EMPOWERED AID

USING CONTEXTUAL SAFEGUARDING TO MAKE THE DELIVERY OF HUMANITARIAN AID SAFER

Applying the Empowered Aid approach to mitigate risks of sexual exploitation and abuse

Kenya Results Report February 2024

The Global Women's Institute





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ACRONYMS

FDP	Food Distribution Point
GBV	Gender-Based Violence
GWI	Global Women's Institute
MEAL	Monitoring, Evaluation, Accountability, and Learning
ODM	Onsite Distribution Monitoring
PGD	Participatory Group Discussion
PSEA	Protection from Sexual Exploitation and Abuse
SEA	Sexual Exploitation and Abuse

ACKNOWLEDGEMENTS

About Empowered Aid

Empowered Aid is a multi-country initiative led by the Global Women's Institute (GWI) at the George Washington University, in partnership with local & international aid actors, as well as affected communities in refugee-hosting countries around the world. It is grounded in participatory action research on risks of sexual exploitation and abuse (SEA) when accessing aid and seeks to develop humanitarian aid delivery models that reduce power disparities and give those most affected by abuse—women and girls—a sustained voice in how aid is delivered. Empowered Aid has findings from the action research to adapt the design, implementation, and monitoring of aid delivery in 6 countries across 3 regions.

For Empowered Aid's findings, resources, and free online course, visit empoweredaid.gwu.edu

Applying the Empowered Aid approach in Kenya

This report represents findings from implementing the *Empowered Aid Contextualization Toolkit* developed by GWI to support aid actors in applying the results of Empowered Aid's participatory action research to their humanitarian programming (forthcoming at <u>empoweredaid.gwu.edu</u>). It also captures findings from the administration of monitoring tools to capture feelings of safety and risk throughout the distribution process as implemented by World Vision Kenya in partnership with the Global Women's Institute at the George Washington University.

This report was drafted by Faith Njogu (World Vision Kenya Empowered Aid Project Officer), Evans Agwada and Mohamed Sugow (World Vision Kenya M&E staff), Hope Harriet (GWI Empowered Aid East Africa consultant) and Alina Potts (GWI Empowered Aid lead). In-country support was provided by William Omole, Humanitarian Cash & Markets Adviser - Disaster Management while implementation support in Kakuma was led by the Kakuma General Food Distribution (GFD) team composed of Joyce Akolong, Geudencia Suleh, Medrine Muya, Maureen Chegem, and Lilian Egis, who facilitated the women's and girls' contextualization workshops. Salome Manyaro, Benjamin Elim, Peter Muya, Daniel Ereng, Robert Kinyang, and Macdonald Palal facilitated the Participatory Group Discussions (PGDs) with men and boys. In Dadaab, the implementation and facilitation team included Mohamed Sugow, Emmanuel Mkoba, Khatra Mohammed, and Hassan Abdulahi. Technical oversight, support, training and capacity sharing, and editing were provided by Alina Potts, Jessie Weber, and Mathilde Belli of the Global Women's Institute. Administrative and financial oversight were provided by Nigusu Zelelke and Joseph Njuki of World Vision US and Heather Holmes and Justin Brown of GWI.

This report represents the collective expertise of the women and girls living in Kakuma and Dadaab camp who participated in the contextualization of the findings of Empowered Aid in Kenya; for reasons of confidentiality, they are not named but we are proud to share their expertise in this report, as well as insights from refugee men and boys, and from aid recipients consulted during distribution monitoring. Special thanks also go to humanitarian stakeholders who participated in validation meetings in both locations.

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EXECUTIVE SUMMARY

The Empowered Aid initiative is led by the Global Women's Institute (GWI) in collaboration with humanitarian organizations like World Vision. It seeks to reduce the risk of sexual abuse and exploitation (SEA) in aid delivery, based on evidence arising from research and implementation in East Africa, the Middle East, and South Asia. Empowered Aid takes a contextual safeguarding approach, recognizing that those most affected by SEA know best the situations, settings, and people that put them at risk of SEA, and the ways in which aid actors can intervene early to reduce these risks. By utilizing participatory assessment and M&E tools and processes, the approach ensures the voices of crisis-affected women and girls are included in shaping aid responses. GWI and World Vision partnered to further embed safeguarding in World Vision's programming and partnerships by applying Empowered Aid findings and tools in ongoing humanitarian responses.

This report shares a summary of findings from applying the Empowered Aid approach in two of the world's oldest and largest refugee camps—Dadaab and Kakuma—in Kenya. Empowered Aid uses participatory methods in order to engage women and girls and ensure their active participation in identifying SEA risks related to distributions, as well as risk mitigation measures that can improve safety while accessing aid. First, a series of participatory "contextualization workshops" were conducted with 60 refugee women and girls (15 women and 15 girls from each camp) reflecting on research findings from Uganda and Lebanon, and identifying distribution-related SEA risks specific to their context—**recognizing that refugee women and girls are the contextual safeguarding experts**. Participatory group discussions were also held with 60 refugee men and boys (15 men and 15 boys from each camp), using participatory methods such as free listing and open-ended stories.

The main risks identified were in relation to food, health, education, and water, sanitation and hygiene (WASH) sectors; at the point of distribution as well as traveling to and from service points; and perpetrated by aid actors as well as others with control over aid, such as host community members who control access to aid points:

- At the point of distribution/service:
 - Aid workers take advantage of long queues and offer to move women and girls ahead of lines in exchange for sexual acts.
 - Women and girls may be harassed or touched inappropriately by men while waiting in mixed-sex queues.
- Travelling to access aid/services:
 - There are risky areas in both camps that aid recipients must navigate to reach distribution or service points, such as forests and swampy areas.
 - Women and girls reported serious risks including rape and being robbed of their aid by both host community and other refugee members.
- Fulfilling basic needs:
 - Some community members who manage water points take advantage of long queues and women's need to access water quickly (due to other demands on their time) to exploit women into having sexual relationships with them, in exchange for avoiding the queue.
 - When accessing health services, women and girls in both Kakuma and Dadaab mentioned cases of SEA and sexual harassment, mistreatment by nurses and staff, and discrimination.
 - In Kakuma, reports of sexual exploitation by teachers who offer girls passing or higher marks in exchange for sex. Adolescent girls discussed early pregnancy and school dropout

(sometimes due to lack of sanitary wear), which in turn can make them more likely to be targeted by perpetrators of SEA.

"I went to the hospital with back pain and the medic told me to wait outside. Later when he summoned me into his office, he asked whether I have a husband or if I live with him. When I told him, 'I do not stay with my husband,' he said I am not sick [I] am just sex-starved and he can help me overcome that back pain if I accept to have sex with him." —A participant in the women's workshop, Kakuma

"Teachers sometimes impregnate the girl learners so that they can give them pass marks." —A participant in the adolescent boys' group discussion Kakuma

Through participatory voting, refugee women and girls put forward recommendations for aid actors to mitigate these risks in programming, and then prioritized them. The following table summarizes these recommendations, organized by location:

Table 1: Recommendations from refugee women (W) and girls (G) in Kakuma and Dadaab

RECOMMENDATIONS FOR MITIGATING SEA RISKS IN AID	KAK	UMA	DAD	AAB
PROGRAMMING	W	G	W	G
Sex-segregated lines at distribution points	х	х	х	х
Increased number of distribution days when numbers of registered aid recipients are high to prevent overcrowding and women/girls travelling home late from distribution points			X	
Aid delivery or assistance at the household level, with at least two aid workers/contractors present in mixed-sex or all-women teams	х	х		х
Financial aid through cash assistance to reduce known SEA-related vulnerabilities women and girls face	x	х	х	
More training of security personnel to prevent harassment of women and girls at distributions		x	x	x
Transportation support to collect food, WASH, and other times, especially for vulnerable groups		х	х	х
More distribution of food supplies to prevent women and girls being sexually exploited especially when there is there are new entrants in the camps and women share their food supplies with new neighbors.				x
Pre-determined, assigned times for groups of families to collect distributions to avoid overcrowding & disorganization at distribution point	x	x		
More women aid workers or women's committees involved in aid distribution processes		x	х	х
Sessions for community sensitization to GBV / SEA and better knowledge and communication on SEA complaint and reporting mechanisms	x	x	x	x
More community-based and individual support to safely construct houses; particularly to vulnerable groups	х		x	
Resume distribution of firewood to prevent incidents of SEA or GBV when collecting firewood		x		
Formal/informal accompanying systems when women and girls collect/receive aid and information sharing on moving in groups		x		
More security at distribution points (particularly water points, and fuel/firewood)		x		x
Closer supervision of distributers and workers at aid distribution points , including filing and following up on complaints				x

World Vision Kenya used these findings to adapt their distribution monitoring tools to incorporate questions related to the risks identified, as well as general questions on feelings of safety and risk while accessing aid. **This allows for proactive monitoring or known SEA risks as well as unknown risks.** Specifically, the GWI team worked closely with the World Vision program and M&E teams to adapt the household survey and safety audit tools. Training on the *Empowered Aid Toolkit for Planning and Monitoring Safer Aid Distributions*¹ was conducted to support staff further familiarise themselves with the tools and the new questions.

World Vision Kenya staff in Kakuma and Dadaab also chose from the recommendations put forward at the end of the contextualization workshops, to identify recommendations to implement in the next food distribution cycle. The Kakuma team agreed to implement sex-segregated lines while the Dadaab team implemented sex-segregated "corridors" alongside community sensitisation sessions on GBV/SEA and better knowledge and communication on SEA complaint and reporting mechanisms. Sex-segregated corridors are an expanded area, as the GFD point requires aid recipients go through two points of verification before entering a hall corridor where the food parcels are distributed; previously, the team implemented sex-segregated lines at the entrance into the distribution point but these became mixed-sex when entering the verification corridors.

The safety audit and household survey M&E tools were applied to measure the effectiveness of these adaptations by comparing adapted and non-adapted distributions through one distribution cycle. Feelings of general safety (not asking specifically about SEA) improved at each stage of the distribution process between the baseline and adapted distributions (see Figure 3). Safety measures observed during the adapted distributions included sex-segregated lines and WASH facilities, particularly in Kakuma, where 99% of respondents reported seeing sex-segregated lines, and 83% observed sex-segregated WASH facilities. Police presence increased in adapted settings, which was noted by 79% of respondents in Kakuma. These findings speak to efforts to make distributions safer being noticeable to community members, which can build the trust necessary for survivors to report incidents when they occur. Continued improvements needed include more lockable latrines and more female security personnel in Dadaab.

Satisfaction with feedback mechanisms increased in the adapted distributions, reaching 91% in both Dadaab and Kakuma, with slightly higher satisfaction among female respondents. Reasons for dissatisfaction included delays in feedback and concerns around trust and confidentiality. Reports of abuse related to aid distribution decreased in Dadaab by six percentage points, from 9% to 3% of respondents, with 97% of respondents indicating they had not observed verbal, physical, financial or sexual abuse by staff. In Kakuma, however, reports of observed abuse, primarily verbal and physical, increased during adapted distributions from 6% to 12%. These findings reflect the importance of maintaining robust feedback mechanisms and ensuring ongoing improvements to safety measures at distribution points, to proactively monitor and respond to potential risks over time.

In Dadaab, types of perpetrators of abuses included government security actors (2%), other aid recipients at (1.6%), refugee community members (1%), and community volunteers (0.4%). In Kakuma, categories of perpetrators included government security actors (6%), other aid recipients (6%), aid workers (3%), transport drivers (3%), host community members (3%), and community volunteers (2%). This shows the need to target all actors who gain or exercise power through the way aid delivery is

¹ The Global Women's Institute. (2021). Empowered Aid: Toolkit for Planning and Monitoring Safer Aid Distributions. Washington, DC: The George Washington University. Available at: <u>https://empoweredaid.gwu.edu/sites/g/files/zaxdzs4631/files/2023-03/gwi_empowered-aid-me-for-safer-distributions-toolkit_2021_eng-remed.pdf</u> organized, rather than solely targeting aid staff and official affiliates, such as contractors and incentive workers.

In order to continue improving aid recipients' feelings of safety and mitigating SEA, community members must be consulted on an ongoing basis regarding risk mitigation measures. During the administration of the household survey, participants were asked, *Which of these measures do you think would be most helpful to implement for all distributions, to make women and girls feel safer?*, and requested to share their top three from among the list of recommendations arising from the contextualization process (Figure 4), which include increasing the number of women distribution workers/volunteers, police, and community safety group members.

Gender inequality is an underlying driver of sexual exploitation and abuse, alongside other power inequalities inherent in aid settings, and prevention efforts must consider the gendered manifestations of risks in order to take proactive action to address them. *Engaging* women and girls, and *applying* their knowledge and insight on how to mitigate the risks of sexual exploitation and abuse, are critical elements of effective prevention.

World Vision Kenya's implementation of recommendations is an example of how research can be translated into action in order to reduce the risk of SEA while accessing aid. For a brief, practical overview of how these recommendations were implemented, including reflections from aid staff involved, read the <u>Dadaab</u> and <u>Kakuma</u> case studies in **Empowered Aid's Case Study Library**: <u>empoweredaid.gwu.edu/case-study-library</u>.

BACKGROUND

The Empowered Aid initiative is led by the Global Women's Institute (GWI) in collaboration with humanitarian organizations like World Vision. It seeks to reduce the risk of sexual abuse and exploitation (SEA) in aid delivery, based on evidence arising from research and implementation in East Africa, the Middle East, and South Asia. Empowered Aid takes a contextual safeguarding approach, recognizing that those most affected by SEA know best the situations, settings, and people that put them at risk of SEA, and the ways in which aid actors can intervene early to reduce these risks. By utilizing participatory assessment and monitoring tools and processes, the approach ensures the voices of crisis-affected women and girls are included in shaping responses. The aim of GWI's partnership with World Vision is to further embed safeguarding in World Vision's programming and partnerships by applying Empowered Aid findings and tools in ongoing humanitarian responses.

As part of the global engagement with World Vision International, Empowered Aid began operating in Kenya in September 2022 to scale up the findings from participatory research and interventions in Uganda, Lebanon, and Bangladesh, to World Vision Kenya's General Food Distribution (GFD) programming. This phase built on learning in other contexts to support aid actors to implement scalable, evidence-based models for safer aid distributions and service delivery.

The Empowered Aid project in Kenya was implemented in Dadaab (Ifo and Dagahaley) and Kakuma Refugee camps (Camps 3 and 4). Dadaab is in north-eastern Kenya bordering Somalia and hosts a population of 237,490 refugees (120,021 females and 117,469 males). Over 80% of the camp population is Somali, with minority populations consisting of Ethiopians, Sudanese and Congolese refugees. Kakuma refugee camp, located in Northern Kenya bordering South Sudan, has a population

of 121,995 people (64,691 female and 57,304 males). Over 50% of the population is South Sudanese, with minority populations consisting of Congolese, Ethiopian and Somali refugees.²

The first step in applying Empowered Aid's findings consisted of participatory workshops and discussions with refugee women, girls, boys, and men. In January 2023, the Empowered Aid team (consisting of GWI and World Vision Kenya staff) conducted contextualization workshops with refugee women and girls and participatory group discussions (PGDs) with refugee men and boys, in both locations. The workshops engaged refugee women and girls in identifying context-relevant SEA risks and actions to address them, to ensure the findings reflected local realities and priorities. The workshops engaged 60 participants: 30 in each location (15 women and 15 girls at Kakuma and at Dadaab). Women participants were between 24 and 60 years old, and adolescent girls were 14-20 years. Similarly, the participatory group discussions were held with 60 participants: 30 in each location (15 men and 15 boys). Men were 25-60 years old, and adolescent boys engaged were 14-19 years old. In all processes, informed consent was first requested; for participants below 18 years of age this included consent being obtained from their guardians. The age of participants in the adolescent groups reflects the range who identified as adolescents and not adults.

The findings from the workshops and participatory group discussions were reviewed with World Vision's Food and MEAL teams, to identify which of the community-based recommendations could be applied to their upcoming food distribution. Extensive discussions were held with those involved in designing and monitoring distributions to plan for these adaptations. In both locations, the team chose the recommendations related to **sex-segregated lines**. In Dadaab, sex-segregated lines were already being implemented at the point of entry into the food distribution point (FDP), however World Vision implemented sex-segregated corridors throughout the food aid delivery process. They trained their incentive workers on GBV/SEA and also further built out existing materials around community sensitization on gender-based violence (GBV) and SEA, including better knowledge and communication on SEA complaint and reporting mechanisms. In Kakuma, the team made modifications to their distribution's organization in order to implement sex-segregated lines, as they had been operating with mixed-sex line during normal food distributions.

Before and after implementing the recommendations, monitored was conducted to understand aid recipients' feelings of safety and risk thorughout in the distribution process, using tools from the *Empowered Aid Toolkit for Planning and Monitoring Safer Aid Distributions*.³ The **Safety Audit**, ⁴ which is akin to what World Vision also refers to as an onsite observational tool (ODM), ⁵ was administered in two locations in Dadaab. The **Household Survey** was administered in both Kakuma and Dadaab, in two rounds: one before the implementation of the recommendation (sex-segregated lines or corridors) and another after, to identify changes in feelings of safety and risk before after the adaptation.

³ The Global Women's Institute. (2021). Empowered Aid: Toolkit for Planning and Monitoring Safer Aid Distributions. Washington, DC: The George Washington University. Available at:

https://empoweredaid.gwu.edu/sites/g/files/zaxdzs4631/files/2023-03/gwi empowered-aid-me-for-saferdistributions-toolkit 2021 eng-remed.pdf

⁴ The Safety Audit Tip Sheet is available at

² These figures were obtained from the WFP Manifest and may increase with time.

https://gwu.app.box.com/s/5rpo5joqocriygxiuj7zytrlhqiorgdk/file/1571234306383. The full set of *Empowered Aid Monitoring & Evaluation Tip Sheets* for the Safety Audit, Household Survey, Focus Group Discussion, and Point of Distribution Questionnaire are available at <u>empoweredaid.gwu.edu/making-distributions-safer</u> or directly at <u>https://gwu.box.com/s/5rpo5joqocriygxiuj7zytrlhqiorgdk</u> in English, Arabic, French, and Spanish. ⁵ In this report, the terms "onsite distribution monitoring (ODM)" and "safety audit" are used synonymously.

This report provides valuable insight on SEA risks in Dadaab and Kakuma refugee camps, based on the contextual knowledge from women and girls and their communities, as well as recommendations on how to make aid delivery safer.

METHODOLOGY

Contextualization Workshops and Participatory Group Discussions (PGDs)

The contextualization workshops with women and girls, and participatory group discussions with men and boys, were conducted between January and February 2023 in Dadaab and Kakuma, co-facilitated by the Empowered Aid project officer and World Vision Kenya staff, supported by note takers.

The workshops used participatory methods to discuss topics such as power, informed consent, gender and sex, gender-based violence, and sexual abuse and exploitation, to equip women and girls to take part in discussions on SEA risks and context-specific recommendations to mitigate them.

Facilitators received a two-day intensive training on core concepts of GBV and SEA, data collection tools, and note-taking, with time for role-playing training scenarios and answering questions. The full methodology, including the informed consent process, are available in the *Contextualization Workshops Facilitation Guide* forthcoming on the Empowered Aid website (<u>empoweredaid.gwu.edu</u>).

In Kakuma, the workshops were organized in "Kakuma 3" and "Kakuma 4." In Dadaab, they were organized in

Ethical Considerations

Written informed consent was obtained from each adult participant at the beginning of the workshop/PGD and from adolescent participants' caregivers one week before their sessions. Participants were told the content and purpose of the workshop, and what would be done with the information. They were reassured that their participation was voluntary and that they were entitled to skip any exercise or question, or leave the workshop/PGD at any time, without prejudice.

Prior to the training, up-to-date information was gathered on referral pathways for SEA & GBV, to ensure accurate information on available services could be shared with participants should they wish to seek support, and for the facilitation staff to be ready to make a referral should an individual approach them directly.

both Ifo and Dagahaley Food Distribution Points (FDP) during non-distribution days. Camp inhabitants were informed about the upcoming workshops and participatory group discussions by male and female block leaders, with whom they could sign up to attend. See Table 2 for the breakdown of workshops and participants.

	# of participants	Age	Date(s)	Location	
Workshop with women & adolescent girls					
Women	15	24-40 years	23 rd & 24 th Jan 2023	Kakuma	
women	15	30- 60 years	30 th & 31 st Jan 2023	Dadaab	
Adolescent Girls	15	14-18 years	20 th & 21 st Jan 2023	Kakuma	
Addiescent Gins	15	15-20 years	1 st & 2 nd Feb 2023	Dadaab	
Participatory group discussions with men & adolescent boys					
Men	15	25-50 years	20 th & 21 st Jan 2023	Kakuma	
wien	15	25-60 years	1 st Feb 2023	Dadaab	
Adolescent boys	15	14- 18 years	20 th & 21 st Jan 2023	Kakuma	
Addiescent boys	15	14-19 years	31 st Jan 2023	Dadaab	

Table 2: Workshop and PGD participants, by sex, age, and location.

Safety Audit

GWI worked with World Vision Kenya to adapt their onsite distribution monitoring (ODM) tool based on Empowered Aid's **Safety Audit tool**, included in the <u>Empowered Aid Toolkit for Planning and</u> <u>Monitoring Safer Aid Distributions</u>. Adaptations included incorporating information on safety and risks of SEA related to food distributions. The Monitoring and Evaluation (M&E) team and contracted enumerators involved in food distribution monitoring were trained on GBV and SEA core concepts (gender and sex, power and consent) and how to use the tool, including ethical considerations and observational skills. They practiced how to use the safety audit by role-playing different scenarios.

The safety audit was administered during the monthly food distributions of April, which took place between 3rd and 13th April 2023 in Dagahaley and IFO camps of Dadaab refugee camp. Due to unforeseen challenges, World Vision did not administer the safety audit in Kakuma.

Household Survey

A similar collaborative process led to the modification of World Vision Kenya's Food Post-Distribution Monitoring (PDM) Household Survey tool, by incorporating questions from the Empowered Aid <u>Household Survey</u>. Adaptations included incorporating questions and/or answer responses reflecting the SEA risks identified throughout the distribution process. **This allows for systematic, proactive monitoring of SEA risks in routine M&E processes.**

Figure 1: What we mean by monitoring SEA risks "throughout the distribution process" (Source: *Empowered Aid Toolkit for Monitoring Safer Aid Distributions*)



As above, members of the World Vision Kenya M&E team and contracted enumerators were trained on GBV and SEA core concepts and using the tool, including ethical considerations in data collection, the survey instrument, interviewing and data collection skills, and referral processes. Time was dedicated to role-playing scenarios so the teams could practice administering the surveys, identify potential points of confusion, and make any necessary revisions to the data collection tools.

In both locations, the household survey was administered following the "non-adapted" distribution (where World Vision Kenya followed its usual food distribution modalities and standards) and the "adapted distribution" (within which World Vision implemented recommendations that came out of the contextualisation workshops, i.e. sex-segregated lines). In each case, the survey was administered two weeks following the distribution. The table below provides a summary of the data collection

activities that took place in Kakuma and Dadaab, which formed a basis for the findings summarized in this report.

Tool	Sample size (# Female, # Male)	Month of data collection	Location	
Non-Adapted (Baseline) Data Collection				
Safety audit	1	April 2023	Ifo and Dagahaley (Dadaab)	
Household survey	437 (256F, 181M)	March 2023	Ifo and Dagahaley (Dadaab)	
Household survey	384 (253 F, 131M)	May 2023	Camp 3 and Camp 4 (Kakuma)	
Adapted distribution data collection				
Household survey	483 (206 F, 277M)	June 2023	Ifo and Dagahaley (Dadaab)	
Household survey	223 (153F, 70M)	September 2023	Camp 3 (Kakuma)	

Table 3: Administration of Adapted Distribution M&E Tools

FINDINGS

RISKS OF SEXUAL EXPLOITATION AND ABUSE

At the Point of Distribution/Point of Service

Across both camps (Kakuma and Dadaab) all 60 female participants (30 women and 30 girls) engaged in the contextualization workshops reported that some aid workers took advantage of the long queues to offer priority access to some women and girls in exchange for sexual favors. They mentioned that it was usually at the point of entry, where some women did not queue because they had befriended aid workers. This was further validated during the PGDs with boys, who mentioned similar situations happening in their camps.

"Some front aid workers ask for sexual favors so that those who give in may never be subjected to long queues but taken to the front without waste of time."

-A participant in the adolescent boys' group discussion, Kakuma

"Among the most common experiences of violence for women and girls are sexual advances from aid workers for them to avoid queueing for aid assistance."

-A participant in the adolescent boys' group discussion, Dadaab

The women and girls in Kakuma mentioned that men queuing alongside them at distributions sometimes touched them or rubbed themselves against them. This led women and girls to avoid queuing when there were men at the distribution point, in order to preserve their own safety and dignity. This experience caused delays for them at distribution points, even if they had arrived early for the distribution. Women and girls in Dadaab said that sex-segregated lines already existed at distribution points. However, once those in line entered the distribution's shaded tents, everyone became mixed together, and harassment happened in that area of the distribution point.

Healthcare: When accessing health services, women and girls in both Kakuma and Dadaab mentioned cases of SEA and sexual harassment, mistreatment by nurses and staff, and discrimination. Refugee men in the Kakuma PGD confirmed mistreatment and harassment by some health personnel. They went further to give examples of young pregnant girls being reported to police by health care providers for perceived misbehavior or failed morals for having become pregnant, instead of providing them medical support. Health care providers also reportedly referred women and girls to private clinics where medicine was sold at higher prices, thereby increasing their vulnerability to SEA, as

women and girls could not afford to buy the medicine. Women and girls mentioned preferential treatment by service providers based on specific tribes. Those that did not belong to the tribe of certain service providers were harassed and not treated with dignity

"I went to the hospital with back pain and the medic told me to wait outside. Later when he summoned me into his office, he asked whether I have a husband or if I live with him. When I told him, 'I do not stay with my husband,' he said I am not sick [I] am just sex-starved and he can help me overcome that back pain if I accept to have sex with him."

-A participant in the women's workshop, Kakuma

Education: During the PGD with men in Kakuma, they mentioned school-going girls were at risk of being sexually exploited by their teachers, who offered them passing or higher marks in exchange for sex. Girls also continue to drop out of school due to lack of sanitary wear. Adolescent girls discussed facing early pregnancy and school dropout, as seen in the quote below, which in turn can make them more likely to be targeted by perpetrators of SEA.

"Teachers sometimes impregnate the girl learners so that they can give them pass marks."

--A participant in the adolescent boys' group discussion Kakuma

Travelling to access aid/services

During the contextualization workshops and PGDs, all the participants mentioned that they travel by foot to access any assistance or service inside the camp. After picking up their food rations, participants often need to seek other means of transport while journeying back to their homes, due to the weight and bulk of food items. This means of travel was aligned with findings from the household survey. For example, in Dadaab, the majority of women (25%) and men (19%) reported traveling on foot to the distribution while 12% of women and 8% of men travelled by car taxi, with the remaining traveling by bicycle or motorcycle taxi.

Findings from the community mapping exercises in all camps show that Ifo, Dagahaley, Kakuma 3 and Kakuma 4 camps have a "bush" area—large, uncultivated areas of land that are sparsely populated—that women and girls pass through to get to the distribution points. These areas present isolated environments in which the threat of being raped, robbed, or otherwise violated sexually or physically is heightened. Both women and girls shared hearing stories of girls being raped when travelling through either the bush in Dadaab, or when crossing the seasonal river in Kakuma.

Existing research reinforces community members' observations that the further the distance an individual must travel alone to access aid, the greater their vulnerability of SEA along the route.⁶ Findings from the Dadaab household survey indicated that 7% of females and 5% males travelled between 40-52 minutes to the FDP. In Kakuma, 1.8% females and 0.4% males traveled for at least 60 minutes. The participatory discussions highlighted how women and girls face a high risk of SEA, theft, or rape when traveling to and from distribution points.

"Drug addicts chase single ladies in isolated places and steal their food."

--A participant in the adolescent boys' group discussion, Kakuma

⁶ UNHCR, "Her Turn: It's Time to Make Refugee Girls' Education a Priority." Available at: <u>www.unhcr.org/herturn</u>.

Figure 2: Community mapping exercise in Dadaab: Map of Dagahaley camp drawn by refugee women during the contextualization workshop to identify points of safety and areas with SEA risks



Fulfilling Basic Needs

Often, those living in displacement face restrictions on access to meeting basic needs for themselves and their families. This includes food, water, fuel and firewood, soap, and other basic items necessary to preserve life and wellbeing. Pre-existing gender inequalities underlie the SEA risks and experiences discussed in this report, and contribute to further restrictions on women and girls' access and control of resources. This can create situations in which they feel forced to engage in sexual acts not from a place of freely given consent, but from a sense of necessity and survival.

In the workshop with women in Kakuma, participants confirmed SEA taking place in exchange for access to basic resources like the water points in the camp; such as being able to get water directly rather than waiting in hours-long lines, or so the men in charge of the water points would keep them open for longer periods throughout the day and evening.

In terms of fuel and firewood, previously firewood was provided within refugee aid distributions. All 15 women who were in the workshop in Dadaab said that prior to ending, the firewood distributions in Dadaab were considered to openly discriminate against older women, with the **male distributors favoring younger women who they also at times engaged in coercive relationships before granting access to firewood**.

"An old woman like me cannot be given firewood, only the beautiful girls qualify for assistance of fuel and firewood."

-A participant in the women's workshop, Dadaab

Workshop participants shared that registration or distribution points were seen as risky areas where aid workers could easily exploit younger women and girls sexually in exchange for access to fuel and firewood. For this reason, they reported opting to collect firewood from the forest instead, which as

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previously explained comes with its own safety risks, including physical and sexual violence. In the PGD with men in Dadaab, participants mentioned that women and girls were at times raped as they fetched firewood, and/or mistreated and beaten by host community members.

"Host communities and the police harass refugees for deforestation...The fetching places are very far and sometimes you can be attacked by bandits."

-A participant in the adolescent boys' group discussion, Dadaab

Currently no aid actor distributes firewood, despite women and girls expecting to receive such aid. Women recommended that aid recipients are informed ahead of time when a distribution of certain types of aid will be stopped, as part of being accountable to affected persons and communicating with communities.

Fear of reporting

Women and girls reported a lack of trust in some of the organizations and institutions that provide services in cases of SEA. Survivors' fear of repercussions such as retaliation and stigmatization were exacerbated when coupled with not being believed by their service providers, and/or being accused of wanting attention or to increase their chances of successfully applying for refugee resettlement in the Global North by "boosting" their case.

"There are many cases of SEA which go unreported because we fear the perpetrator may hunt us down to harm us with our families, and when we report through the police, we are usually accused of seeking for a ticket to go abroad."

-A participant in the adolescent girls' workshop, Kakuma

During the PGDs, men and boys were asked to share which groups are most vulnerable to violence within their communities. From Dadaab, those that were identified as being most vulnerable included orphaned girls, single mothers or those who headed households, elderly women, and women with disabilities. In Kakuma, the same groups were identified as being the most vulnerable to violence, with the addition of lactating mothers.

"Adolescent girls face same danger [this was in response to a prompt following an open-ended story] when it comes to sex and harassment in the food distribution. But there is likelihood that they will not share as they feel shy, fear to be stigmatized and can drop out of school at learning due to stress..."

-A participant in the adolescent boys' group discussion, Dadaab

RECOMMENDATIONS FROM THE CONTEXTUALIZATION WORKSHOPS

During the contextualization workshops, women and girls put forward recommendations for aid actors to better mitigate the risks of SEA they had identified, and engaged in a participatory ranking exercise to prioritize these. The table below is a list of recommendations from women and girls from Kakuma and Dadaab, written in order of priority.

Table 4: Recommendations from women and girls in Kakuma and Dadaab

RECOMMENDATIONS FROM WOMEN AND GIRLS IN KAKUMA AND DADAAB	KAKUMA	DADAAB
Sex-segregated lines at distribution points	х	х
Increased number of distribution days when numbers of registered aid recipients are high to prevent overcrowding and women/girls travelling home late from distribution points		x
Aid delivery or assistance at the household level, with at least two aid workers/contractors present in mixed-sex or all-women teams	х	x
Financial aid through cash assistance to reduce known SEA-related vulnerabilities women and girls face	x	x
More training of security personnel to prevent harassment of women and girls at distributions	x	x
Transportation support to collect food, WASH, and other times, especially for vulnerable groups	x	x
More distribution of food supplies to prevent women and girls being sexually exploited especially when there is there are new entrants in the camps and women share their food supplies with new neighbors.		x
Pre-determined, assigned times for groups of families to collect distributions to avoid overcrowding & disorganization at distribution point	х	
More women aid workers or women's committees involved in aid distribution processes	x	x
Sessions for community sensitization to GBV / SEA and better knowledge and communication on SEA complaint and reporting mechanisms	x	х
More community-based and individual support to safely construct houses; particularly to vulnerable groups	x	x
Resume distribution of firewood to prevent incidents of SEA or GBV when collecting firewood	х	
Formal/informal accompanying systems when women and girls collect/receive aid and information sharing on moving in groups	х	
More security at distribution points (particularly water points, and fuel/firewood)	x	x
Closer supervision of distributers/ workers at aid distribution points , including filing and following up on complaints		x

PILOTING RECOMMENDATIONS AND MONITORING OUTCOMES

In order to translate findings into action, World Vision Kenya selected from among this "menu" of recommendations arising from the contextualization workshops, and committed to implementing at least one in their programming. The effectiveness of each recommendation was measured through applying the adapted M&E tools (safety audit and household survey), as described above, to both "non-adapted" distributions (where the standard distribution modality already in place) and the "adapted distributions" (where 1-2 recommendations arising from Empowered Aid contextualization workshops were implemented).

In Dadaab, World Vision implemented two of the recommendations in their General Food Distribution (GFD) program: increased community sensitization on GBV and SEA, and sex-segregated corridors.

Sex-segregated "corridors" are an expanded area, as the GFD point requires aid recipients go through two points of verification before entering a hall corridor where the food parcels are distributed; previously, the team implemented sex-segregated lines at the entrance into the distribution point but these became mixed-sex when entering the verification corridors. In Kakuma, they opted to implement sex-segregated lines only. The following results are from routine program monitoring conducted with the adapted tools.

Complaints handling and reporting mechanisms

The safety audit indicated that all distribution points in Dadaab had clear methods of handling complaints. A complaints help desk staffed by two females and two males was present per location. During the household survey in the adapted distribution, 99% (57%F, 42%M) of the respondents in Dadaab mentioned they were aware of where to go in case they had a complaint. This was the same as the percentage at baseline: 99% (58% F, 41%M). In Kakuma, the number of those reporting knowledge of where to go increased from 91% (61%F, 30%M) at baseline to 94% (64%F,30%M) at the adapted distribution. There was an increase in the levels of satisfaction with the feedback and complaints mechanisms in the adapted distribution, increasing from 88% to 91% in Kakuma and 85% to 91% in Dadaab. The levels of satisfaction in Kakuma where higher for the females at 61% compared to males at 30%. Similarly, in Dadaab, more women (53%) were satisfied with the feedback and complaints mechanisms compared to men (39%) after the adapted distributions, as seen in the graph below.

Of those that mentioned a lack of satisfaction, some of the reasons they provided were: delayed feedback, lack of trust in certain actors (including in the food committee, Complaints Help Desk, zonal leaders, and/or World Vision staff), lack of trust in the confidentiality of the process, and fear of retaliation.

Feelings of safety and fear throughout the distribution process

Assessing how aid distribution mechanisms and modalities can increase the risk of SEA is essential to distribution monitoring. It's also important to understand that the risk of SEA does not only exist at the distribution *point*, but throughout the distribution *process*. Thus, participants in the household survey were asked to share how safe they felt at various points throughout the distribution process.

Feelings of general safety (not asking specifically about SEA) improved at each stage of the distribution process between the baseline and adapted distributions, as seen in the graph below. Feelings of general safety improved in the adapted distribution site for both women and men. Women generally reported a greater sense of general safety in relation to men. This shows the importance of collecting sex-disaggregated data and using the findings to inform areas for future post-distribution monitoring. For example, including questions about safety in sex-disaggregated focus groups as part of a future PDM would allow World Vision to explore the reasons men are reporting feeling safe to a lesser extent than women. In previous monitoring, this has included reasons such as security checks and physical threats that target men.



Figure 3: Feelings of safety throughout the distribution process in Dadaab

Safety measures observed during distributions

Central to Empowered Aid's approach is the implementation of the recommendations that women and girls developed during the contextualization workshops. The household survey included questions about what safety measures respondents had observed being implemented at the last food distribution they attended. Educating girls on incident reporting was observed by 17% (9%F, 8%M) of the survey participants in Dadaab and this was an improvement from 4% (2%F,2%M) observed at baseline. As mentioned, Dadaab has been implementing sex-segregated lines, therefore even with the adapted distribution, there was little change in observation. In Dadaab, findings from the safety audit indicate that there were sex-segregated WASH facilities at the distribution points, which was observed by 47% (29%F, 18%M) of respondents during the adapted distribution, slightly less than at baseline (35%F, 24%M). The Safety Audit went on to flag that the latrines in both Dagahaley and Ifo were not lockable, which is a safety risk to the women and girls as they access aid at the FDP as they could easily be violated while trying to use the toilet facilities. No female police officers were observed during the safety audit administration in Dadaab, only 6 male police officers.

In Kakuma, there was a notable difference in observations of safety measures put in place between the regular and adapted distributions. Almost all (99%) respondents observed sex-segregated lines at the adapted distribution compared to 68% during baseline. At baseline, 28% of all respondents (106 of 384) observed sex-segregated WASH facilities, of which 16% (60) were female and 12% (46) were male; compared to 83% of respondents (186 of 223) at the adapted distribution, of which 27% (60) were female and 56% (126) were male. An increase in the number of police officers was observed by 79% of respondents (176 of 223) at the adapted distribution, of which 46% were female (103) and 33% male (73), compared to 67% (257 of 384) at baseline, of which 36% were female (137) and 31%

male (120). These findings speak to efforts to make distributions safer being noticeable to community members, which can build the trust necessary for survivors to report incidents when they occur.

In order to continue improving aid recipients' feelings of safety and mitigating SEA, it's crucial that community members are consulted on a continuous basis regarding risk mitigation measures. During the administration of the household survey, participants were asked, "Which of these measures do you think would be most helpful to implement for all distributions, to make women and girls feel safer?" And requested to share their top three from among the list of recommendations arising from the contextualization process. These are shared in Figure 4.



Figure 4: Top 3 most helpful recommendations to implement in each camp

World Vision will take this feedback on risk mitigation measures into consideration in future distributions, and urges other aid actors to do the same.

Other forms of violence or abuse

Across both camps, survey participants were asked to share if they had observed any form of abuse (i.e. verbal, sexual or physical assault) related to or because of the last distribution. In Kakuma, during the regular (baseline) distribution, 94% respondents (362 of 384) mentioned they had not observed

any sort of abuse by NGO staff, of which 62% were female (238) and 32% male (124). At the adapted distribution, this decreased to 88% (197 of 223) of respondents, of which 57% (128) were female and 31% (69) were male. The most common forms of abuse observed during the regular distribution were verbal abuse/insults (4%), physical abuse (2%), financial exploitation (0.4%), and sexual abuse (1%, n=3 women). The remaining reports did not offer any information as to what abuse was observed.

In Dadaab, there was an improvement in the way staff interacted with aid recipients. Almost all respondents (97%: 55% F, 42% M) reported they had not observed any form of abuse by NGO staff. This was an improvement from the 91% (53% F, 38% M)

Asking about direct experiences of violence is generally discouraged unless the data collection team is specially trained, there is a system in place to offer referrals, and the data is necessary to inform program responses. As part of seeking to better understand how violence affects safety and risk for aid recipients, one question was included on observations of violence and perpetrator categories (without disclosing identifying details). As noted above, the M&E team and enumerators were provided with specialized training and a robust referral protocol was put in place to provide follow-on care and support, should recipients request information or disclose harm. As a reminder, all M&E respondents were adults. at baseline. Of the 2% (1.4% F, 0.6%M) that observed a form of abuse, 1% mentioned verbal abuse while the remaining 1% physical assault from the crowd management staff and the security guards.

In Dadaab, categories of perpetrators included: Government security actors (2%), other aid recipients at (1.6%), refugee community members (1%), and community volunteers (0.4%). In Kakuma, categories of perpetrators included government security actors (6%), other aid recipients (6%), aid workers (3%), transport drivers (3%), host community members (3%), and community volunteers (2%). This shows the need to target all actors who gain or exercise power through the way aid delivery is organized, rather than solely targeting aid staff and official affiliates, such as contractors and incentive workers.

CONCLUSION AND RECOMMENDATIONS

To address underlying drivers of sexual exploitation and abuse, and other forms of gender-based violence, aid delivery models must understand gendered risks and take action to address them. Crisisaffected women and girls living in humanitarian settings are contextual experts on the SEA risks that they and their peers face when accessing life-saving aid including food, shelter, water, healthcare, and education. As such, they are the best placed to provide ideas on risk mitigation measures that can be put in place in order to minimise the likelihood of SEA being perpetrated against them, and that support the self-protective actions they and, at times, their communities are already employing.

Aid organisations must include questions on known SEA risks within their routine monitoring, to understand how their programming might put women and girls at risk and proactively respond to the risks that are present. The Empowered Aid Toolkit for Planning and Monitoring Safer Aid Distributions⁷ includes tools and processes for incorporating participatory approaches into monitoring, and the Empowered Aid Contextualization Toolkit offers a guide for sharing the findings with women and girls to co-develop action point for reducing these risks, and follow up with them on how those actions are going. This allows for sustained accountability to affected populations, which over time can build the trust necessary for survivors to reach out for support.

Doing this in a multi-sector, multi-agency humanitarian response calls for collaboration and coordination within and between different stakeholders involved in the aid process, for example through the PSEA Working Group liaising with the Food Sector Working Group. World Vision Kenya demonstrated this by holding inter-agency dissemination meetings in Kakuma and Dadaab which ended with specific action points. For example, the World Food Programme's Dadaab team committed to follow up with mobilising for breastfeeding corners for lactating mothers, while Film Aid in collaboration with the GBV working group committed to develop PSEA messaging to increase community sensitization on SEA in Kakuma. These key messages should be shared in multiple formats (i.e. during community meetings, distributions, radio talks and public address sessions) and languages to increase accessibility for diverse community members.

The reasons survivors fear to report SEA incidents are well-founded, and this silence makes it difficult to provide services to survivors and hold perpetrators accountable. This underscores the importance of understanding what contextually-appropriate reporting mechanisms exist and consulting women

⁷ The Global Women's Institute. (2021). Empowered Aid: Toolkit for Planning and Monitoring Safer Aid Distributions. Washington, DC: The George Washington University. Available at: <u>https://empoweredaid.gwu.edu/sites/g/files/zaxdzs4631/files/2023-03/gwi_empowered-aid-me-for-safer-distributions-toolkit_2021_eng-remed.pdf</u>

and girls on whether they are working, and what they consider safe ways of reporting SEA incidents and risks. Training frontline aid staff, contractors, and volunteers on how to provide basic psychosocial first aid if a survivor spontaneously approaches them can be useful in addressing survivors' concerns about not being believed, or re-traumatization, when they report to aid workers (as they may not distinguish between a "protection" worker and other worker, as everyone looks the same in their logo t-shirts). Important components of creating a more supportive environment in which to receive reports include having up-to-date and robust referral mechanisms in place, ensuring GBV response services are well-resourced and coordinated, and including at minimum 50% women staff at helpdesks, hotlines, and security points/patrols.

Participatory approaches ensure that humanitarian assistance puts people at the centre of the design and monitoring of programming. Across the program cycle, it is important to consult diverse groups of women and girls, as well as men and boys. **Programming that is not intersectional leaves the needs of certain categories of women and girls unaddressed, increasing their risk and vulnerability to SEA.** For example, by making aid difficult for access to elderly women, it increases their risk of being violated by aid actors who demand sexual acts in exchange for aid, or deny access to older women and only make aid accessible to younger girls because they can easily use their positions of power and access to resources to perpetrate SEA against them.

All aid actors working in Dadaab and Kakuma are encouraged to use the findings from this report and to continue consulting women and girls and their communities to monitor risks of SEA to make aid safer. In addition to the points above, summary recommendations include:

- Implement recommendations by women and girls from the workshops to increase safety and reduce risks for women and girls at distribution points, like increasing the number of women police officer/guards/crowd management workers at food distributions, as well as increasing the number of women distribution workers and volunteers so that they can attend to women's specific needs. (See Table 1 for full list)
- Provide shade, sex-segregated lines, and breast-feeding corners for lactating mothers, at all distribution points, to reduce the ability for perpetrators to target certain groups of women and girls who may be especially affected by waiting in long and/or mixed-sex lines, and exploited using promises of receiving faster access to aid. Install lockable toilets at the distribution points in order to increase the safety of women and girls while using WASH facilities, as the safety audit revealed that these were missing in the Dagahaley and Ifo food distribution sites.
- Strengthen feedback and complaints mechanisms for example through provision of timely feedback and commitment to confidentiality, to foster trust in the mechanisms and encourage community members to use them. As there were levels of dissatisfaction with the reporting and complaints mechanisms as demonstrated in the report.
- Provide sensitization and training on GBV/SEA to all actors involved in the aid delivery process and who derive power from their role, including government security actors, community volunteers, and transport drivers (e.g. boda drivers and taxi drivers).