



# Project Background

Gender-Based Violence constitutes a serious human rights violation and a life-threatening health and protection issue. Endemic even in peace-time, armed conflicts can result in higher levels of gender-based violence against affected populations. In Tigray, reports of GBV, particularly that of conflict-related sexual violence, domestic and intimate partner violence, female genital mutilation, child and forced marriage have been on the rise amongst both Internally Displaced Persons (IDPs) and host communities while protection and response mechanisms for GBV such as the health system, law enforcement and legal system have been eroded. These conditions are also expected to persist in post-conflict situations as recovery and rehabilitation is often a complex process.

The Response-Recovery-Resilience for Conflict Affected Communities in Ethiopia Project is a Government of Ethiopia owned initiative to provide basic services and support for GBV survivors, funded by the World Bank and implemented by the Ministry of Women and Social Affairs. With UNOPS as a partner of choice, and UNFPA facilitating GBV support activities in Tigray.

## GOALS

- Increasing access to lifesaving GBV services through one-stop centers, safe houses, women and girls' friendly spaces, and case management.
- Address drivers and risk factors that contribute to the acceptance and perpetuation of GBV that may be exacerbated by conflict, climate events, or other related shocks.
- Support the coordination, policy development, and research for GBV prevention and response.



# 16

Woredas covered

- Abi Adi
- Mekelle
- Abergele
- Yechila
- Adigrat
- Tanqua
- Adwa
- Melash
- Asgede
- Shire
- Axum
- Sheraro
- Hintalo
- Nekseja
- Hawzen
- Ofla
- Maichew
- Bora

UNFPA conducted a series of assessments to inform the program and implementation of this project, including a formative assessment on GBV, an assessment on the capacity of implementing providers, mapping of GBV service in target woredas, and an assessment to measure the capacity of health facilities to respond to GBV-related health protocols. The gaps and results identified have been used to inform the implementation of this program in the provision of comprehensive and integrated care for GBV survivors.



## RESPONSE

**304 frontline workers** recruited, trained, and deployed for GBV and SRH service provision, and over **272 metric tons** of medical supplies distributed to health facilities and partners.



## PREVENTION

Within one year of implementation, the project has been able to reach **218,291** women and men through awareness raising sessions on Gender-Based Violence and Sexual and Reproductive Health. Additionally, the project is supporting the roll out of the **SASA! Together approach** for community mobilization against GBV.



UNFPA supports the integrated and coordinated provision of services for survivors, including critical medical services, legal aid, psychosocial support, as well as linkage to other services such as safe houses. Women and girls receive access to more specialized services through our Women & Girls' Friendly Spaces (WGFS), One-Stop Centers, Safe Houses and through our community outreach programs.



## Emergency Supplies

Over **1,651,434 USD** worth of medical equipment and supplies were purchased and distributed within one year, in addition to **dignity kits worth 1,155,438 USD** purchased through this project to support the region's emergency response efforts.



## Safe-House Support

Safe Houses provide a temporary shelter for survivors when it is unsafe for them to continue with their prior living situation. Through this project, UNFPA supports **2 safe houses in Mekelle and Adigrat** in the Tigray Region.



## Women and Girls' Safe Spaces

Through this project, **UNFPA has established 10 Women and Girls Spaces** that provide women and girls focused psychosocial support, counselling, skills-building trainings, and livelihood activities. WGFS also serves as a critical entry point for survivors to receive much-needed medical, psychological, and legal assistance.



## Referral

**Women and girls** receive access to more specialised services through referrals from the WGFS, OSCs, safe houses, and from within their communities by meeting costs related to accessing GBV services through cash assistance provided by the project.



## One-Stop Centers

Through this project, UNFPA has established **11 Women and Girls' Friendly Spaces** to provide GBV case management, psychosocial support and counseling, multi-sectoral referral, skills building and critical information on GBV and SRH. WGFS also serves as a critical entry point for information-sharing on available services and support, as well as a platform for transformational change and empowerment of women and girls.





# Capacity Building

UNFPA prioritised the capacity building of various service providers, including government actors and non-GBV service providers, in line with the protocols and standards of survivor-centred care and GBV standard care. As a result of the capacity-building initiatives:

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Non-GBV humanitarian actors across various sectors, including UN agencies and NGOs, improved their skills on how to effectively mainstream GBV risk mitigation measures and actions in their programming and service delivery.

33

Health extension workers have improved their understanding of minimum GBV prevention and response programming in emergencies through the GBV minimum standards training provided by UNFPA.

32

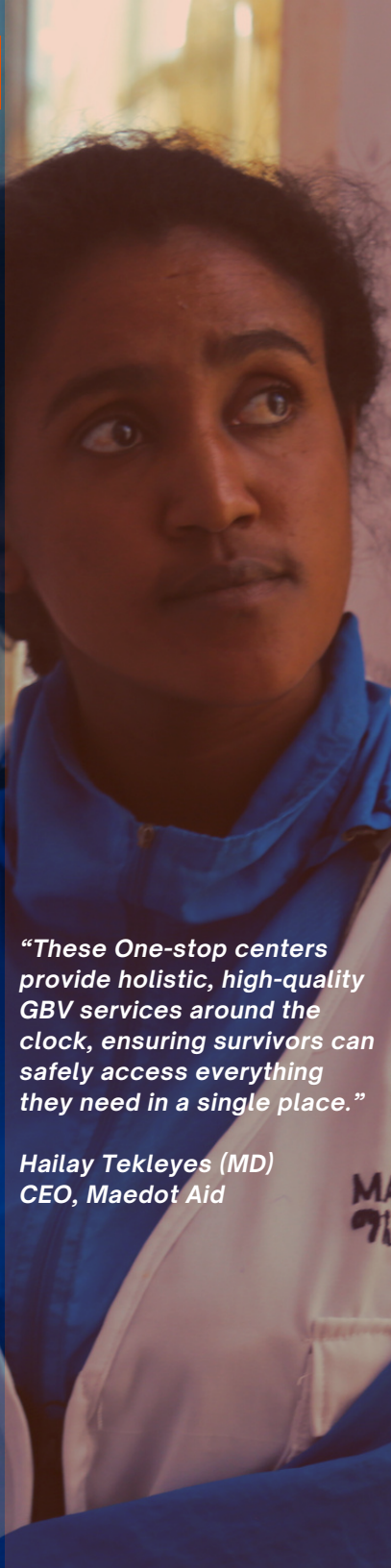
Health care providers have improved their technical capacity to provide clinical services for survivors.

195

Frontline workers were trained on GBV case management to ensure that survivors receive care in a structured and coordinated manner, and also as a primary entry point for survivors to receive longer-term medical care and psychosocial support.

*"I didn't know that there were people who can help or do anything, even that women have rights. I found out when I arrived at the safe house,"*

GBV Survivor



*"These One-stop centers provide holistic, high-quality GBV services around the clock, ensuring survivors can safely access everything they need in a single place."*

Hailay Tekleyes (MD)  
CEO, Maedot Aid

71

Service providers, including community outreach workers have been equipped to implement various community-based psychosocial interventions sensitive to the local context in Tigray.

35

Police personnel and lawyers have enhanced knowledge, skills, and institutional capacity in handling cases of sexual and gender-based violence with a survivor-centred approach and in line with GBV minimum standards.

71

Case workers and community outreach volunteers are familiar with the UN Standards of Conduct on Sexual Exploitation and Abuse and know how to prevent and report Sexual Exploitation and Abuse through PSEA training provided by UNFPA.

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Frontline GBV staff (have been equipped with stress, trauma management and self-care strategies to address the increasing rates of burnout and trauma among GBV staff.

## Our Partners



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## RESPONSE - RECOVERY - RESILIENCE

Response-Recovery-Resilience for Conflict Affected Communities in Ethiopia (3R4CACE)