short-term risk mitigation strategy at the programmatic level might be to start a support group for LGBTI refugees, and a long-term strategy, also at the programmatic level, might involve building linkages and referral pathways to local LGBTI organizations, while also mainstreaming LGBTI inclusion in broader programming.

Tips for Using This Guidance

These questions are intended to be incorporated into existing risk assessments and can be integrated into tools used by programmers and/or case managers. As the questions are sensitive, this Guidance should be framed within larger ethical considerations of informed consent and referral pathways, and conducted by personnel trained in working with at-risk populations.

These questions can be asked on an individual level, or in consideration of a larger community or refugee subgroup. For instance, these questions might be asked directly to an individual (e.g., "Do you feel safe?"), or they can be asked about a subgroup in general (e.g., "Where do LGBTI individuals/adolescent girls/women with disabilities feel safe?").

This Guidance switches back and forth between these modes to illustrate that it is possible, but not always necessary or desirable, to ask personal questions when assessing urban GBV risks. Since adolescent girls, for instance, may be interviewed in the presence of their parents, they can be invited to speak generally about certain issues, and answer questions on behalf of their peers. To offer another example, given stigmas associated with sex work, it may be more appropriate to phrase questions about sex workers' GBV risks and access to information in general, rather than to direct them personally to a particular individual.



Additional Questions: Key Populations

Children and Adolescents²

Adolescent girls face particular GBV risks in urban areas. They are also often overlooked in humanitarian response and GBV assessments. For these reasons, all of the questions below must be disaggregated for boys and girls.

Tailored Questions	Answer	Notes
<p><i>Under what circumstances do children and/or adolescent refugees go outside their homes?</i></p> <ul style="list-style-type: none"> • Is it considered safe or unsafe for them to be outside their home? Under what circumstances? • Is this different for boys and girls? 		
<p><i>Is the city more dangerous for refugee children and adolescents than host community children and adolescents? How so?</i></p> <ul style="list-style-type: none"> • How might adolescent refugee girls be less safe than adolescent girls from the host community? 		
<p><i>In what circumstances are refugee children ever left at home alone (e.g., when parents are working)?</i></p> <ul style="list-style-type: none"> • What makes this safe or unsafe for them? • Are there any particular people who are unsafe for them around their homes? (e.g., other tenants; landlords; neighbors, etc.) 		
<p><i>Do refugee children and adolescents attend school?</i></p> <ul style="list-style-type: none"> • Is this different for boys and girls? • What are the reasons why they do not attend? <p><i>For those who are not attending: did they used to? Do they desire to go back to school?</i></p>		

2. Because children and adolescents are often interviewed with parents present, which can make them less comfortable answering direct or personal questions, these questions are framed generally, so that children or adolescents can answer them as though they are speaking on behalf of their peers.



Tailored Questions (continued)	Answer	Notes
<p><i>Are refugee children and adolescents less safe than host community children and adolescents at school? In what ways?</i></p> <ul style="list-style-type: none"> • Are they ever bullied for being refugees? • Do teachers treat them the same way they treat host community students? Is this different for boys and girls? • What could we do to make school safer for refugee girls and boys? • How do they get to and from school, and are they safe when they're traveling to and from school? Is this different for boys and girls? 		
<p><i>Do refugee children and adolescents tend to have jobs?</i></p> <ul style="list-style-type: none"> • What sorts of jobs do they tend to have? Are these different for boys and girls? • Where are these jobs? (e.g., outside or inside; in homes or in factories or offices) • What makes working these jobs safe or unsafe for them? How might this be different for boys versus girls? • What could we do to make it safer for refugee children and adolescents working in these jobs? 		
<p><i>What programs or activities for children or adolescents do they participate in?</i></p> <ul style="list-style-type: none"> • What do they like or dislike about these activities? • What, if anything, about these activities makes them feel safer or more protected? • How do they get to these activities, and how do you get home? What makes them feel safe, or unsafe, going there or getting home? • What could we do to make programs and activities more inclusive of refugee children and adolescents? 		



Tailored Questions (continued)	Answer	Notes
<p>Adolescent Girls³</p> <p><i>How do the lives of adolescent refugee girls in the city differ from the lives of adolescent refugee boys?</i></p>		
<p><i>What organizations or services are adolescent girls accessing the most?</i></p>		
<p><i>How do adolescent girls get information about refugee programs and services?</i></p>		
<p><i>What are some barriers or obstacles to adolescent girls participating?</i></p>		
<p><i>Do adolescent girls have access to information about GBV and sexual and reproductive health issues, including pregnancy and menstruation?</i></p> <ul style="list-style-type: none"> • How and where can girls get this information? 		
<p><i>Do adolescent girls know about organizations or activities that provide information about GBV and sexual and reproductive health?</i></p>		
<p><i>Do adolescent girls know of any programs or activities that are specifically for adolescent girls – either refugee girls or girls from the host community?</i></p> <ul style="list-style-type: none"> • Are there any safe spaces just for adolescent girls? 		
<p><i>At what age do girls in your community tend to get married?</i></p> <ul style="list-style-type: none"> • Is this the same age they would get married in their [country of origin]? • How do girls feel about getting married at that age? 		

3. These assessment questions should be used in conjunction with tailored, targeted inquiries into adolescent refugee girls' access to information and participation in urban response. For tools and actionable guidance on proactively engaging adolescent girls in emergencies, see the WRC's I'm Here Approach, <https://womensrefugeecommission.org/resources/document/1078-i-m-here-report-final-pdf>.



Analysis and Notes — FOR OFFICE USE ONLY

Based on all of the information above, including answers to the “All Populations” questions and any supplemental questions they were asked as a member of an at-risk subgroup:

Biggest GBV risks:

What are the largest GBV risks for an individual refugee? For this at-risk population subgroup?

Individual risk mitigation strategies:

What options for risk mitigation could you explore with the individual? Discuss both the potential benefits and unintended risks of each strategy with the individual.

Programmatic or community risk mitigation strategies:

What recommendations do they have for how your activities should be adapted for children or adolescents? For adolescent girls? What strategies could be implemented to make children and adolescents safer in the community? To make adolescent girls safer?



The Women's Refugee Commission improves the lives and protects the rights of women, children and youth displaced by conflict and crisis. We research their needs, identify solutions and advocate for programs and policies to strengthen their resilience and drive change in humanitarian practice.



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