

Protecting People in the Midst of Famine: Responding to Urgent Risks in the Horn of Africa

The protection aspects of the Horn of Africa crisis, including Gender-based Violence (GBV), are acute and life-threatening. While actions have been taken to address GBV risks and support survivors, there is an urgent need to scale up existing actions, further reduce risk, and address gaps in information and programming which remain. Recent protection assessments in Kenya, Ethiopia and Somalia all show that alarming numbers of women and children among the affected populations are experiencing sexual violence and face severe threats of violence en route to and around temporary settlements. The drought and the famine have worsened pre-existing conflict-related sexual violence in Somalia and created additional security risks for women and children who have been forcibly displaced across the region. These include increased exposure to sexual violence and abuse, harmful coping mechanisms such as early or forced marriage, survival sex and domestic violence. Single women, female-headed households, adolescent girls and other children are at particular risk.

It is critical that donors prioritize programmes to minimize women and children's protection risks and ensure their access to life-saving services.

Risks for Gender-based Violence	Recommended Response and Mitigation Strategies
Security	
Limited protection and security measures in temporary shelter locations;	<ul style="list-style-type: none"> • More funding for increased protection staffing and security personnel as well as support to community patrols).
Presence of armed groups at border crossing points	
Overcrowded living conditions, especially in reception and transit centres	<ul style="list-style-type: none"> • Insist on adherence to the SPHERE standards in all implemented programmes.
Inadequate lighting in temporary shelter locations, reception and transit centres	<ul style="list-style-type: none"> • Install lighting in and on outskirts of temporary shelter locations.
Limited allocation of "safe spaces" for children and women	<ul style="list-style-type: none"> • Ensure hygiene kits include flashlights and whistles for women/girls
Lack of safe access to services, limited information on where and how to access the few services that are available	<ul style="list-style-type: none"> • Support establishment of female-only safe spaces for women and girls to report protection concerns safely and confidentially and access information and available services. • Ensure systematic data collection disaggregated by age and sex, which is consistently and appropriately shared to inform evidence-based and targeted humanitarian response • Establish culturally appropriate information exchange mechanisms to ensure that the affected population knows where to go for help and can report complaints. • Provide basic services in close proximity to shelter locations

Risks for Gender-based Violence	Recommended Response and Mitigation Strategies
Water, Sanitation and Hygiene (WASH), Food, Non-food Items (NFI), Shelter, Camp Management, Education	
Tensions with host communities over limited resources	<ul style="list-style-type: none"> • Ensure increased security, address humanitarian response for both drought affected communities and IDPs • Make funding to other sectors, including WASH, Shelter, Camp Management and Food/NFI distribution, contingent on meeting the minimum standards described for each sector in the IASC GBV Guidelines (eg separate sanitation facilities for females with internal locks) • Increase firewood distribution and fuel efficient stoves • Increased policing patrols at distribution points • Distributions to men and women should be done separately
Lack of sex-separated and safe bathing and sanitation facilities, including in schools	
Limited access to water	
Slow firewood distribution	
Violence at distribution points	
Health and Psychosocial Services	
Insufficient psychosocial support services available for survivors of GBV	<ul style="list-style-type: none"> • Scale up efforts to ensure survivors have immediate and safe access to services, especially new arrivals and including comprehensive post rape care, age appropriate health and psychosocial support, shelter services and distribution of hygiene and dignity kits
Limited or lack of clinical care services for sexual violence survivors including lack of trained personnel and availability of post-exposure prophylaxis (PEP kits) to prevent HIV infection	

