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NGO strategies for sex and gender-based violence protection and accountability in long-term displacement settings: Reviewing women's participation in humanitarian programmes in Dadaab refugee complex

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Abstract

This article addresses the intersection between non-governmental organisation (NGO) protection strategies for sex and gender-based violence in long-term displacement settings and recent discourse on humanitarian accountability practice. It comprises a desk-based review of two protection programmes operated by the International Rescue Committee (IRC) and Care International in the Dadaab refugee complex, Kenya, that provide new terrain for testing existing theories of humanitarian accountability and critically examining the relationships between NGOs' accountability practices and their impact on the refugee communities they seek to engage.

The article analyses how these two protection programmes conceptualise participation from the refugee community in relation to sector-wide approaches to accountability to affected populations (AAP), and considers how gender mainstreaming informs the specific expectations and experiences of women as active participants in decision-making and the provision of services. It considers how participatory approaches to humanitarian programming are often adopted by NGOs to accommodate a diverging set of interests and objectives, aiming to optimise operational performance as well as promoting a gender-inclusive, rights-based approach to sex and gender-based violence prevention. It asks whether the strategies adopted by the IRC and Care International, respectively, are effective in combatting the discriminatory gender norms that cause refugee women to be more at risk of sex and gender-based violence, finding that participation-based strategies that view women's participation primarily as a tool for enhancing operational performance, risk perpetuating the structural inequalities that exist within the affected community and compounding the marginalisation faced by refugee women.

The article concludes that a more comprehensive system of gender mainstreaming must be adopted by NGOs across the humanitarian sector, to ensure that participatory approaches to protection from sex and gender based violence in long-term displacement settings prioritise gender equality as a substantive objective.

Keywords humanitarian accountability, gender-based violence, displacement

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Contents

1.	Introduction			3	
	1.1	1 Research Questions		4	
	1.2	Meth	ods, sources, and limitations	4	
2.	The genealogy of accountability discourse within the humanitarian sector			6	
	2.1	Huma (AAP)	Humanitarian NGOs in long-term displacement contexts: Accountability to Affected Populations (AAP)		
	2.2	Defining participation as a form of accountability		6	
	2.3	Αссοι	Accountability: differential approaches, objectives, and academic perspectives		
	2.4	Securing participation from women: gender mainstreaming			
	2.5	Participation-based approaches to SGBV programming		9	
	2.6	Acade	emic perspectives on women's participation as a strategy for gender equality	10	
3.	Case study: SGBV Protection Strategies in Dadaab			11	
	3.1	Case Management Model		11	
		3.1.1		12	
		3.1.2		12	
		3.1.3 3.1.4	Participation from refugee community workers: gendered experiences Case Management as a strategy for promoting gender equality: concluding remarks	13 15	
	3.2		ging Men through Accountable Practice (EMAP)	15	
	0.2	3.2.1		15	
			Participation from refugee women	16	
		3.2.2	Participation from refugee men	16	
		3.2.4		17	
			Accountability through feedback	17	
		3.2.6	EMAP as a strategy for promoting gender equality: concluding remarks	17	
4.	Conclusion and recommendations 1			19s	

1. Introduction

Conflict and forced displacement frequently destabilise gender relations in an affected population and disrupt community and institutional protection structures. The provision of external humanitarian aid in these contexts imports new gender norms and expectations, destabilising these relations further and leaving women and girls at a heightened risk of violence and with limited recourse to justice.¹ Departing from this concern, this article seeks to determine how NGO protection strategies for sex and gender-based violence in long-term displacement settings intersect with expanding discourse on humanitarian accountability practice, by producing a detailed case study of the protection programmes operated by the International Rescue Committee (IRC) and Care International in the Dadaab refugee complex, Kenya. There are currently over 2.6 million refugees worldwide living in camps administered by Humanitarian NGOs, international non-governmental organisations (INGOs) and United Nations (UN) agencies.² As these governing bodies face increasing normative obligations to protect and promote the rights of the communities they serve, this research explores issues that can be brought directly to bear on contemporary debates in the humanitarian protection of refugees. It contributes to a growing body of work on the need to ensure NGO accountability to affected populations in long-term displacement settings, as well as recent literature on the implications of adopting gender-mainstreaming as an organising principle in participation-based humanitarian programming.

Sexual violence, gender-based violence and violence against women and girls are terms which are often used interchangeably in the humanitarian sector to describe the systemic violation of human rights based on socially ascribed gender differences. It takes many forms, including acts of physical violence, rape and sexual violence, female genital mutilation (FGM), forced marriage and trafficking, and may be perpetrated by actors at a domestic, community or societal level. For the purposes of this article, sex, and gender-based violence, abbreviated as 'SGBV' is used in place of these various terms, referring specifically to protection initiatives for women and girls. The SGBV programmes analysed in this article were selected because they engage two expanding areas of discourse and practice within the humanitarian sector: a) promoting accountability to affected populations through the adoption of participatory approaches to humanitarian programming, and b) the implementation of gender mainstreaming as a form of accountability towards the views and experiences of vulnerable and marginalised groups facing protracted displacement. These programmes provide new terrain for testing theories of humanitarian accountability and critically examining the relationship between an NGOs' accountability practice and its impact on the refugee community it is designed to protect.

In order to address this research question, the first section in this article traces the genealogy of accountability discourse within the humanitarian sector through an analysis of inter-agency standards and guidelines. It identifies accountability to affected populations (AAP) as a cornerstone in humanitarian approaches to accountability and establishes participation from the community as an organising principle within this framework. A survey is conducted of academic perspectives on humanitarian accountability, providing an initial insight into the heterogeneous landscape of accountability theory and practice and the tension between its conceptualisation both as a value and a mechanism.³

The following section discusses the precedent for including women in participatory approaches to humanitarian programming, charting the rise of gender mainstreaming as a facilitator of this process and outlining the development of relevant policies at UN level. This leads onto an examination of inter-agency standards and guidelines for SGBV interventions that conceive of NGOs as duty-bearers, whose immediate protection responsibilities are coupled with longer-term obligations to promote gender equality in humanitarian settings. Critiques of humanitarian approaches that rely on participation from refugee women are considered to establish a theoretical framework for the case study. Elisabeth Olivius' claim that these models risk instrumentalizing gender as an operational issue that emphasises efficiency, cost-effectiveness and scalability — whilst displacing the political goal of gender equality — is adopted as a point of departure.⁴ The analysis of SGBV interventions in the subsequent case study is guided by this assumption, seeking to determine the extent to which these humanitarian programmes interact with and promote sector-wide principles of AAP, how they conceptualise participation and gender mainstreaming, and whether they are effective strategies for promoting gender equality.

¹ Andrea L Wirtz, Kiemanh Pham, Nancy Glass et al., 'Gender-based violence in conflict and displacement: qualitative findings from displaced women in Colombia' (2014) 8 Conflict and Health 10, 2; Jennifer Hyndman and Malathi de Alwis, 'Reconstituting the Subject: Feminist Politics of Humanitarian Assistance', in *Not Born a Refugee Woman: Contesting Identities, Rethinking Practices*, ed. Maroussia Hajdukowski-Ahmed, Nazilla Khanlou and Helene Moussa (Oxford: Berghahn Books, 2008) 83-85.

^{2 &}quot;Ten facts about refugee camps, home to 2.6 million worldwide", Borgen Project, 2018; available at: <u>https://borgenproject.org/facts-about-refugee-camps/.</u>

³ Mark Bovens, 'Two Concepts of Accountability: Accountability as a Virtue and as a Mechanism' (2010) 33(5) West European Politics 946-967.

⁴ Elisabeth Olivius, 'Displacing Equality? Women's Participation and Humanitarian Aid Effectiveness in Refugee Camps' (2014) 33(3) Refugee Survey Quarterly 93–117.

This research focuses on the Dadaab complex, which is currently home to over 218,000 refugees and asylum-seekers.⁵ This complex, run by the United Nations High Commissioner for Refugees (UNHCR), is divided into three camps, Hagadera, Ifo and Dagahaley, with different implementing partners operating in each camp. The first SGBV programme under analysis in the case study is a comprehensive case management model, which combines psychosocial support for survivors, SGBV outreach, community mobilisation, and task-sharing with refugees known as 'refugee community workers'. Individualised versions of this SGBV response model are implemented by Care International and IRC in their respective remits of Dagahaley and Hagadera. The second programme under analysis is the Engaging Men in Accountable Practice (EMAP) model: one-year intervention that seeks to engage men in transformative individual behaviour change and prioritises women's voices and leadership. The EMAP model has been developed by IRC for use in SGBV prevention programming in global humanitarian settings and has been adopted by UNHCR and implementing partners in Dadaab since 2015.

This article argues that the distinct objectives of these SGBV initiatives result in diverging priorities for engaging the AAP principle of community participation. Primarily response-based programming uses participation, first and foremost, to increase accessibility and enhance operational performance, whilst programming aimed at prevention positions participation as a tool to promote a gender-inclusive, rights-based approach to humanitarianism. It considers the increasing adoption of the 'language of rights' as a normative framework that legitimates the presence of NGOs in humanitarian settings,⁶ to argue that couching humanitarian interventions in human rights discourse does not guarantee the realisation of these rights in practice. Moreover, this article proposes that, until a more comprehensive system of gender mainstreaming is adopted by NGOs throughout the humanitarian sector, some participation-based strategies for SGBV protection risk compounding the marginalisation refugee women face in the wider community, perpetuating structural inequalities and potentially re-exposing them to violence.

1.1 Research Questions

The research questions for this study were:

First, to what extent do the IRC and Care International's strategies for SGBV protection in Dadaab interact with sector-wide principles of AAP?

Second, how do the case management and EMAP programmes conceptualise participation by the refugee community and how does gender mainstreaming inform the specific expectations and experiences of refugee women as participants in service provision?

Third, are these effective strategies for combating local gender norms and socio-economic factors that cause women to be substantially more at risk of SGBV in humanitarian settings, or do they better serve other operations goals?

1.2 Methods, sources, and limitations

This research has comprised an entirely desk-based, qualitative review of primary sources, including inter-agency standards and guidelines, NGO policies and reports and UNHCR documents. It was theoretically informed by a range of secondary sources, including academic books and journals that focus on recent discourse in humanitarian account-ability, critiques of gender mainstreaming in humanitarian settings and research into refugee women's participation in programmatic decision-making. This study has been somewhat constrained by the minimal availability and narrow scope of sources relating to specific SGBV programmes in Dadaab, which NGOs appear to publish inconsistently online. There are no equivalent sources for the programmes under investigation that could provide a comprehensive overview of their respective activities, instead they are restricted largely to a guide for intended practice (EMAP) and an evaluative report (case management programme). This means that the secondary data analysis in this article cannot be deemed conclusive and further research will be required as the implementation of these programmes continues to evolve, and additional data becomes publicly available.

The combination of limited resources and the COVID-19 pandemic has prevented primary data collection for this study. Remote interviews and focus group discussions involving community participants were not appropriate, as negotiating access to community members and ensuring safeguarding of respondents during this process would have been impracticable. In lieu of in-person interviews, NGO reports that have taken a mixed methods approach to data collection (quantitative surveys and semi-structured interviews with national staff, community participants and service users) were used where possible, to ensure that the voices of participants and service users were represented

^{5 &}quot;Dadaab Refugee Complex" (UNHCR, 2020); available at: <u>https://www.unhcr.org/ke/dadaab-refugee-complex</u>.

⁶ Dorothea Hilhorst and Bram Jansen, 'Constructing Rights and Wrongs in Humanitarian Action: Contributions from a Sociology of Praxis' (2012) 46(5) Sociology 894.

in this research. However, their perspectives on the specific hypothesis of this study are absent, which demonstrates the need for further empirical research. A methodological approach integrating primary data would offer a valuable opportunity to develop these findings and substantiate its contribution to the growing body of academic research into humanitarian accountability.

2. The genealogy of accountability discourse within the humanitarian sector

2.1 Humanitarian NGOs in long-term displacement contexts: Accountability to Affected Populations (AAP)

Humanitarian NGOs, INGOs and UN agencies operating in long-term displacement contexts are increasingly acting as quasi-States, with normative obligations to protect and promote the rights of the communities they serve. This is widely understood as a function of the new system of global governance that developed towards the end of the twentieth century, whereby traditionally State-centred models of governing, based on hierarchy and sovereignty, gave way to horizontal, network-based forms of transnational governance, performed through non-State actors including civil society.⁷ Within this same system, individuals in populations affected by humanitarian crises have been redefined as both objects of government and autonomous rights-holders. Their active participation in the conceptualisation and delivery of humanitarian programmes has increasingly been viewed as a route to empowerment, gender equality,⁸ and a way to legitimise NGO practice.⁹

The increase in protection responsibilities conferred on NGOs working within humanitarian contexts, alongside a sector-wide shift from needs-based to rights-based protection,¹⁰ has raised important questions around how NGOs ensure accountability to the communities they serve. These concerns have precipitated a 'participation revolution' in recent decades,¹¹ as NGOs have sought to redirect historic accountability practices away from donors' priorities and internal performance indicators, towards the engagement of affected populations.¹² An abundance of codes, standards, mechanisms and frameworks have emerged at both intra and inter-agency levels, that are designed to regulate accountability norms within the humanitarian sector and ensure that AAP is prioritised. This accountability paradigm, although ubiquitous, is not always consistent in its application. There is, currently, no universally accepted definition of accountability within the humanitarian sector and, because accountability norms are largely non-binding and subject to internal regulation, multiple NGOs operating side by side within a single humanitarian setting will import their own accountability policies and practices.¹³

2.2 Defining participation as a form of accountability

The Humanitarian Accountability Partnership's 2010 Standard in Accountability and Quality Management (HAP Standard) provides a good entry point in the genealogy of accountability discourse within the sector. Its emphasis on accounting for the views of affected populations, and enabling them to hold humanitarian organisations to account, crystallises AAP as a mainstream approach to humanitarian accountability. The HAP standard defines accountability as 'the means through which power is used responsibly. It is a process of taking into account the views of, and being held accountable by different stakeholders, and primarily the people affected by authority or power.'¹⁴ The 2014 Core Humanitarian Standard on Quality and Accountability (CHS), which has since come to replace the HAP Standard, sets out nine commitments for organisations to ensure quality and accountability of humanitarian response. These

For a discussion of global governance, see Ole Sending and Iver Neumann, 'Governance to Governmentality: Analyzing NGOs, States, and Power' (2006) 50 International Studies Quarterly 651–672; James Rosenau, 'Toward an Ontology for Global Governance', in *Approaches to Global Governance Theory*, ed. Martin Hewson and Timothy J. Sinclair (SUNY Press, 1999); David Held. and Andrew McGrew *Governing Globalization: Power*, *Authority and Global Governance* (Polity Press, 2002).

^{8 &}quot;Empowerment and Accountability for Gender Equality in Humanitarian Action and Crisis Response", UN Women, 2017; available at: https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2018/empowerment-and-accountability-for-gender-equality-in-humanitarian-action-and-crisis-response-en.pdf?la=en&vs=3110

⁹ Sending and Neumann (n 6) 661.

¹⁰ Dorothea Hilhorst, Rachel Gordon, Holly Porter, 'Gender, sexuality, and violence in humanitarian crises' (2018) 42(1) Disasters 7-8.

¹¹ Joakim Daun, 'Humanitarian accountability: a conceptual analysis', *RLI Working Paper* no 41 (2020): 7; available at: <u>https://sas-space.sas.</u> ac.uk/9316/.

¹² See Austin Davis, 'Concerning Accountability of Humanitarian Action', in *Humanitarian Practice Network* (2007) 58; available at: https://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/8735.pdf; John Mitchell and Paul Knox-Clarke, 'Humanitarian Accountability' in *Humanitarian Exchange: Special Feature 52* (Overseas Development Institute, 2011); available at: https://odihpn.org/wp-content/up-loads/1999/11/humanitarianexchange052.pdf; Bayard Roberts, 'Accountability in Humanitarian Response' in *Accountability, in Humanitarianism: A Dictionary of Concepts*, ed. Tim Allen, Anna Macdonald, and Henry Radice (Routledge, 2018).

¹³ For example, see the independent policies operated by the Danish Refugee Council (DRC) and Save the Children on complaints and feedback mechanisms (CFMs): DRC (2008), *Complaints Mechanism Handbook*; available at: <u>http://www.coordinationtoolkit.org/?p=930</u>, and Save the Children (2013) 'Handling Feedback and Complaints' in *Programme Accountability Guidance Pack*; available at: <u>https://resourcecentre.savethechildren.net/node/7575/pdf/programme_accountability_guidance.pdf</u>.

¹⁴ Humanitarian Accountability Partnership, *The 2010 HAP Standard in Accountability and Quality Management* (Geneva: HAP International, 2010): 1; available at: <u>https://pseataskforce.org/uploads/tools/the2010hapstandardinaccountabilityandqualitymanagement_hapinternation-</u> al_english.pdf/.

include commitments to 'communication, participation and feedback', through which communities are made aware of their rights, have access to information, can participate in the decisions that affect them and have recourse to complaints mechanisms.¹⁵ The importance of participation has emerged as a through-line in all existing quality and accountability initiatives for humanitarian organisations, which, further to the above, includes the Sphere Standards, the Quality and Accountability COMPASS, Synergie Qualité, as well as the Code of Conduct of the Red Cross and Red Crescent Movement and NGOs in Disaster Relief.¹⁶

The 2016 Grand Bargain agreement represents a further iteration in the recent transformation of humanitarian accountability. It is uniquely pitched at both humanitarian aid providers and large-scale donors, who have pledged to remodel their working practices in a bid to increase the amount of resources directly available to those in need, increase local capacity and preparedness, and ensure quality and continuity in humanitarian responses. The agreement sets out nine goals including a 'Participation Revolution' that aims to engage affected populations, including vulnerable communities, in decision-making that affects their lives.¹⁷ Meanwhile, the Inter-Agency Standing Committee's (IASC) Commitments on Accountability to Affected Populations, revised in 2017 to reflect the Grand Bargain agreement, are organised around three distinct yet intersecting areas of accountable practice: 'taking account' allows communities, including its most at-risk members, equal influence over decision-making; 'giving account' ensures transparent information-sharing with communities; and 'being held to account' gives communities the opportunity to provide feedback and/or sanction humanitarian programming if appropriate. Although not explicitly mentioned, the implication is that feedback will be integrated into future planning.¹⁸

2.3 Accountability: differential approaches, objectives, and academic perspectives

It is important to note that, although AAP has emerged as a cornerstone in new perspectives on accountability across the humanitarian sector, NGO approaches to participation are highly individualised. The absence of a universally accepted, binding definition of accountability,¹⁹ has fostered an environment in which NGOs define and practice accountability and participation according to their specific organisational goals and objectives, their institutional, philosophical and cultural ideologies, and their alignment with particular accountability initiatives.²⁰ For instance, some organisations may incorporate strategies such as information-sharing, participation and complaint and feedback mechanisms as a way to increase the efficiency of their programmes or satisfy instrumental goals, whereas others may inscribe participation as an organisational value.²¹

The difference in approaches to accountability has been reflected in academic literature on the subject more generally. Peter Newell and Joanna Wheeler identify two essential components in relationships of accountability: answerability - the right to expect a response and the obligation to provide one, and enforceability - the guarantee that action will be taken and recourse to formal mechanisms will be provided when accountability fails.²² Joakim Daun applies Mark Bovens' theorisation of public accountability to discourse and praxis in the humanitarian sector, explaining that 'accountability as a virtue' - a normative standard for intended practice - is often privileged over 'accountability as a mechanism', which provides communities with the forums and processes by which to hold authorities to account.²³ This speaks directly to the 'enforceability' aspect of Newell and Wheeler's conceptualisation of accountability, the difference being that Bovens views enforceability as an independent system of accountable practice rather than part of a single cohesive model. Where accountability mechanisms are available, Daun claims, they are often problematic, because complaints are handled by the same organisation at which they are levied.²⁴ This ongoing concern is articulated in broader debates on the impartial and transparent regulation of humanitarian accountability, foregrounded

https://interagencystandingcommittee.org/system/files/iasc_caap_endorsed_nov_2017.pdf.

19 Roberts (n 12).

21 Ibid.

23 Daun (n 11) referring to Bovens (n 3).

24 Daun (n 11) 8.

¹⁵ CHS Alliance, Group URD and the Sphere Project, Core Humanitarian Standard on Quality and Accountability (2014); available at: https://corehumanitarianstandard.org/files/files/Core%20Humanitarian%20Standard%20-%20English.pdf.

¹⁶ ALNAP, 'Participation Handbook for Humanitarian Field Workers' (ALNAP: 2009); available at: <u>https://www.alnap.org/help-library/partic-ipation-handbook-for-humanitarian-field-workers.</u>

^{17 &#}x27;The Grand Bargain – A shared commitment to better serve people in need', (23 May 2016) 10; available at: <u>https://reliefweb.int/sites/</u>reliefweb.int/files/resources/Grand Bargain final 22 May FINAL-2.pdf.

¹⁸ IASC, 'Commitments on Accountability to Affected People and Protection from Sexual Exploitation and Abuse' (November 2017); available at:

²⁰ Joakim Daun, *Child Participation and Accountability in Save the Children Colombia's Programming* (Save the Children Colombia, 2019) 12; available at: <u>https://resourcecentre.savethechildren.net/node/16315/pdf/rli_child_participation_eng_final.pdf.</u>

²² Peter Newell and Joanna Wheeler, 'Making Accountability Count' in IDS Policy Briefing, 3 (Overseas Development Institute, 2006).

in continued proposals for a humanitarian ombudsman.²⁵

The level at which humanitarian accountability is pitched has also been subject to academic discussion; James Darcy et al. discuss humanitarian accountability in terms of a two-way model, where NGOs are accountable, not only to affected populations, but also to the donors who fund and commission their services. This is premised, they claim, on an understanding of accountability as both a defining principle in a rights-based approach to humanitarian programming and a contributing factor in improved organisational performance.²⁶ This is important when considering the drivers for participation from affected populations in current humanitarian programming; it indicates that participation is more than just a route to empowerment and securing rights for the community, but could also have a potential impact on the efficiency and optimisation of NGO operations. This is an argument that has been explored in literature looking specifically at participation from refugee women, who are often seen as the 'secret weapon' in programme implementation and achieving humanitarian goals.²⁷

2.4 Securing participation from women: gender mainstreaming

It is widely recognised in the international humanitarian community that conflict-related displacement has specific gender dimensions and that, within a refugee camp population, women and girls will face additional barriers to protection due to discriminatory social norms, food hierarchies, physical insecurity and limited recourse to justice.²⁸ The UNHCR and a number of INGOs first held a consultation with refugee women in 1988, where the predominant view was that "women are left out of everything. We do not participate in planning or designing programs that are aimed at us [...] we remain the world's invisible refugees".²⁹ UNHCR subsequently released its first Policy on Refugee Women in 1990 and, since then, NGOs have sought to design and deliver programmes that attenuate the marginalisation of women's needs in humanitarian settings, with 'gender mainstreaming' emerging as a central feature in perspective across the sector.³⁰ This process of integrating gender perspectives within the planning and implementation of humanitarian programming, in order to promote gender equality, often foregrounds refugee women as active participants in service provision.

Participation from refugee women serves as the basis for numerous inter-agency guidelines and UN documents that assert the responsibility of States and non-State actors to address the discriminatory social, cultural, and economic conditions that exacerbate refugee women's vulnerability in humanitarian settings. The 2007 UN Emergency Handbook, for example, provides a framework for humanitarian action that is 'guided by international legal standards' and aims to empower communities to enjoy equal access to their rights, with a special emphasis on the rights of women and girls.³¹ Gender mainstreaming is viewed as an integral part of this process, and an assessment of local socioeconomic conditions and gender norms in the planning and implementation of humanitarian activity is designed to ensure that the particular needs of women and girls are met, thus enabling them to participate as active 'partners' in protection and programming activities.³²

27 Olivius (n 4).

Discourse around humanitarian ombudsmen is beyond the scope of the present paper, the following articles provide a useful summary of historic and more recent proposals: David Peppiatt, 'An Ombudsman overview: briefing paper for the Ombudsman Project Inter-Agency Steering Group meeting on November 21, 1997 at British Red Cross' (1997); available at: https://odihpn.org/magazine/the-ombudsman-project-pilot-project-to-investigate-the-concept-of-an-ombudsman-for-humanitarian-assistance/; Dorothea Hilhorst, Asmita Naik and Andrew Cunningham, *International Ombuds for Humanitarian and Development Aid Scoping Study* (International Institute of Social Studies, Erasmus University Rotterdam, 2018); available at: https://partos.nl/fileadmin/files/Images/Integriteit/Bijlage_9_2018 International Ombudsreport_final.pdf; Ian Christoplos and John Mitchell, *A humanitarian ombudsman revisited*? (2018); available at: https://www.alnap.org/blogs/a-humanitarian-ombudsman-revisited?

²⁶ James Darcy, Jessica Alexander, Maria Kiani, 2013 Humanitarian Accountability Report (Geneva: HAP International, 2013); available at: https://reliefweb.int/sites/reliefweb.int/files/resources/2013-har.pdf

^{28 &}quot;Closing the Gender Gap in Humanitarian Action" (UN Women, 2014); available at: <u>https://interactive.unwomen.org/multimedia/info-graphic/humanitarianaction/en/index.html</u>.

Judith Kumin, 'Protecting Refugee Women: UNHCR and the Gender Equity Challenge', in ed. Maroussia Hajdukowski-Ahmed, Nazilla Khanlou and Helene Moussa, Not Born a Refugee Woman: Contesting Identities, Rethinking Practices (Berghahn Books, 2008) 222.

³⁰ For a discussion on the UNHCR's Policy on Refugee Women, and subsequent revised versions, see Alice Edwards, 'Transitioning Gender: Feminist Engagement with International Refugee Law and Policy 1950–2010' (2010) 29(2) Refugee Survey Quarterly 31-32. For the original document, see United Nations High Commissioner for Refugees, UNHCR Policy on Refugee Women (20 August 1990); available at: https://www.unhcr.org/ uk/protection/women/3ba6186810/unhcr-policy-on-refugee-women-1990.html

³¹ UNHCR, *Handbook for Emergencies* (February 2007, Third Edition) 8; available at: <u>https://www.ifrc.org/PageFiles/95884/D.01.03.%20</u> Handbook%20for%20Emergencies_UNHCR.pdf.

³² Ibid 7.

2.5 Participation-based approaches to SGBV programming

Gender inequality is generally understood as both the cause and consequence of SGBV,³³ and the destabilisation of gender relations in humanitarian settings often leaves women and girls at an increased risk of violence. For instance, as of 2014, one in five displaced or refugee women in humanitarian settings is estimated to have experienced sexual violence.³⁴ Consistent with the general shift towards rights-based humanitarian programming, participation-based strategies for preventing and responding to SGBV in refugee camps is a distinct and expanding area of humanitarian practice.³⁵ The conceptualisation of NGOs as duty-bearers, with obligations to promote gender equality via the protection, participation and empowerment of women and girls, is outlined in the 2008 IASC Policy Statement on Gender Equality in Humanitarian Action,³⁶ and the Women, Peace and Security agenda outlined in a number of UN Security Council Resolutions.³⁷

The 2015 IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action provide a more recent contribution to this literature and are due consideration. These Guidelines are designed to assist NGOs in planning and implementing action aimed at the prevention and mitigation of SGBV across all aspects of humanitarian response, emphasising the need to reinforce links between SGBV prevention and the promotion of gender equality. This includes, but is not limited to, camp management, education, health, food security, housing, and livelihoods. The Guidelines advocate the importance of participation from all members of the affected population, including men and boys, but place a special emphasis on 'leadership and meaningful participation' from women and girls in design, implementation, monitoring and evaluation activities.³⁸ Again, NGOs are constructed as de facto duty-bearers who are 'bound to empower and assist rights-holders in claiming their rights' and redress the 'discriminatory practices that impede humanitarian intervention'.³⁹

Although the 2015 IASC Guidelines supply overarching guidance on SGBV interventions, most NGOs develop their own policy frameworks and standards for SGBV protection and maintain independent technical advisors on SGBV prevention and response in their organisational headquarters and operational contexts.⁴⁰ Their unique perspectives on how to identify, prevent and respond to SGBV have led to diverging practices in long-term displacement contexts.⁴¹ Participation-based strategies are a consistently mainstream approach, but have evolved to engage different communities within affected populations. Alongside participation from refugee women, there is growing evidence that engaging men in SGBV interventions is an effective model for influencing behavioural and systems change and counteracting the social, cultural, economic, religious and political conditions that perpetuate SGBV in long-term displacement settings.⁴² A series of SGBV protection programmes with such distinct remits and priorities will often operate side-by-side within a humanitarian setting, meaning that a single affected population will be subject to several NGOs' outlooks and objectives for protecting against SGBV, and different communities will be engaged as participants in the provision of their services. The abundance of SGBV protection programmes that require participation from the affected community indicates a critical sphere of humanitarian activity in which theories of AAP can be tested and refined, and processes of gender mainstreaming can be assessed according to their potential for promoting gender equality.

40 Ibid.

³³ Mazeda Hossain, Chimaraoke Izugbara, Alys McAlpine, Stella Muthuri, Loraine Bacchus, Sheru Muuo, Anjalee Kohli, Carolyne Egesa, Rachel Pearson, Giorgia Franchi, Mairi MacRae, *Violence, uncertainty, and resilience among refugee women and community workers: An evaluation of gender-based violence case management services in the Dadaab refugee camps* (London: Department for International Development (DFID), 2018); available at: <u>https://insights.careinternational.org.uk/media/k2/attachments/What-Works-Dadaab-Report_2018.pdf</u>.

³⁴ UN Women (n 28).

³⁵ Sophie Read-Hamilton, 'Gender-based violence: a confused and contested term', in *Humanitarian Exchange special Feature 60* (Overseas Development Institute, 2014) 5-8; available at: <u>http://odihpn.org/wp-content/uploads/2014/02/HE_60_web_1.pdf.</u>

³⁶ IASC, Policy Statement: Gender Equality in Humanitarian Action (June 2008); available at: <u>https://interagencystandingcommittee.org/</u> system/files/legacy_files/iasc_policy_statement_gender_equality_in_humanitarian_action.pdf.

³⁷ See UN Security Council Resolutions 1820, 1888, 1960 and 2106.

³⁸ IASC, Integrating Gender-based Violence Interventions in Humanitarian Action (August 2015) 4; available at: https://interagencystand-ingcommittee.org/system/files/2020-09/IASC%20Guidelines%20for%20Integrating%20Gender-Based%20Violence%20Interventions%20in%20 Humanitarian%20Action%2C%202015.pdf

³⁹ Ibid 46.

⁴¹ Rebecca Holmes and Dharini Bhuvanendra Preventing and responding to gender-based violence in humanitarian crises (Overseas Development Institute, 2014); available at: <u>https://assets.publishing.service.gov.uk/media/57a089b2ed915d3cfd0003a8/GBV in emergencies NP_77_web.pdf</u>

⁴² Caroline Aasheim, Dale Buscher, Dean Peacock and Lynn Ngugi, *Engaging Men and Boys in Refugee Settings to address sexual and gender based violence* (Sonde Gender Justice Network, 2008); available at: <u>https://gcwa.unaids.org/sites/womenandaids.net/files/Sonke-UNHCR-Engag-ing-men-and-boys-in-refugee-settings-to-end-GBV-meeting-report-Sept_2008.pdf.</u>

2.6 Academic perspectives on women's participation as a strategy for gender equality

Since emerging as a fundamental norm in rights-based approaches to humanitarian action and a unifying factor in perspectives on AAP, community participation, and particularly participation from refugee women, has been subject to considerable academic discussion. Literature in this area has tended to focus on how such strategies engage and mobilise gender as an issue and the extent to which they address the power relations that gender entails. Drawing on theories of governmentality,⁴³ Olivius claims that the shift within the humanitarian sector in recent decades towards neoliberal management strategies, submits all areas of life to an economic rationality in which refugee women are conceived of as 'human capital' and their participation in their own welfare is seen as a resource that can both decrease dependency and optimise accountability and efficiency of humanitarian services. She counters that refugee women's participation in humanitarian programming does not necessarily increase their capacity to realise their rights, nor does it guarantee an improvement in their immediate situation.⁴⁴

Judy El-Bushra agrees with Olivius that, in everyday practice, expecting women to participate in service provision, without also decreasing other responsibilities, such as domestic duties, burdens women with an increased workload and leaves the existing frameworks of power and gender difference unmitigated.⁴⁵ Olivius goes further, asserting that humanitarian interventions appear to instrumentalise gender as a technical issue in pursuit of operational goals rather than an analytical tool for engaging the structural inequalities and disadvantages faced by refugee women in humanitarian settings.⁴⁶ This robust hypothesis on gender mainstreaming is maintained, in part, by Jennifer Hyndman and Malathi de Alwis, who argue that gender has become a 'tokenised requirement' in humanitarian aid programming and part of an administrative checklist for successful donor applications, where its inclusion often fails to incorporate a crucial analysis of gendered power relations.⁴⁷

However, in contrast to Olivius' overriding critique of refugee women's participation, Hyndman and Alwis pose the reconstruction of refugee women from 'beneficiaries' to participant-subjects within the rights-based approach to humanitarian action, as an opportunity to destabilise existing gender relations and open up 'new spaces' for their transformation, through NGO training programmes and development initiatives.⁴⁸ Central to their claim is the idea that humanitarian interventions engaging displaced women must be feminist as well as gendered, responding to the economic, social, cultural and political differences that provide the mutually constitutive conditions for unequal power relations.⁴⁹ This reflects the wider calls for a 'renewed engagement with the political project of feminism' in humanitarian aid, and cautions against its frequently depoliticised instrumentalisation of gender.⁵⁰ It is important to note, however, that Hyndman and Alwis do not attempt to fix 'feminist' as a singular category, nor to situate it within a typology of feminisms, suggesting that its conceptual elasticity is what makes it distinctive from the rigidity of reduced gender analysis.⁵¹

- 47 Hyndman and de Alwis (n 1)
- 48 Ibid 85.
- 49 Ibid 88-89.

51 Ibid 88-89.

⁴³ For an introduction to 'governmentality', see, amongst others, Michel Foucault, *The Birth of Biopolitics. Lectures at the College de France,* 1978-79 (Palgrave MacMillan, 2008); Thomas Lemke, *Foucault's Analysis of Modern Governmentality* (Verso, 2019).

⁴⁴ Olivius (n 4).

⁴⁵ Ibid; Judy El-Bushra, 'Gender and forced migration: editorial' (2000) 9 Forced Migration Review; available at: <u>https://www.fmreview.org/</u> gender-and-displacement/elbushra

⁴⁶ Olivius (n 4).

⁵⁰ Ibid; El-Bushra (n 45); Edwards (n 30); Olivius (n 4).

3. Case study: SGBV Protection Strategies in Dadaab

3.1 Case Management Model

The first programme under analysis is a comprehensive case management model which combines psychosocial support for survivors, SGBV outreach, community mobilisation, and task-sharing with refugees known as 'refugee community workers' (RCWs). Individualised versions of this model are implemented by both Care International and International Rescue Committee (IRC) in their specific camp remits of Dagahaley and Hagadera. An 'Insight' report on the case management model, using data collected between 2014 and 2017 was co-published by the London School of Hygiene and Tropical Medicine and the African Population and Health Research Centre, in collaboration with IRC and Care International, in 2018.⁵² To date, this report provides the sole body of publicly available analysis of the case management programme in Dadaab and serves as the basis for the present discussion.

The case management programme adopts a survivor-centred approach, where 'the survivor's experiences, needs, and rights are at the centre of decision-making, allowing for the survivor to be in control of her own recovery and empowerment'.⁵³ It encompasses national staff and RCWs who are divided into teams dealing with SGBV response, SGBV prevention, psychosocial response and psychosocial outreach. In Hagadera, the all-female service staff operate within the IRC's Women's Protection and Empowerment programme (WPE). The WPE's stated aims include responding to SGBV via healthcare and counselling provision, tackling the root causes of SGBV, empowering women through participation in decision-making, economic independence and access to financial resources, and working with government and community authorities to ensure there are laws and policies in place to prevent violence against women and girls. At Care International, SGBV services fall within the organisation's broader Gender and Community Development programme. Services are run by a combination of male and female staff, who work as part of the Gender and Development Unit which is responsible for referrals, case management and SGBV prevention, or as part of the Psychosocial Unit, which is responsible for counselling and community capacity-building in relation to the psychosocial impact of SGBV.

The 2017 'Interagency GBV Case Management Guidelines' describe case management as a 'structured method for providing help to a survivor', that requires an organisation to take responsibility for making sure survivors are informed of their rights and options, identifying and responding to issues that may impact a survivor and their family's access to support, and providing emotional support to the survivor throughout the process.⁵⁴ The Guidelines frame case management in terms of rights, emphasising women's right to safety, confidentiality, dignity, self-determination, and non-discrimination. Although this document is a useful tool for situating the IRC and Care International's adoption of case management within the broader trajectory of SGBV protection strategies in humanitarian settings, it is important to note that the data for the Insight report was collected before the Guidelines were published, making it difficult to establish the Guidelines as a metric for evaluating the implementation of case management in Dagahaley and Hagadera. Nevertheless, the Insight report's recommendation that IRC and Care International implement the Guidelines in future iterations of the programme is perhaps an indication that existing activity would not meet these standards adequately.⁵⁵

Both IRC and Care International are self-assessed members of the CHS Alliance, meaning that the Core Humanitarian Standard on Quality and Accountability, with its fundamental norms of 'communication, participation and feedback' should underpin their activities, and the Standard should act as a measurable and verifiable set of criteria against which these activities can be assessed. However, as indicated earlier in this article, self-regulation permits highly individualistic interpretation and implementation of accountability norms, with distinct terminology, priorities and outcomes. For instance, a simple search of the term 'accountability' within the Insight report yields no results, nor is any acknowledgement made of either organisations' endorsement of the CHS Standard. Ostensibly, this represents a juncture between the focus of the programme and the framework for accountable practice in which, theoretically, it should operate. The first two subsections in this analysis seek to determine whether this claim is borne out in practice, by assessing IRC and Care International's implementation of the case management programme according to the fundamental norms of communication, participation and feedback contained within the CHS Standard. Subsequent analysis concerns the role of RCWs in the case management model and their participation in task-sharing activities.

⁵² Hossain et al. (n 33).

⁵³ Ibid 13.

⁵⁴ ALNAP, Inter-Agency Gender-Based Violence Case Management Guidelines, First Edition (2017) 8; available at: <u>https://www.alnap.org/</u> system/files/content/resource/files/main/interagency-gbv-case-management-guidelines-final-2017-low-res.pdf .

⁵⁵ Hossain et al. (n 33) 62.

3.1.1 Communication

The breakdown of RCW responsibilities across the response, prevention and outreach teams, displays an emphasis on communication that upholds the quality criterion outlined within the CHS Guidance Notes (updated 2018) on accountability to affected communities.⁵⁶ In Dadaab, RCWs working in response at the 'GBV Centre' are responsible for sharing information on SGBV services within the community, communicating the benefits of timely access to services, providing translation, issuing materials, managing listening sessions with women and providing their feedback to national staff, conducting follow-up sessions by phone, and mobilising survivors for further case management sessions.⁵⁷

The prevention and outreach teams, meanwhile, focus on information-sharing and awareness-raising, facilitating activities including community campaigns against SGBV, peer counselling sessions among men, women, and younger members of the community on SGBV issues, and conducting workshops on human rights, life skills, and the impact of SGBV. This latter area of work, alongside the specification that RCWs are trained in 'gender norms',⁵⁸ and the consistent references to refugee women's 'empowerment' as an objective of the case management model, suggests that raising awareness of refugee women's rights and entitlements is a programme priority. However, at no point within the report is information provided as to specific objectives or measurable outcomes of this approach: there is no reference to individual rights contained within national legislation or international human rights law instruments that would be relevant to survivors of SGBV, nor are any details provided on how case management supports survivors to access justice. Equally, there is no substantive discussion of gender equality as an objective within the model's purview, despite gender *in*equality being cited multiple times within the report as the underlying cause of violence against women and girls.⁵⁹

3.1.2 Participation from refugee women: decision-making and feedback

There are two distinct strategies for community participation to be assessed within the case management model that engage with the principles of AAP and have intersecting objectives and outcomes. The first form of participation concerns the beneficiaries of the programme itself — women and girls who have experienced SGBV. As mentioned, the rationale for a survivor-centred approach to SGBV response is to put the survivor's 'experience, needs and rights at the centre of decision-making, allowing for the survivor to be in control of her own recovery and empowerment.⁶⁰ However, there is little evidence provided within the report as to the role that survivors of SGBV are expected to play in decision-making. For instance, is their participation limited to decisions regarding their individual case plans, or is there capacity for them to influence the design and delivery of the programme more broadly, and, if so, where is the evidence for the processes and forums that would allow them to do so?

The CHS Guidance Notes on participation propose consultations with the affected community and local institutions prior to initiating a humanitarian response, to allow for group discussions and decision-making, whilst recognising that in the earliest phases of an acute crisis this may prove challenging.⁶¹ There is no evidence within the Insight report that IRC or Care International conducted consultations with refugee women in Dadaab in advance of implementing the case management model there, nor of any attempts to enhance their engagement with ongoing feedback processes. This suggests that opportunities for refugee women to participate in decisions affecting their welfare are individual rather than collective, with limited potential for wider dialogue and sharing of views and concerns.

The six-step plan for managing an individual woman's case begins with her referral to the SGBV service, and continues throughout implementation of her case plan, follow up and revision of the plan, and closure of her case upon meeting predetermined 'goals'.⁶² When exiting the service, she is required to complete a 'client feedback survey'. However, there is no indication as to whether, or how, feedback from these surveys is collated, if data is disaggregated according to age, marital or familial status or other relevant categories, or how learnings are integrated into future planning for SGBV service. Moreover, data suggests that most women supported by the case management model between 2014-17 did not return for follow-up case management visits,⁶³ which are a requirement for formally 'exiting' the service. The feedback collected through the exit forms would therefore only reflect the views of a limited proportion of women who have been supported through the programme, whilst women who were unwilling or unable to continue accessing the service during the entirety of their case plan would be denied the formal opportunity to influence future

63 Ibid 7.

⁵⁶ CHS Alliance, Groupe URD and Sphere Association, *Core Humanitarian Standard on Quality and Accountability: Updated Guidance Notes and Indicators* (2018); available at: https://corehumanitarianstandard.org/files/files/CHS_GN%261_2018.pdf,

⁵⁷ Hossain et al. (n 33) 66-67.

⁵⁸ Ibid 32.

⁵⁹ Ibid 52, 53, 60, 62.

⁶⁰ Ibid 13.

⁶¹ Ibid 15.

⁶² Ibid 16.

decision-making.

It is worth noting that Both IRC and Care International run auxiliary spaces for women and girls alongside the GBV Centres in individual camp blocks, where they can gather for dialogue sessions with other women in the community, participate in empowerment activities and report protection concerns.⁶⁴ In theory, these spaces could provide an additional forum for refugee women to provide feedback to organisational staff, but it is important to consider the likelihood that survivors who struggle to access SGBV services would face similar barriers when accessing these additional spaces, further diminishing their capacity to express their views and lodge complaints.

3.1.3 Participation from refugee community workers: gendered experiences

The second part of this analysis focuses on participation from RCWs in the case management model. Mobilising members of the affected population to participate in the provision this humanitarian programme would, on first inspection, appear to be a straightforward application of the principles of AAP. However, whilst the case management model is explicitly designed as a humanitarian response to the immediate needs of SGBV survivors, it also claims to have longer-term objectives of SGBV prevention through addressing the local gender norms that discriminate against women and girls and leave them more at risk of harm. It would be logical to assume, therefore, that IRC and Care International's attempts to redress women's marginalisation in humanitarian settings would lead them to actively recruit RCWs from women in the community who have survived SGBV. This would, according to Hyndman and Alwis' perspective, provide them with critical 'new spaces' in which to secure their status as empowered rights-holders.⁶⁵ However, it is notable that participants are recruited from the wider refugee community and there appears to be no specific emphasis on engaging female survivors in this work.

That being said, IRC operates an exclusively female team of RCWs, whilst Care International recruits both men and women, giving survivors a choice in who assists them. It is significant that 63% of the 71 RCWs interviewed during the data-collection process for the Insight report were men. Information on sampling for the data collection is not provided within the report, so it is not possible to state with certainty whether this proportion is representative of the total population of RCWs across Dagahaley and Hagadera camps. However, it does raise important questions around who within the refugee community in Dagahaley is subject to the hypothesised benefits of task-sharing, which, according to the report, includes individual capacity-building by conferring participants with 'marketable skills for future employment.'⁶⁶ If the data from the Insight report were to prove representative of the overall demographic of RCWs, it would be reasonable to assume that male RCWs may experience diminished access. However, further research would be needed to evidence this claim. What can be concluded definitively is that, in Hagadera, the IRC's all-female team of RCWs enjoy unfettered access to the intended benefits of task-sharing and any contribution to their ongoing employment potential supports the goal of women's 'economic independence' that underpins the IRC's wider WPE Programme.⁶⁷

The Insight report does not explain the gender disparity within the sample of RCWs interviewed, nor does it make any conclusive statements on its implications for the overarching organisational project of empowering refugee women. However, it is worth noting its recommendations for future SGBV operations include transferring to a complete task-sharing model, with an all-female staff of RCWs hired to lead case management and psychosocial support for survivors. It also states that 'barriers to employment and promotion for female national staff and female refugee community workers must be mitigated by recruitment and training practices'.⁶⁶ Olivius' hypothesis on the shift in the humanitarian sector towards neoliberal management strategies that prioritise efficiency and optimisation, provides a useful theoretical lens through which to understand the ways in which the task-sharing model operationalises refugee participation and how it plans to integrate gender mainstreaming in its future approach.⁶⁹ According to the report, task-sharing with refugees supplies a number of benefits to service provision: it expands the limited human resources of organisations serving large refugee populations, provides greater access to said populations by helping to overcome cultural, linguistic and physical barriers faced by national staff in outreach services, it increases the acceptance and ownership of SGBV interventions by the community and for the community,⁷⁰ and, significantly, it is 'cost-effective and scalable'.⁷¹

66 Hossain et al. (n 33) 12.

⁶⁴ Ibid 13.

⁶⁵ Hyndman and Alwis (n 1) 85.

⁶⁷ International Rescue Committee, *Women's Protection and Empowerment* (n.d.); available at: <u>https://www.rescue-uk.org/taxonomy/term/335/0</u>.

⁶⁸ Hossain et al. (n 33) 7.

⁶⁹ Olivius (n 4).

⁷⁰ Hossain et al. (n 33) 13.

⁷¹ Ibid 6.

This rationale for refugee participation both chimes with Olivius' claims and upholds objectives outlined in the Grand Bargain agreement that aim to 'promote the link between effective participation and the quality and effectiveness of humanitarian response'.⁷² Olivius argues that humanitarian approaches to gender have often 'downplayed or side-lined' political goals such as social justice and gender equality in favour of quantifiable operational goals, and this theory can also be tested against the instrumentalisation of female RCWs in the case management programme.⁷³ Working on the assumption that the recommendation for an all-female staff of RCWs is conceived as a strategy that will extend and maintain the existing benefits that task-sharing confers on service provision, it remains to determine whether refugee women's participation in task-sharing is, at the same time, an effective strategy for combating the discriminatory local norms and gender inequalities that leave women more at risk of harm.

Data within the Insight report includes findings from cross-sectional surveys and qualitative interviews with RCWs, which serve as a basis in analysing gendered experiences of participation. A clear distinction emerges between the nature of the work conducted by men and women RCWs, with women largely responsible for psychosocial support and case management whilst men engage in outreach and awareness-raising activities. This is in keeping with the 2017 Interagency Gender-Based Violence Case Management Guidelines, which advocate the use of female staff to protect the emotional and physical safety of survivors.⁷⁴ However, it is important to note that discriminatory factors appear to underpin this gender disparity in Dagahaley, most notably the belief amongst national staff that refugee women have lower education and literacy levels than refugee men, making them less suitable for SGBV service provision and outreach activities.⁷⁵ This bias indicates that the structural disadvantages that result from refugee women's limited access to education are being maintained and perpetuated in organisational hiring practices for RCWs. It is also reported by an employee within the national staff that women are less able to facilitate community forums and other outreach services because they are not used to talking in front of others — an observation that is born out in the quantitative data where 27% of the female RCWs reported feeling only 'a little bit comfortable' voicing their opinions in staff meetings.⁷⁶ The absence of detail on formal feedback mechanisms through which RCWs can hold IRC and Care International accountable suggests that potentially over one guarter of female RCWs in Dagahaley may not feel empowered to provide feedback and raise concerns in the limited forums currently open to them.

Only a third of women RCWs surveyed for the Insight report agreed that they were fairly paid for their work, in contrast to over half of men.⁷⁷ The report does not contain data on the remuneration of RCWs, apart from noting that pay is determined 'according to staff grade and experience' and is in line with UNHCR standards on refugee wages in Kenya.⁷⁸ Without gender-disaggregated data on the salaries of RCWs in Dagahaley, conclusions on a potential gender pay gap cannot be drawn. However, it is reasonable to infer from this that female RCWs working for Care International may be prevented from accessing the same level of economic independence as their male counterparts, as existing gender inequalities in the wider community are restaged in the professional arena.

Whilst heavy workloads were reported by both male and female RCWs, women face 'additional burdens' across the board, such as domestic duties, which they are expected to perform alongside their work for the SGBV service. The breakdown in domestic responsibilities for male and female RCWs substantiates this observation. Tasks cited include preparing meals (100% female, 13% male), washing clothes (92% female, 44% male), cleaning the home (69% female, 29% male) and going to the market (92% female, 44% male).⁷⁹ These findings uphold academic criticisms of refugee women's participation in humanitarian programming, demonstrating that expectations for women to participate in service provision without decreasing their domestic responsibilities, merely increases their workload and fails to mitigate existing frameworks of power and gender difference.⁸⁰ Olivius' claim that their participation in service provision does not necessarily guarantee an improvement in their situation⁸¹ is sustained by findings from the cross-sectional survey, which indicate that one third of all RCWs have experienced some form of non-partner violence (NPV) as a result of their work in the SGBV service, with female RCWs being disproportionately affected by this (39% females, 23% males). One in three RCWs reported being hit with an object or kicked, one in five reported that a weapon had been used against them and, significantly, 42% of female RCWs reported experiencing some form of physical or sexual NPV in the twelve months prior to data collection.⁸²

- 72 'The Grand Bargain A shared commitment to better serve people in need' (23 May 2016) 10.
- 73 Olivius (n 4).
- 74 ALNAP, Inter-Agency Gender-Based Violence Case Management Guideline, 32.
- 75 Hossain et al. (n 33) 41.
- 76 Ibid 41.
- 77 Ibid 39.
- 78 Ibid 15.
- 79 Ibid 39.
- 80 El Bushra (n 45); Olivius (n 4).a
- 81 Olivius (n 4).
- 82 Hossain et al. (n 33) 60.

3.1.4 Case Management as a strategy for promoting gender equality: concluding remarks

Qualitative data collected from RCWs and national staff attribute the causes of SGBV to men's frustration over their lack of economic independence, which is antagonised by a general shift in focus towards women and girls in humanitarian policy.⁸³ In addition, it is suggested that the case management programme encountered a backlash from young men who feel that women are being 'empowered' at their expense.⁸⁴ Although the case management model is embedded in IRC's WPE Programme and Care International's thematic work on gender development, and is shaped by the gender equality goals outlined in the 2015 IASC 'Guidelines on Gender-Based Violence Interventions in Humanitarian Settings', it is noticeable that there is no formal analysis of gendered power relations, gender equality or feminism within the Insight report. This suggests the case management model does not prioritise substantive activities oriented towards or framed by these objectives. When considered alongside its emphasis on the benefits to service provision that refugee participation and, in particular, refugee *women's* participation provides, it is reasonable to claim that the case management programme in Dadaab functions as a largely depoliticised intervention into SGBV protection.

In conclusion, the IRC and Care International's model of AAP instrumentalises refugee participation to ensure communication, efficiency and accessibility of humanitarian response in the immediate term, without sufficiently attenuating the structural disadvantages faced by its female RCWs more broadly. The hypothesis that participation from refugee women can destabilise gender relations and open up 'new spaces' does apply, to the extent that female RCWs may derive new skills that could support them in future employment, although there is no available data on this. However, the failure of the case management programme to mitigate the additional burdens and discrimination that refugee women face in accessing and participating in SGBV services, suggests that it is not an effective or durable strategy for promoting gender equality, and would need to operate in tandem with other SGBV programmes aimed at prevention. Furthermore, the limited provision of feedback processes within this model, either in the planning or implementation stages, suggests accountability manifests here as a value, over and above a formal mechanism or set of quantifiable practices.

3.2 Engaging Men through Accountable Practice (EMAP)

Since 2003, the IRC's Women's Protection and Empowerment unit has conducted programmes that actively engage men in preventing violence against women and girls in humanitarian settings, in an effort to develop protection strategies that seek to prevent as well as respond to SGBV.85 An example of this work is the Engaging Men through Accountable Practice (EMAP) model, a participation-based programme that engages both men and women within the affected community, aiming to raise awareness of SGBV and eradicate its root causes by challenging the negative sociocultural norms, attitudes and practices that perpetuate SGBV in post-conflict and long-term displacement contexts. 'Accountable Practice' is a fundamental principle within the EMAP model, providing a framework to engage men in examining and challenging destructive notions of masculinity, gender and power through activity that strengthens women's leadership and voices and encourages men to be accountable to women within their community.⁸⁶ The EMAP model has been adopted by several NGOs operating in displacement contexts. Since 2015, it has been operated by UNHCR and implementing partners across the Dadaab complex and by 2019, it had been completed by approximately 919 individuals (520 females, 399 males).87 Publicly available reports on EMAP operations in Dadaab are limited and tend to provide more of an overview of the model itself rather than critical analysis of its effectiveness as an SGBV protection strategy in practice, which demonstrates the need for further research. The following discussion, therefore, centres on the IRC's Guide to EMAP, evaluating its aspirational objectives and interaction with the humanitarian principles of AAP, before assessing whether it can serve as a counterpoint to the limited scope of the case management programme in the pursuit of gender equality.

3.2.1 Community participation

The IRC configures EMAP as a year-long prevention programme organised around three distinct areas of action. First is a four-week training for facilitators who are recruited from existing organisational staff (each intervention requires a minimum of one supervisor and one male and one female facilitator for the respective men's and women's partici-

86 Ibid.

⁸³ Ibid 33.

⁸⁴ Ibid 41.

⁸⁵ IRC, Part 1: Introductory Guide Preventing Violence Against Women and Girls: Engaging Men Through Accountable Practice (2013) 7; available at: https://www.fsnnetwork.org/sites/default/files/IRC-EMAP-Introductory-Guide-High-Res%20(1).pdf.

⁸⁷ UNHCR, Safe from the Start: Sexual and Gender-Based Violence (SGBV) Prevention, Risk Mitigation and Response - Promising Practices (2019) 41; available at: https://reliefweb.int/sites/reliefweb.int/files/resources/5ec7c1084.pdf.

pant groups). This is followed by an eight-lesson curriculum for the women's participant group and a sixteen-lesson curriculum for the men's participant group. The groups are conducted within a continuous feedback loop to ensure that men's activities are 'guided by women's voices'.⁸⁸

A UNHCR report on EMAP programmes in Dadaab since 2015, indicates that following the facilitator training, operational staff engaged community leaders in the objectives and methodology of the programme, to increase understanding and accountability to the affected community.⁸⁹ Although demonstrating adherence to the AAP principle of communication, it is not indicated whether this functioned as a formal opportunity for leaders to share their views or concerns and whether their feedback would be integrated into the programme delivery. Qualitative feedback data of this kind could be critical in ascertaining how the intervention might be received by the wider community and identifying potential challenges in recruiting volunteers.

3.2.2 Participation from refugee women

EMAP interventions begin, officially, with the initiation of the women's participant group. Their eight-week curriculum is designed to accommodate ten to twenty women at a time, providing them with a safe space in which information on the EMAP methodology can be shared and a series of informative discussions can take place. The objective of these discussions is several — to encourage dialogue around the root causes of GBV and women's experiences, allow women to provide feedback on their hopes, concerns and priorities for the intervention, and for the facilitator to record and share this data with the co-facilitator and supervisor and ensure it is integrated into the subsequent men's curriculum.⁹⁰. The women's group is not an open forum, and participants from the community are selected by facilitators according to a pre-established set of criteria, including age (twenty years and over), demonstrated commitment to attend meetings and participate in activities without incentives and, preferably, prior involvement in VAWG programming or providing support to women in their community.⁹¹

In its discussion of the pilot EMAP intervention in Dadaab in 2015, UNHCR reports that women participants numbered between twenty-two and thirty in each camp, and that women were collectively involved in deciding the structure, time and location of their meetings. As a result, most meetings took place in the mornings to accommodate their additional domestic duties. The report does not discuss women's capacity to perform their role as participants alongside these duties, although a 2017 joint report on SGBV protection strategies from UNHCR and the Population Council acknowledges that the time demands of the EMAP process presents a considerable challenge to women participants.⁹² UNHCR analysis notes that the meetings provided women with a safe space to share their experiences and ideas, and to discuss the root causes of sex and gender-based violence. This suggests that contrary to female RCWs in the case management programme, female volunteers in the EMAP model are actively provided with forums in which to freely express their concerns and contribute their knowledge to the overall implementation of activity.

3.2.3 Participation from refugee men

The men's curriculum is designed to accommodate between ten and twenty men who are demonstrably 'concerned about violence against women and girls in their community and interested in helping to improve the lives of women' and explicitly precludes men who have themselves been perpetrators of such violence.⁹³ Again, this is not an open forum and men are selected according to specific criteria: age (twenty years and over), commitment to attend meetings and participate in activities without incentives, ability to participate in group work and a commitment to non-violence towards women and girls. The curriculum encompasses a series of meetings in which men are encouraged to engage in dialogue and self-reflection about their experiences, beliefs, and values around gender, and to develop their understanding of SGBV and its impacts on women and girls. At the same time, they are challenged to enact individual behaviour change by taking steps to address unequal power relationships with women in their own lives.⁹⁴ In the period between 2015 and 2019, fewer men than women volunteered as participants in the EMAP programme in Dadaab, with men's groups ranging from between sixteen and twenty-six members in each camp. Furthermore, male participant attrition is highlighted as a major challenge,⁹⁵ and suggests a limitation in the programme's purview and potential for transformative action.

⁸⁸ IRC (n 87) 7.

⁸⁹ UNHCR (n 87) 40.

⁹⁰ Ibid 27.

⁹¹ Ibid.

²² Zahra Mirghani, Joanina Karugaba, Nicholas Martin-Achard, Chi-Chi Undie and Harriet Birungi, *Community Engagemnt in SGBV Pre*vention and Response: A Compendium of Interventions in the East and Horn of Africa and the Great Lakes Region, eds. UNHCR and Population Council (2017) 11; available at: <u>https://www.popcouncil.org/uploads/pdfs/2017RH_CommunityEngagementSGBV.pdf.</u>

⁹³ UNHCR (n 87) 28.

⁹⁴ Ibid 16.

⁹⁵ Mirghani et al. (n 92) 11.

3.2.4 Defining accountable practice

The EMAP model defines accountability as an 'active process of identifying and challenging harmful ideas and norms to bring about social change'96. Central to its framework for accountability is ensuring that the roles, needs and experiences of all women within the community are integrated into the programme design and delivery, including the most marginalised voices. This approach is a clear example of gender mainstreaming in action, drawing on the AAP principle of engaging the most vulnerable and at-risk members of the affected community. It conceives of women as a diverse group in which many different subject positions can exist and must be accommodated. For example, women who are already active in addressing SGBV within their community should be encouraged to take leadership roles either through participating in community meetings or women's curriculum groups, and the women participating in these groups should be conceived of as 'guides' whose voices can ensure that the EMAP intervention reflects the needs and experiences of women in the community and shapes service provision. Equally, the potential that women will be subjected to violence as part of a backlash from men who are threatened by the programme, or that violence will be harder to monitor as social norms change and incidents occur more frequently in domestic settings, means that women should be accommodated as survivors. As such, facilitators must be acquainted with referral mechanisms to SGBV response services and safety-planning must be integrated into the intervention. This broad understanding of the roles that women may perform as participants within the EMAP programme indicates a commitment to mainstreaming gender as an analytical tool for understanding particular social processes, rather than an instrument for enhanced operational performance.

EMAP espouses a more comprehensive understanding of accountable practice than the 'communication, participation and feedback' principles prescribed by inter-agency frameworks for humanitarian accountability. Within EMAP interventions, accountability extends from the organisation to incorporate individual staff members as well as male participants from the community. Staff and male participants are themselves conceived of as duty-bearers and conferred with responsibilities to engage in ongoing processes of 'personal' and 'relational' accountable practice. Personal accountability requires facilitators to identify and challenge their own gender prejudices, to better support male participants in their own process of behavioural transformation. Building on this notion that 'change begins from within', relational accountability represents the belief that when facilitators are able to reflect critically on their own biases, they will have a greater capacity to identify and address gendered power imbalances in their relationships with colleagues and participants in EMAP activities.⁹⁷ The normative function of this accountability model is articulated in the objective of developing EMAP staff into 'allies' to women and girls within the community.

3.2.5 Accountability through feedback

Accountable practice is supported and monitored via several formal structures and mechanisms that engage both staff and participants from within the community. For instance, EMAP supervisors and facilitators attend weekly meetings once the women's participant groups have started, to share general feedback, discuss their personal and relational accountable practices, and ensure that issues raised by the women's groups are discussed and integrated into the men's curriculum. EMAP staff are required to complete 'accountability checklists' prior to these meetings, which provide categories with which staff must identify and assess personal and participant-based challenges to accountable practice.⁹⁸ Ensuring that women involved in EMAP interventions are able to participate in decision-making is a fundamental aspect of its accountability model. The IRC's guide to implementing EMAP provides facilitators with practical instructions on how to record feedback and recommendations from women within their group meetings, and ideas for how to integrate these findings into subsequent activities with male participants. Male participants are encouraged to engage in accountable practice by talking to women in their personal lives about direct action they can take to become better 'allies'⁹⁹. The Guide states that, for men with high literacy levels, these findings can be recorded in 'personal action plans' and shared at group meetings. However, there is no indication of supplementary tools for men with lower literacy levels, which suggests that some of the feedback from women in the wider community risks being overlooked during this process.

3.2.6 EMAP as a strategy for promoting gender equality: concluding remarks

The limited reports on EMAP interventions in Dadaab all suggest that it has proven to be a productive model for engaging transformational behaviour in individuals, with an undisclosed number of women reporting 'increased cooperation on household responsibilities by their husbands' as well as a 'positive change in husbands' attitudes toward violence'.¹⁰⁰ As a result, it can be argued that EMAP provides an effective framework for challenging the negative sociocultural norms that increase refugee women's vulnerability to violence, taking crucial steps towards the promotion

99 Ibid.a

⁹⁶ UNHCR (n 87) 12.

⁹⁷ Ibid 19.

⁹⁸ Ibid 21.

¹⁰⁰ Mirghani et al. (n 92) 11.

of gender equality. The requirement of participation from both men and women within the community, whose engagement with one another is structured through understanding the imbalance in gendered power dynamics, indicates a more nuanced approach to gender mainstreaming than the case management model, which subverts rather than repeats inequalities witnessed more widely within the community. Nevertheless, the limited reach of EMAP's model cannot be ignored; within a four-year period (2015-2019), EMAP in Dadaab engaged 919 individuals, which is a small fraction of the overall population of over 218,000. Furthermore, the selection criteria for participants favours those who have already demonstrated a commitment to SGBV programming, or an affiliation with its principles at a minimum. Arguably, this bias verges on self-selection and, by extension, this prevents any robust evaluation of its capacity to influence stakeholders within the wider community who would not qualify for direct participation in the programme. Therefore, it can be concluded that, whilst the EMAP model does appear to promote gender equality as a deliverable objective within its immediate sphere of influence, its limited scale means interventions may struggle to displace the gender inequalities that leave women more at risk of violence at a wider community level.

4. Conclusion and recommendations

The purpose of this article has been to determine how NGO strategies for SGBV protection in long-term displacement settings intersect with humanitarian accountability practice, by conducting a case study of two independent SGBV initiatives operating in the Dadaab refugee complex. The first section of the case study focused on the case management programme operated by IRC and Care International in the Hagadera and Dagahaley camps. Analysis of its participatory model for task-sharing with refugee community workers found that the programme incorporates some specific accountability functions within its activities, namely measures for increasing communication and participation, but that these were adopted primarily to enhance the accessibility, scalability and cost-effectiveness of the service. Opportunities for feedback were minimal — analysis found that there was little scope for women to influence planning or decision-making at a collective level, and there was limited access to formal feedback mechanisms due to levels of attrition amongst beneficiaries.

Having established that community participation was conceived as part of a shift towards a rights-based approach to humanitarianism, aiming to include and empower marginalised and at-risk groups within the affected community, the case management model was critically assessed to determine how it conceptualises participation according to gender. Research found that male RCWs were disproportionately represented in the available data and appeared to have benefited more extensively both in terms of remuneration and employability potential. Female RCWs were required to balance their work alongside additional domestic burdens and appeared to be marginalised from certain roles and responsibilities. It is not clear whether they were deemed ineligible for certain roles on application, or whether they were prevented from applying altogether, due to a priori assumptions about their lower education and literacy levels. To mitigate these discriminatory hiring practices, additional training should be provided to women to support their applications for RCW roles.

Returning to the question of whether the case management model provides an effective strategy for the promotion of gender equality, analysis found that its approach to participation fails to mitigate sufficiently the existing frameworks of power and gender difference within the community, leaving female RCWs with an increased workload and at greater risk of non-partner violence. The recommended transition towards an all-female staff of RCWs, as per the 2017 'Interagency GBV Case Management Guidelines', could provide an opportunity for redressing this imbalance, but would require the aforementioned training to ensure women are suitably qualified for all RCW positions. Moreover, a comprehensive process of gender mainstreaming, that accounts for the myriad ways that refugee women are politically, economically and socially marginalised in humanitarian settings, would be critical in ensuring that this initiative centralises gender equality as an objective rather than a rhetorical concept.

The second part of the case study focused on the EMAP programme, which promotes accountable practice through participation from selected groups of men and women within the community. Initial research found that publicly available reports on these interventions in Dadaab are limited in scope and provide an informational overview of the process itself rather than an evaluation of its effectiveness in practice. This indicates an urgent need for empirical research, whereby the views and experiences of community participants and staff from implementing NGOs could be integrated into future analysis. As it stands, the present study found that the EMAP model is significantly indebted to the AAP framework for humanitarian accountability, adopting formal processes for ensuring communication and feedback from participants throughout the one-year intervention, and foregrounding women's voices in planning and implementation phases.

The EMAP programme was found to take a more analytical approach to gender mainstreaming than the case management model, encompassing a diverse range of gendered experiences rather than conceiving of women as a homogenous group of participants. This provides a comparatively robust method of accounting for the social processes that maintain and perpetuate discriminatory gender norms and should serve as a benchmark for NGOs operating participatory approaches in the SGBV arena. Further analysis determined that the EMAP programme promotes an innovative model of accountability, reconfiguring it as a personal and relational practice as well as an overarching organisational responsibility. The onus on NGO staff and male participants to challenge their own behaviours and biases through purpose-built accountability mechanisms appears to be a more promising strategy for pursuing longterm gender equality, although it is hindered by the limited scale of EMAP interventions.

In conclusion, this article has identified the AAP principle of community participation as the nexus between NGO strategies for SGBV protection and humanitarian accountability practice. It has argued that this approach is used by NGOs to accommodate a diverse set of interests and objectives, aiming to enhance operational performance of SGBV responses as well as promoting a gender-inclusive, rights-based approach to SGBV prevention. As such, it has contributed to academic discussions around the orientation of accountability frameworks, building on Newell and Wheel-

er's understanding of a two-way model, in which accountability is pitched at affected populations — as a defining feature in a rights-based approach to humanitarian programming — as well as donors who may require operational performance indicators to continue funding and commissioning NGO services.¹⁰¹ Discussion within this article has also reinforced Daun's application of Bovens' theory of public accountability to the humanitarian sector, emphasising the distinction between conceptions of accountability as a notional standard for practice (case management model), and a pragmatic set of forums and processes through which communities can provide feedback, shape activities and hold authorities to account (EMAP).¹⁰² It argues that a sector-wide understanding of accountability is needed to overcome this lacuna in NGO approaches and to ensure the consistent application of accountability 'mechanisms' to humanitarian settings.

Research presented within this article has supported Olivius' hypothesis that refugee women's participation within humanitarian programming provides neither a guarantee to realising their rights, nor an improvement in their immediate situation,¹⁰³ and has argued that a more comprehensive system of gender mainstreaming must be universally adopted by NGOs within the humanitarian sector. This would be intended to avoid the risk of some participation-based strategies for SGBV protection perpetuating the structural inequalities that already exist within the affected community, compounding the marginalisation of refugee women and re-exposing them to violence.

However, this article has departed from Olivius' critique of NGOs' instrumentalisation of gender as a technical issue that excludes proper analysis in favour of operational objectives,¹⁰⁴ by suggesting that women's participation in immediate SGBV responses is vital for ensuring the accessibility and scalability of services and, to this extent, it is indissociable from operational goals. It concludes by reprising existing scholarly assertions that NGOs engaging refugee women as participants in humanitarian programming must actively politicise their gendered interventions.¹⁰⁵ This will ensure that participatory activities contribute to a sustainable system for accountable practice that both legitimises women's heterogenous experiences and centralises their voices in the decision-making and implementation of SGBV protection initiatives.

¹⁰¹ Newell and Wheeler (n 22).

¹⁰² Daun (n 11) referring to Bovens (n 3).

¹⁰³ Olivius (n 4).

¹⁰⁴ Ibid.

¹⁰⁵ Hyndman and de Alwis (n 1); El-Bushra (n 45); Edwards (n 30); Olivius (n 4).