HIF GAP ANALYSIS RESEARCH ON GENDER-BASED VIOLENCE INTERVENTIONS AND THE OPPORTUNITIES FOR INNOVATION

Elrha’s Humanitarian Innovation Fund (HIF) commissioned the Small Arms Survey in 2015 to produce the first ever gap analysis of specific challenges in Gender Based Violence (GBV) humanitarian programming through the lens of humanitarian innovation.

Through such a lens, this in-depth research has generated a series of clearly defined, accessible, and impactful Innovation Challenges, to address gaps in GBV programming. This report offers fresh guidance on tangible innovation areas for GBV practitioners globally to enhance effectiveness and accelerate impact. In doing so, the report aims to engage new actors and new partners from different arenas to overcome enduring GBV challenges.

Elrha’s Humanitarian Innovation Fund (HIF) supports organizations and individuals to identify, nurture, and share innovative and scalable solutions to the challenges facing effective humanitarian assistance.

For more information, visit www.elrha.org/hif/home

The Small Arms Survey is a global centre of excellence whose mandate is to generate evidence-based, impartial, and policy-relevant knowledge on all aspects of small arms and armed violence. It is the principal international source of expertise, information, and analysis, and acts as a resource for governments, policy-makers, researchers, and civil society. It is located in Geneva, Switzerland, at the Graduate Institute of International and Development Studies.

For more information, visit http://smallarmssurvey.org/
Gender-based violence (GBV) in humanitarian settings is a life-threatening issue. It undermines dignity, causes immense pain, and is a threat to equality and development around the globe. There is a growing recognition that affected populations can experience various forms of GBV during conflict and natural disasters, during displacement, and during and following return. Existing support structures and prevention mechanisms are often compromised, while the risk of abuse and violence of all kinds increases, in particular for women and girls. Despite this, the issue of GBV in emergencies has too often been overlooked during times of crises, or not considered to be a humanitarian need.

International advocacy efforts have sought to change this, and have served to increase the attention paid towards the issue, as organizations seek to put in place prevention and response programmes to help those affected by GBV in emergency contexts. Recently updated guidelines to address prevention, mitigation and response to GBV from the Inter-Agency Standing Committee (IASC) highlight these efforts. Despite initiatives over the past ten years to implement GBV programs in emergencies, the practical difficulties remain complex and context specific.

In recent years, the role of innovation has generated significant attention across the humanitarian sector\(^1\). Innovation lies in doing something differently with the aim of improvement at a system or sector level, where adaptation and invention require a uniquely iterative process. Successful innovations are those that result in real and measurable improvements in efficiency, effectiveness, quality, or social outcomes/impacts of humanitarian action.

Approaching problems from the perspective of innovation offers the potential to find new ways to tackle problems, and use new ideas, technologies and relationships to drive solutions. Innovations in humanitarian practice can be more inclusive, extending a service to a wider range of people. Critically, innovative practices do not need to be ‘brand-new’ – they can also include approaches that may have already emerged as good practice elsewhere, but which are novel to a particular context or means of implementation. As a result of this same novelty, innovative practices also carry with them a certain degree of intrinsic risk and uncertainty in their implementation (see ALNAP, 2016).

successful innovative practices should ultimately be able to show a demonstrable impact, as evidenced by clear data generated through rigorous monitoring and evaluation.

Since 2011, the Humanitarian Innovation Fund (HIF) has played a leading role in this agenda, supporting organizations and individuals to identify, nurture, and share innovative and scalable solutions to challenges facing effective humanitarian assistance. To support this process, it provides funding for innovations at different stages in their development, and works to improve conditions for innovation in the humanitarian system. It does this by building and supporting partnerships and relationships between organizations and creating opportunities for the sharing of ideas. As part of this mission, the HIF is permanently seeking to improve the research and evidence base for innovation and its contribution to humanitarian performance.

WHAT DOES THE HIF MEAN BY INNOVATION?

The following definition of innovation is used by the HIF:

The dynamic processes that focus on the creation and implementation of new or improved products and services, processes, positions, and paradigms.

For more information, visit <http://www.elrha.org/hif/innovation-resource-hub/innovation-links/alanap-study/>

In 2015, the HIF launched an ambitious initiative funded by the Swedish International Development Cooperation Agency (SIDA), focused on GBV programming. The initiative aims to investigate approaches and efforts to best address the significant remaining challenges in this area and stimulate tangible innovations.

The origin of the 'Gender-Based Violence Interventions: Opportunities for Innovation' Gap Analysis lies in the recognition of synergies between these two important conversations growing within the humanitarian sector. The combination of respective knowledge and experience from the GBV and the Innovation arenas is anticipated as likely to provide powerful and complementary insights.
The Gap Analysis is grounded in evidence gathered from four complimentary research methodologies:

- A thorough literature review focused on recent literature on GBV in humanitarian settings, but also including insights from other areas such as justice and public health.

- An online survey of 353 humanitarian agents, the majority of whom (76 per cent) had training and experience in GBV response. Respondents were asked about their understanding of the limitations and opportunities for innovation in GBV programming in emergency situations.

- Informant interviews with 40 experts in GBV in emergencies, practitioners from the humanitarian, development and peacebuilding sectors, donors, and innovation specialists. Interviews were semi-structured and focused on challenges and opportunities for innovation in GBV response.

- Three case studies, including interviews and focus groups. The cases chosen represent a diverse range of emergencies and GBV response types, and focus on understanding challenges at the operational level. The locations for case studies were:
  1. Honduras – High levels of interpersonal violence, including femicide, natural disasters (e.g. Hurricane Mitch in 1998), and displacement;
  2. Nepal – Post-conflict setting also affected by major natural disasters (e.g. 2015 earthquake, floods);
  3. Somalia (Puntland) – A situation of protracted conflict and instability, also facing long-term drought and food insecurity.

The research for the report was carried out by the Small Arms Survey, while Science Practice provided support with translating the findings into actionable Innovation Challenges.

A comprehensive overview of the research methodology and case study summaries are available in the full report. For additional research materials, complete survey results and full case studies, see <http://www.elrha.org/gbv-gap-analysis>.
The research conducted for this report has identified a number of gaps and limitations of current GBV programming in emergencies. Two overarching Key Considerations have been outlined as essential requirements for implementing an effective GBV programme in an emergency. The remaining gaps were grouped into four goal-driven, discrete, and significant Challenge Areas. Each Challenge Area has been further broken down into actionable Innovation Challenges.

KEY CONSIDERATIONS

Two Key Considerations stood out from the research as overarching limitations of existing GBV programming in humanitarian contexts. These are:

1. Involving local stakeholders in problem identification and solving;
2. Ensuring GBV services are accessible for target groups and in hard-to-reach areas.

While the significance of these Key Considerations is well known in the GBV community, the fact that they repeatedly surfaced as limitations of existing programmes in the research and interviews highlights the fact that additional work is needed to ensure that GBV services are relevant and accessible.

KEY CONSIDERATION 1: INVOLVING LOCAL STAKEHOLDERS IN PROBLEM IDENTIFICATION AND SOLVING

There was widespread agreement among the GBV experts consulted that humanitarian staff’s efforts to meaningfully engage local actors in GBV programming are too limited. Key informants explained that humanitarian staff do not systematically use or rehabilitate existing local services, and instead set up separate GBV services. In the longer run, this risks undermining the national actors and the sustainability of local capacity to provide effective GBV services.
Innovators looking to address any of the Innovation Challenges defined by the Gap Analysis should prioritize actively engaging local stakeholders in the development of solutions. In a humanitarian emergency, it is essential to ensure that local stakeholders, such as NGOs, women's groups, government institutions, community and traditional leaders, feed into GBV intervention planning and play an active role in identifying and solving problems. Working closely with local experts and organizations allows for a more accurate identification of local cultural barriers to GBV interventions, and supports the timely mapping out of local actors that need to be engaged to mitigate them. It can also lead to the production of outreach materials that are better suited for the given context. Critically, it is important to involve local stakeholders in the design and implementation of GBV planning to ensure the effectiveness and continuity of services after the crisis situation.

KEY CONSIDERATION 2:
ENSURING GBV SERVICES ARE ACCESSIBLE FOR TARGET GROUPS AND IN HARD-TO-REACH AREAS

While GBV services are, in theory, open to all categories of GBV survivors, in practice, issues of security, availability of personnel, cost, and cultural barriers hinder access among some of the target populations. Informants interviewed for this research saw the coverage of GBV needs in rural and insecure areas as inadequate. Also, some groups can be more challenging to provide appropriate support to, including dispersed urban refugees, adolescent girls, men and boys, and stigmatized groups of survivors such as people affected by GBV due to their sexual orientation or gender identity. Extending the reach of GBV interventions in humanitarian emergencies beyond the usual comfort zones, such as large urban centres and camp settings, was noted as a recurring problem.

Innovators looking to develop GBV interventions should be aware of this imbalance in service provision. When putting forward proposals for services they should consider the extent to which these can be accessed by those in need, by those in hard-to-reach areas, or by those from often omitted vulnerable groups.

INNOVATION CHALLENGES

Four Challenge Areas were defined in which innovative thinking could enhance prevention and improve the provision of GBV services in emergencies. Within each area, specific opportunities for innovation were presented as Innovation Challenges. These are concrete calls for action and their goal is to clearly set out specific targets or tasks that need to be addressed in order to improve the state of GBV programming in emergencies. Their role is to serve as inspiration for anyone with an interest in improving GBV response and prevention in humanitarian contexts.

For each Innovation Challenge, the full report includes a description of the problem, as well as a list of criteria for anyone looking to develop solutions. The four Challenge Areas and their constituent Innovation Challenges are briefly described below:

CHALLENGE AREA 1: IMPROVING MONITORING AND EVALUATION OF GBV

The research findings have outlined two major gaps in available data – data on what kind of GBV programmes work and where, and data on the nature of GBV in emergencies. Both of these types of data are essential to develop a robust understanding of the problem of GBV in emergencies, inform policy, and design evidence-driven programmes. The proposed Innovation Challenges in this area focus on developing the necessary tools and methodologies to gather this missing data.

1.1 Measure the impact of GBV programmes: Evaluate the impact and quality of existing or new GBV programmes by developing and implementing different assessment processes and tools, and identifying and monitoring relevant metrics.

1.2 Develop real-time monitoring tools: Develop tools that easily integrate into the humanitarian system and enable the real-time collection of GBV data during an emergency. The data collected should be reliable and support GBV decision-making and the design of GBV programmes.
CHALLENGE AREA 2:
INCREASING THE AVAILABILITY AND QUALITY OF GBV EXPERTISE

The lack of a clear pathway to become a GBV specialist is reflected in the fact that there are challenges to be addressed along the whole professional development chain, from training, to recruitment, and retention. The suggested Innovation Challenges in this area follow these three phases.

2.1 Create context-specific skills-building opportunities for GBV in emergencies specialists: Build on existing initiatives to develop relevant, engaging, context-specific, and sufficient GBV skills-building opportunities that lead to a competent and locally-available pool of GBV in emergencies specialists.

2.2 Develop a transparent and tailored recruitment process for GBV practitioners: Enhance the visibility of vacancies for GBV specialists and the transparency of the recruitment process so that competent GBV experts with a strong understanding of the local culture and context fill available opportunities.

2.3 Reduce turnover of GBV practitioners: Reduce turnover of GBV practitioners by improving the work requirements, schedule, and environment in which they are expected to perform.

CHALLENGE AREA 3:
IMPROVING GBV COORDINATION AND PRIORITIZATION

The research findings have shown that while an increasing number of agencies and guidelines identify GBV as a life-saving issue in humanitarian emergencies, effectively and systematically implementing GBV standards in an emergency remains a challenge. Difficulties around coordination and lack of prioritization by humanitarian and development agents are constraining the implementation of GBV programs in emergencies. The proposed Innovation Challenges in this area are looking for solutions able to:

3.1 Enable better coordination among GBV practitioners: Design knowledge sharing opportunities that connect GBV practitioners from across the world according to concrete needs, and result in new collaborations and cross-fertilizations.

3.2 Strengthen advocacy skills of local GBV actors: Help key actors within the GBV sector, such as practitioners and local women’s groups, to accurately identify local GBV priorities and effectively communicate them to relevant decision-makers.

3.3 Encourage collaborations between humanitarian and development actors: Develop opportunities for humanitarian and development actors to work together towards developing a more integrated and sustainable approach to offering GBV services in an emergency.

3.4 Ensure a more stable flow of donor funding: Help ensure a more stable flow of funding for effective GBV programming during emergencies by sensitising donors on the link between humanitarian and development funding.

CHALLENGE AREA 4:
ADAPTING GBV STANDARDS FOR PRACTICAL USE IN A VARIETY OF CONTEXTS

The recently updated IASC GBV guidelines and recently published UNFPA minimum standards on GBV prevention and response programming represent a step forward in improving GBV prevention and response, however translating them into impactful action on the ground is a process that requires investment. The proposed Innovation Challenge targets this particular goal:

4.1 Develop context-specific roadmaps to help practitioners meet GBV minimum standards: Building on existing work around GBV minimum standards, work together with local communities to successfully develop and disseminate context-specific, engaging, and accessible materials to help practitioners meet GBV minimum standards in emergencies.
The Gap Analysis ‘Gender-Based Violence Interventions: Opportunities for Innovation’ seeks to frame gaps in humanitarian GBV programming as actionable Innovation Challenges. Innovation lies in doing something differently with the aim of improvement at a system or sector level, where adaptation and invention require a uniquely iterative process. Successful innovations are those that result in real and measurable improvements in efficiency, effectiveness, quality, or social outcomes/impacts of humanitarian action.

The research presented in the Gap Analysis addresses current challenges and opportunities in GBV prevention and response, building on a broad spectrum of opinions, and opening up the scanning to practices outside the humanitarian sector. From this, four Challenge Areas, with ten Innovation Challenges, have been identified and articulated, and are intended to serve as inspiration for anyone with an interest in improving GBV response and prevention in humanitarian contexts.

A problem as complex and embedded as GBV in humanitarian emergencies defies easy solutions, and there can be no single ‘innovation’ to address the diversity of challenges around this issue completely or immediately. Nonetheless, the development of innovative new practices – and the scaling and transfer of good ideas to a new context – can be an integral part of work that improves the delivery of GBV services. Indeed, the benefit that an innovation lens can bring goes beyond any individual project.

The Gap Analysis brought together researchers and designers in the effort to identify and define Innovation Challenges in the humanitarian GBV sector. The ambition for this report is that it continues to inspire and engage new actors from across sectors to collaborate in overcoming enduring GBV challenges.
The HIF’s GBV initiative is supported by