



VOICES

S O M A L I A

A Qualitative
Assessment
September 2021



Voices Somalia
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About the Voices Report

Spanning over 30 years, the ongoing crisis in Somalia has significantly impacted the most vulnerable populations, such as women and children, many of whom have only ever known insecurity. While Somaliland has experienced increased peace and security, conflicts continue to erupt along the disputed land with Somalia. The Voices report is the first publication dedicated to exploring specific violence risks affecting women, girls and other vulnerable persons; what type of violence these vulnerable groups experience; how they cope with these risks; and whether specialized services are available and accessible to them.

The outcomes of this first publication of Voices from Somalia illustrate how women and girls are disproportionately subjected to a wide range of Gender-Based Violence (GBV) in Somalia and Somaliland, including sexual and domestic violence, Female Genital Mutilation and/or cutting (FGM/C), and Child Early and Forced Marriage (CEFM). Women and girls' resort to several coping mechanisms to cope with their situation: ranging from silence; to reporting violence to religious and community leaders; and restricting or having their movements restricted by their families as protective measures against GBV. Oftentimes, adolescent girls work as domestic workers, while boys work as shoe shiners in order to meet the basic needs of their families. The impact of violence on some women and girls includes early pregnancy, divorce, depression, and in some cases death.

An adolescent girl from Garowe district, Nugaal region, Puntland, Somalia explained it as *"violence is happening everywhere, and it can affect everyone: both males and females"*. Many girls fear leaving their house, whether that be to go to the market, to search for work, or to use personal hygiene facilities. Adolescent girls want to get an education, however when they go to school, they face sexual harassment and may, as a result, be compelled to stay at home and limit themselves to fetch water, cook and clean, while their brothers go to school. Many of the girls who endure GBV suffer in silence, as they do not trust the weak and obsolete formal legal system operating in most parts of Somalia and Somaliland, with the only exception being Puntland state. The informal community justice

system, which is based on mediation and arbitration, often favors the perpetrator, with whom the survivor may be coerced into marrying. The interviews providing the foundation of this report revealed that boys continue to be targeted for recruitment by armed groups, while forced abortion, as well as the use of technology to blackmail adolescent girls, were identified as rising GBV trends. In addition, it is recognized that revenge killings are used to retaliate against sexual violence by families of survivors of rape. Homicide, following rape or gang rape, is becoming a grave new form to sexual violence in Somalia.

Discussions with interviewees revealed that while there are available GBV, protection and humanitarian distribution services in some areas, these services are inadequate in quality and scope. While the prevalence of GBV increases and continues to negatively impact vulnerable women and girls, there are insufficient numbers of specialized service providers, and a complete lack thereof in remote locations.

Our gratitude and thanks go to all those who have contributed to this publication. Our aim is to provide a comprehensive guide to support humanitarian actors to deliver an informed and targeted response. We thank those who participated in focus group discussions for their incredible courage. We hope that by raising and amplifying your voices in this publication, humanitarian and development actors will gain a better understand of the situation, re-commit and double efforts to end GBV in Somalia and Somaliland.

Thank you for reading,



UNFPA Representative, Somalia

Intended use of the Report

Voices from Somalia was developed in order to support the development and implementation of humanitarian programs to prevent, respond and mitigate Gender-Based Violence (GBV), violence against children and other protection concerns affecting vulnerable women, girls and boys across areas in Somalia and Somaliland affected by conflict. The goal is to enable, not only the Protection Cluster, but all humanitarian clusters, including Camp Coordination, Food Security, WASH, Education, and other key clusters to better understand GBV and Protection risks requiring mitigation throughout their response.

It is important to note that the intent of Voices from Somalia is not to collect data reflecting GBV prevalence. Similarly, Voices from Somalia does not identify specific allegations of sexual exploitation and abuse. Further, this publication is not intended to present a portrait of Somalia to the media or provide journalists with information on GBV. Voices from Somalia is not to be quoted by – or to – colleagues working in the media. Should any journalist be interested in acquiring further information on GBV in Somalia, they are advised to contact the Somalia GBV AoR Coordinator.

Contents

About the Voices Report	i
Intended use of the Report	iii
Summary of Findings	2
Methodology	4
Data Sources, Collection and Analysis	4
Data Limitations	4
Analysis of Findings	4
Affected Population	5
Young and Adolescent Girls	5
Divorced and/or Widowed Women	6
Women and Girls with Disabilities	6
Older Women	7
Ethnic Minorities and IDP Women	7
Men and Boys	7
Types of Gender-Based Violence	8
Sexual Violence	8
Sexual Assault and Harassment	8
Sexual Exploitation and Abuse (SEA)	9
Female Genital Mutilation/Cutting (FGM/C) ³	9
Domestic Violence	9
Early/Forced Marriage	11
Denial of Resources	11
Economic Violence	11
Cyber Violence and Forced Abortion	11
Consequences of GBV on Women and Girls	12
Coping Strategies	13
Negative Coping Strategies	14
Restrictions of Movement and Freedom	14
Positive Coping Strategies	15
Availability and Quality of GBV Response Services	17
Gender and Vulnerable Groups	19
Quality of Services	19
Access to Justice	20
Barriers to Services	20
Location of Violence	21
Home	21

Schools	22
Workplace	22
Markets	22
Fetching Firewood and/or Water	22
Inside IDP Camps	22
Crisis-Related Forms of GBV	22
Gender and GBV in Other Clusters	24
General Protection - Civil Documentation	24
Health	26
Water Sanitation and Hygiene (WASH)	26
Camp Coordination and Camp Management (CCCM)/Shelter	27
Education	27
Child Protection	28
Child Labor	28
Unaccompanied Children	28
Child Protection Services	29
Mine Action	30
Type of Explosive Hazards and Locations/Structures Impacted	31
Housing, Land and Property	31
Humanitarian Distributions: NFIs, Food, and Cash Assistance	33
Barriers to Humanitarian Assistance and Distributions	34
Recommendations	36
Improved Public Awareness to end GBV	37
Specialized GBV Services	37
Establishing or rehabilitating Women and Girl Safe Spaces	37
Increased Women/Girl Participation in Community-Based Activities (Decision Making Roles)	38
Improved Coordination Amongst Humanitarian Assistance Providers	38
Sex and Gender Disaggregated Data and Information	38
Prevention of Sexual Exploitation and Abuse (PSEA)	39
Annexes	40
Methodological Approaches for Assessments	40
Quantitative Data	40
Focus Group Discussion	40
GBV Expert Focus Group Discussions	40
Secondary Literature data desk review	41

Terminology	42
Abduction	42
Child or minor	42
Child labour	42
Confidentiality	42
Conflict-related sexual violence	42
Consent/informed consent	42
Denial of Resources, Opportunities or Services	43
Disability	43
Domestic violence (DV) and intimate partner violence (IPV)	43
Economic abuse / Violence	43
Emotional abuse (also referred to as psychological abuse)	43
Empowerment of women	43
Forced marriage and child (also referred to as early) marriage	43
Gender	43
Gender-based violence	43
Gender-disaggregated data	44
Gender Equality	44
Gender roles	44
Harmful traditional practices	44
Honour Killings	44
Perpetrator	44
Physical assault/Violence	44
Protection from sexual exploitation and abuse (PSEA)	44
Rape	45
Separated child	45
Sexual abuse	45
Sexual assault	45
Sexual exploitation	45
Sexual harassment	45
Sexual violence	45
Survivor	45
Trafficking in persons	45
Unaccompanied child	45
Victim	45



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Summary of Findings

Focus Group Discussions (FGDs) conducted in 2021 identified that sexual violence, including FGM/C and sexual harassment; domestic violence; early/forced marriage; and sexual exploitation of women and girls, constitute major GBV risks in Somalia and Somaliland. Women, girls, boys and men have indicated that GBV occurs everywhere: in homes, at schools, at work, in the market, on public transportation and on the streets. The fear of sexual violence is a concern raised by women and girls contributing to psychosocial distress. Some forms of violence identified in this publication may come across as new to some GBV actors, including forced abortion and cyber bullying. Women and girls are subjected to cyber bullying via photos and videos on social media. A community and religious leader from Gaalkacayo district, Mudug region, Galmudug state explained that *“there are lots of violations and abuses, such as recording sexual videos and then using them to blackmail girls and women”*. Furthermore, adolescent girls are forced into early marriage by parents, due to poverty and food insecurity. As expressed by an adolescent boy from Daynille district, Banadir region, Hirshabelle state: *“hunger and poverty are the cause of early and forced marriages as families seek dowry payment to try and reduce*

their food bills”. However, the girl is often wed to a man who is much older than her or just not of her choice, which may increase her vulnerability to GBV. A community and religious leader from Baletweyn district, Hiraan region, Hirshabelle recounted that *“girls face forced marriage to elder persons. The girls are forced to marry elderly men who they do not like. It is a decision reached by her parents and girls cannot refuse because they risk being beaten up”*.

General Protection, Child Protection, Mine Action and Other Humanitarian Clusters. Community FGD participants expressed concerns related to protection measures employed by parents and families, such as movement restrictions and travelling with a male relative. A man from Garowe district, Nugaal region, Puntland gave the following account: *“women and children can’t travel alone unless they travel with males guarding them to be safe and sound”*. FGD participants listed COVID-19 prohibitions and insecurity as further reasons for the employed movement restrictions. FGD participants noted that movement restrictions are often necessary, since arbitrary arrests or detentions, sexual violence and harassment of women and girls at checkpoints are common occurrences.

Access to Civil Documentation. Some FGD participants noted that many people are unaware of the process of obtaining a national ID or a passport, while other FGD participants identified challenges with regards to replacing lost documents, primarily due to the inaccessibility of civil registrars. Members of minority clans face challenges with obtaining legal national documents as explained by an adolescent boy Hargeisa district, Woqooyi Galbeed region, Somaliland: *“for other ethnicities, they face many challenges when trying to get a national identification card with conditions, they are not capable of accessing the services’ location or meeting the costs of obtaining such a card”*. FGD participants further noted that for some Somalis, additional costs not linked to the actual processing of civil documents can be incurred. Some of the consequences of not possessing these documents include the inability to apply for employment; lack of access remittances or inability to take a loan, purchase land or to start a business. FGD participants noted that accessing humanitarian assistance can pose a challenge without an official ID and civil documentation, while it may also lead to an overall increased vulnerability to be the subject of eviction.

Housing, Land and Property Contributing to Violence and GBV. In Somalia and Somaliland, the cause of violence at interpersonal and community levels is disputed land ownership. Property theft is a challenge that FGD participants face in their communities, especially women and girls. Landlords sell land to multiple buyers, causing disputes. The issue of long-term vacancy of lands, where landowners fail to utilize the land, and reselling by other persons are also major causes of land dispute. FGD participants noted that the underlying cause for land disputes and property theft, is the lack of proof of ownership. Discussions revealed that persons belonging to vulnerable groups, such as minority clans, may lose their lands for the reasons stated. Women are particularly vulnerable to being unable to assert their rights to own land. A community and religious leader from Erigavo district, Sanaag

region, Somaliland stated that *“women encounter property difficulties with regards to the process of getting their rights, in particular divorced women, due to the fact that social norms dictate that they should not be landowners”*. A general challenge mentioned by FGD participants relating to housing security are continuous difficulties with paying rent.

Child Protection Actors are advised to take note of the issues identified by FGD participants in relation to the existence of child labor and overall challenging situations of unaccompanied minors and/or orphans. FGD participants noted that boys work as shoe shiners and girls as domestic workers, which may increase their vulnerability to be subjected to physical assault, sexual abuse and harassment. A man from Beletweyn district, Hiraan region, Hirshabelle state stated that *“girls who work for other families are oftentimes subjected to violence, they are beaten based on the belief that they have stolen”*. FGD participants noted that unaccompanied and/or orphaned children face the risk of being subjected to mental, physical, sexual threats and abuse and violence. They are denied access to education and are involved in criminal activities and/or drug abuse. In addition, unaccompanied and/or orphaned children are vulnerable to early forced marriage and forceful recruitment by armed groups.

Explosive hazards are a danger to people living in locations where explosive remnants have been left undiscovered. An adolescent girl from Kismayo district, Lower Juba region, Jubaland stated that *“because of explosive remnants, you can’t move the way you want”*. According to the FGD participants, the sites mostly impacted by explosive hazards are bridges; roads; pastoral grazing lands; hotels; and business centers.

While GBV specialized services are available, the limitation of these services is apparent: a lack of funding, inadequate targeting of beneficiaries and the failure to consider persons living with disabilities, as well as vulnerable women and girls from minority clans.

Methodology

Data Sources, Collection and Analysis

The challenges with collecting data on GBV issues are well-documented and known within the international aid community. It is particularly challenging collecting data in communities where discussions about GBV are considered shameful and contrary to the culture. For the purposes of the Focus Group Discussions (FGD), the GBV Area of Responsibility (AoR) defined girls and boys as children between the ages of 0-11; adolescents as individuals between the ages of 12-17; adults as individuals aged 18 and above; and older persons as individuals aged 60 and above. Despite ongoing emergencies across Somalia, including the COVID-19 pandemic, the collection of data was successful across the Federal Member States (FMS) of Somalia and Somaliland. Data from quantitative and qualitative assessments were collected in 17 districts, including 23 Internally Displaced Person (IDP) camps, out of 72 districts across the country. Information was collected through a total of 85 FGDs, by 46 protection actors and three GBV expert FGDs, as well as existing secondary literature. FGD participants were disaggregated by age and sex, e.g., adolescent girls and boys (12-17), women and men (age 18 and above).

The aim of the assessments aimed to understand the five following themes:

- Different types of GBV, and other types of violence related to Child Protection (CP), General Protection (GP), Housing, Land and Property (HLP) and Mine Action.
- Availability and quality of and access to specialised GBV services for survivors.
- Coping strategies employed by GBV survivors.
- Movement restrictions for women and girls.
- Risks to women and girls when accessing humanitarian assistance.

Additional information was collected on issues, such as child protection, housing, land and property, as these issues represent grave protection concerns for women and girls in Somalia and Somaliland.

Data Limitations

During periods of peace and normalcy, most community contexts make it difficult for women, adolescent girls and boys, and men to discuss GBV, in particular sexual violence, due to harmful social norms, fear of reprisals and stigma. There is a plethora of challenges associated with reporting and tracking, such as safety to disclose, capacity to collect, conduct and analyse data, identify and account for bias in sourced data, etc. Thus, it is remarkable that both females and males in all datasets highlighted the types of GBV that take place in Somalia and Somaliland. All community FGDs were conducted in Somali and subsequently translated into English. Language undeniably serves as a channel to express a culture and its social norms, thus leaving some words and phrases inherent to that culture which may not have equivalent English translation. Consequently, the richness of the quotes provided post translation into English, may not be captured. Furthermore, English translation is still a growing industry in Somalia, resulting in a limited availability of proficient translators. Lastly, due to time constraints to meet the publication deadline, community FGDs could not be conducted in Afgooye, Dollo and Jowha districts. As a result, the findings reflected in this report do not represent the full scope of operational areas where GBV and other humanitarian actors are implementing interventions.

Analysis of Findings

The ongoing Somalia crisis is one of the most protracted humanitarian crises in the world today and has impacted women, men, girls, and boys in a multitude of ways over the last 30 years. In 2020 and 2021, the crisis, unlike other years, has been characterized by merging emergencies: ongoing conflict; climate related shocks, such as flood and desert locust infestations; and communicable disease outbreaks, specifically cholera, measles, vaccine-derived poliovirus; and a global COVID-19 pandemic. Across Somalia, some 5.9 million people need humanitarian

assistance, with 15 per cent women and 66 per cent children, especially girls, facing particularly high levels of vulnerability.¹ Women and girls that have been born into, raised and continue to live through the crisis are often exposed to different risks and vulnerabilities. Large scale displacements, family separation and economic crisis, such as deep poverty, climate related shocks destroying livelihoods coupled with unemployment, have impacted the way in which women and girls access education, the labor market, and consequently, the roles they occupy within households and communities.

It is therefore imperative that GBV and other humanitarian actors design and implement interventions that take into account the affected population, the types of violence that they face, the coping mechanisms they utilize to address the violence, and the availability and quality of GBV specialized services.

Affected Population

Discussions with FGD participants, revealed that women in general are disproportionately impacted by GBV: an adolescent girl from Gaalkacayo district, Mudug region, Galmudug state stated that *“being a woman living in Somalia has its disadvantages in terms of security and protection. As women, we live with the fear of being sexually abused or discriminated against because we are weak or simply because we are women”*. The FGDs highlighted how no single sub-population of a community is homogenous: there are multiple characteristics attributed to or possessed by women that increase their vulnerability. Women that are poor, were mentioned as particularly vulnerable. Considering high rates of poverty and male unemployment, many women take on primary income earner responsibilities, such as in IDP, rural and nomadic communities, placing many Somali women at high-risk of GBV. Such vulnerability factors are exacerbated when combined with other characteristics, such as age, civil status, (dis)ability, and ethnicity.

“Women with poor families have a high probability of facing sexual harassment and other types of GBV. Due to low family income, they continuously look for jobs to help their family survive. Women who are poor and uneducated, commonly have low-paying jobs, such as housecleaners. Due to the taxing nature of their work, it can increase their vulnerability to many types of violence, such as sexual and psychological abuse, impacting their lives in negative ways.”

- *A woman from Erigavo district, Sanaag region, Somaliland.*

Young and Adolescent Girls

FGD participants noted that the most vulnerable group, prone to suffer various forms of GBV, is young and adolescent girls. An adolescent girl from Berbera district, Woqooyi Galbeed region, Somaliland, shared during the FGDs that *“girls are more vulnerable than boys. In our community there is child neglect, and girls are more vulnerable than boys”*. Furthermore, the low social status of this group places them in positions of vulnerability: *“young girls mostly face abuses because of their social status and their vulnerability being female”*, as described by an adolescent girl from Erigavo district, Sanaag region, Somaliland. According to the FGD participants, young and adolescent girls are forced to abandon their education to seek employment, either as a means of financially assisting their families in meeting their basic needs or decreasing the food insecurity experienced in the home. A community and religious leader from Kismayo district, Lower Juba region, Jubaland explained that *“girls are forced into domestic labour and are never paid”*. Adolescent girls who are pushed to seek employment, may also be subjected to sexual exploitation, occasionally resulting in unwanted pregnancies, or even death. As explained by an adolescent boy from Beletweyn district, Hiraan region, Hirshabelle state: *“girls are sexually exploited, which can result*

¹ Somalia Humanitarian Needs Overview 2021

in unwanted pregnancies and because of how our society treats unmarried, pregnant girls, some of them end up committing suicide". Among the FGD participants, the common denominator for identifying girls and adolescent girls as a vulnerable group is the lack of education. An adolescent boy from Bura'o district, Togdheer region, Somaliland explained that *"girls do not get a good education, they become the servants within their families, which is hindering them from starting or continuing their education"*. A woman from Belet Xaawo district, Gedo region, Jubaland concurred by saying that *"they are the most disadvantaged. Some are forced into early pregnancies and then forced to discontinue their education"*. Poverty, risk of teenage pregnancy and lack of, or discontinued, education is correlated factors among young and adolescent girls. A worsened humanitarian situation further increases the risk of early and forced marriages for this vulnerable group.

Divorced and/or Widowed Women

FGD participants noted that divorced and/or widowed women are particularly vulnerable to violence, as they are forced to work to meet the basic needs of their families. An adolescent girl from Laasanod district, Sool region, Somaliland explained that *"there is a difference between divorced and married women when it comes to facing*

violence. Married women always stay at home, but divorced women are forced to work outside of the home and are therefore at greater risk of experiencing violence". Divorced women who are forced to seek employment to meet the basic needs of their families may be targeted and run the risk of suffering violence, due to stereotypes persisting within societies, characterizing women and girls as weak. A woman from Kismayo district, Lower Juba region, Jubaland noted that divorced women *"already struggle to raise their kids alone, and on top of that they are targeted since they are considered to be weak and lack protection"*. Other community perceptions of divorced and/or widowed women include them being open to any invitation to a romantic/sexual relationship with hopes of it leading to marriage. A woman from Belet Xaawo district, Gedo region, Jubaland explained that *"widows and divorcees face a lot of challenges since the society believes they are in the market looking for spouses. In the process, they fall prey to so many obstacles: some are raped while others are physically assaulted"*. An adolescent boy from Baletweyn district, Hiraan region, Hirshabelle state further highlighted this by explaining that *"divorcees and widows are also major victims exploited by men who promise their hand in marriage, but who eventually end up assault them"*.

Women and Girls with Disabilities

"Disabled women and girls do not have the power to fight for themselves. It is even worse for those who have a mental disability, those who cannot even talk about what happened to them. We have seen cases of disabled women who were sexually assaulted, resulting in pregnancies, and who cannot even explain who their perpetrator was."

- An adolescent boy from Baletweyn district, Hiraan region, Hirshabelle state.



According to the FGD participants, women and girls with disabilities – be it physical, mental or intellectual - are often perceived to be more vulnerable to GBV, as they may be unable to defend themselves, communicate effectively or report cases of exploitation, sexual harassment and abuse. A woman from Kahda district, Banadir region, Hirshabelle state explained that *“violence is very different for people with disabilities because they are the most vulnerable and cannot help themselves. We know of many situations where disabled girls have been raped”*. Another female FGD participant from Kismayo district, Lower Juba region, Jubaland further noted that *“it is different for them [women and girls with disabilities] because there is no male figure to protect them, and they are targeted mostly because people see them as weak”*. Recent reports indicate that persons living with disabilities in Somalia, in particular women and girls, are consistently marginalized and overlooked with regards to access to humanitarian assistance, including their participation, or lack thereof, in consultations on methodologies for the deliverance of such assistance. It is imperative for humanitarian and development actors to implement deliberate strategies to ameliorate these difficulties and better protect women and girls living with disabilities.²

Older Women

The FGD revealed that older women are a particularly affected segment of the population, as they are perceived as weak while they may also have age-related disabilities, such as loss of vision, hearing, and difficulties walking, in addition to chronic illnesses. An adolescent boy from Bosaso district, Bari region, Puntland shared that *“older women experience greater loss of functional abilities than men, including poor vision and hearing loss and are less likely to receive treatment or supportive aids for these conditions”*. Based on accounts from FGD participants, older women are seemingly not prioritized to receive humanitarian assistance and may thus be suffering devastating impacts due to their age and gendered disparities, ultimately increasing their vulnerability.

“Older people are more vulnerable to violence because they may already have a physical disability; maybe they have a chronic disease, such as diabetics, stroke, or other diseases. Abuse can also lead to physical injuries, ranging from minor scratches to broken bones and disabling injuries. Abuse against elders can also lead to psychological consequences, including depression and anxiety. For older people, the consequences of abuse can be especially serious, and rehabilitation takes longer.”

- A woman from Erigavo district, Sanaag region, Somaliland

Ethnic Minorities and IDP Women

FGD participants noted that IDP women and/or girls from ethnic minority groups are an affected population. A woman from Daynille district, Banadir region, Hirshabelle state explained that *“minority groups are more effected since they are sometimes discriminated because of their social background. For example, when it comes to rape cases, they are handled differently depending on the woman's social background: when a woman belonging to the local community is raped, it is always more serious, compared to when it happens to a woman in the IDP camp”*. Female IDPs and/or women from ethnic minority groups face further discrimination with regards to access to education, health services, employment and political participation, due to their intersection with gender, ethnicity and displacement status. A community and religious leader from Garowe district, Nugaal region, Puntland explained that *“there is social discrimination based on clannism and social profiling. The community judges everyone based on his/her clan and social group, which prevents the people to access education, health care, political participation, and employment.”*

Men and Boys

FGD participants mainly referred to men and boys as perpetrators in the areas of discrimination based on ethnicity and economic violence, such

² Minority Inclusion Learning Review of the Ministry of Foreign Affairs of Switzerland, July 2021

as exploitation. However, at least one participant noted that men too experience domestic violence: *“in my view, it is not only women who face challenges with violence, men do too. We have heard of cases where men were physically assaulted, and some were burnt by their wives”*, as explained by a woman from Belet Xaawo district, Gedo region, Jubaland). In Somalia, silence around men being subjected to GBV is deeply entrenched in social norms and practices, as is the social conditioning of men and boys to align with traditional male gender roles, behavior, authority and social value. These issues contribute to the under-reporting of male cases GBV and discourage men and boys from seeking and utilizing available services for healing and recovery.

Types of Gender-Based Violence

FGD participants identified sexual violence as the type of violence most commonly impacting women, adolescent and young girls, in particular rape, gang rape, FGM/C, sexual harassment, sexual assault and sexual exploitation. Similarly, FGD participants identified domestic violence to include physical violence, homicide, early forced marriage, denial of resources, economic violence, including exploitation, honor killing, in addition to an emerging trend known as cyber violence.

Sexual Violence

Rape, gang rape and homicide

“In our country, the most frequently occurring gender-based violence is rape.”

- Community/Religious Leader Garowe district, Nugaal region, Puntland

“Rape, gang rape, and sexual assault occurs in Somalia, and in Puntland. Last month nine men raped a woman in Puntland”.

- Man from Garowe district, Nugaal region, Puntland.

FGD participants overwhelmingly stated that rape is the type of violence that women and girls are most vulnerable to. As stated by a man from Dhahar district, Sanaag region, Puntland, *“one of the most common forms of violence in the district is rape. Women are raped in their homes while their family is away”*. FGD participants also noted that rape and gang rape are closely linked to homicide and murder. A woman from Gaalkacayo district, Mudug region, Galmudug state explained that *“there are different types of GBV in Somalia. Previously, girls used to get raped, but today they are raped and later murdered. Rape and gang rape is now often followed by the perpetrators murdering their victim, as they are afraid of being convicted”*. FGD participants noted that rape is also perpetrated against boys, but that is very rare. An adolescent boy from Borama district, Awdal region, Somaliland shared that *“sometimes boys experience rape, but there are not many cases in the country, it is very rare”*. The progression of rape to murder is explained by FGD participant to be prodded by the perpetrators' fear of prosecution. It is important to note that Somaliland and most of the FMS states rely on the obsolete penal code for prosecution of perpetrators. Only the state of Puntland has progressed to implementing the sexual offenses legislation that was enacted in 2018. The indifference of the justice system; a fear of secondary stigmatization by survivors of GBV; the dire process of obtaining and preserving forensic evidence; the lack of capacity of the police to properly support rape survivors; in addition to the pressures from clan heads and relatives to use community arbitration processes to settle cases of GBV, contribute to discouraging women and adolescents girls and boys from reporting rape and other cases of GBV.

Sexual Assault and Harassment

It emerged from the FGD that women and girls are subjected to sexual assault in places where they expect safety, such as camps. An adolescent boy from Baletweyn district, Hiraan region, Hirshabelle state explained that *“I'm always afraid for my young sisters. I'm afraid that they may be sexually*

assaulted, even now when a lot of new people are moving to the camps". Anecdotal reports indicate that there has been an increase in cases of sexual assault and harassment towards adolescent girls, due to their age and social value. Physical living conditions and long distances to fetch water and firewood predisposes adolescent girls to sexual harassment and abuse, as they support families in domestic chores. FGD participants also noted that women and girls experience sexual harassment when walking to various locations. An adolescent girl from Kismayo district, Lower Juba region, Jubaland relayed that *"when you walk along the streets, many boys and men forcefully demand to talk with you. If you ignore them, you may face consequences. Or sometimes, you feel forced to talk with them, which affects you psychologically"*. The FGD participants also identified check points as a site where one can be subjected to sexual harassment. A community and religious leader from Dhahar district, Sanaag region, Puntland noted that *"it happens that people are harassed at checkpoints. Women are more likely to be harassed, just like women may be harassed in their hometowns"*.

Sexual Exploitation and Abuse (SEA)

The FGD participants identified male teachers and employers as common perpetrators of sexual exploitation of women and girls. A woman from Berbera district, Woqooyi Galbeed region, Somaliland noted that *"teachers try to give an unfair mark for girls, as opposed to boys, as a means to sexually exploit them"*. Community and religious leaders from Kahda district Banadir region and Qardho district, Bari region, Puntland further explained that *"young girls are forced to have sex with their employers in order to secure jobs"*. Domestic workers are among the most vulnerable to SEA, due to their powerlessness and status, vis a vis their employers. In the words of an FGD adolescent participant from Gaalkacayo district, Mudug region, Galamudug State *"domestic female workers are used to exchanging money for sex. The perpetrators will offer the domestic female worker money in exchange for her body"*.

Female Genital Mutilation/Cutting (FGM/C)³

"The other sad issue in this area is that girls are still subjected to FGM. A week ago, my neighbor's daughter was subjected to the cut, and she nearly lost her life, she was bleeding for a week. Despite conducting civic education, it seems it has not yet ended", as explained by a woman from Daynille district, Banadir region, Hirshabelle state. While some FGD participants noted that the prevalence of FGM/C has decreased, others maintained that FGM is still an issue of concern and that it continues to take place, due to the perceptions that FGM improves marriageability and chastity for young girls. It is also perceived by some in Somalia as a religious obligation, as well as practice that strengthens social and cultural affinity. Furthermore, the culture in Somalia and Somaliland pertaining to male duty of care within a marriage is regarded as significant for women. While clan-protection remains fundamental to the protection of women and girls, the protection resulting from conjugal relationships is more central to improving the status of women in Somalia. Thus, there is a strong value attributed to marital status in Somalia and Somaliland, which compels families to ensure that their female children are marriageable by subjecting them to FGM as a qualifier for marriage.⁴

Domestic Violence

"Women face physical assaults from their spouses after disagreement. A lot of cases are reported, but some are left unreported as according to traditions women should tolerate every aspect of hardship in life".

- A woman from Belet Xaawo district, Gedo region, Jubaland

FGDs revealed that women and girls face domestic violence, specifically physical violence. An adolescent boy from Kismayo district, Lower Juba region, Jubaland explained that *"violence happens to women in their homes. Women can sometimes be beaten by their husbands after they quarrel over the family issues"*. A father,

³ As FGM/C directly affects the sexual organs of women and girls, it has been classified as a form of sexual violence per the GBV Information Management System (GBVIMS).

⁴ For further elaboration on FGM, see the section on Female genital mutilation/cutting (FGM/C) on page 9.

COVID-19 and Types of GBV in Somalia GBV AoR GBV/FGM Rapid Assessment, July 2020	
	Out of the 756 community members surveyed, 38 per cent indicated that there had been an increase in GBV incidents, compared with the period before the COVID-19 pandemic.
Women	Out of 318 service providers surveyed, 14 per cent noted an increased risk of physical violence in the home; 12 per cent indicated increased household chores and increased psychosocial stress respectively, while 11 per cent noted increased risk to intimate partner violence.
Adolescent Girls	Out of 318 service providers surveyed, 16 per cent indicated that girls' studies were disrupted; 13 per cent noted increased household chores; 10 per cent said that girls had less play time/socialization; 10 per cent indicated increased psychosocial stress, while 9 per cent affirmed increased risk of physical violence and increased risk of early marriage in each category. Furthermore, 7 per cent of the service providers surveyed indicated an increased risk of sexual violence/abuse; 5 per cent increased risk to paid labour; 4 per cent identified girls having increased risk of attack when going to market or walking in isolated areas; and 3 per cent increased risk of attack when visiting latrines/bathing facilities.
Men	Out of 318 service providers surveyed, 10 per cent affirmed violence in the home.
Adolescent boys	Out of 318 service providers surveyed, 18 per cent of adolescent boys noted increased psychosocial stress; 13 per cent mentioned less play time/socialization; 11 per cent stated increased risk to paid labour; 11 per cent increased risk to physical violence; 7 per cent increased household chores; and 6 per cent increased risk of sexual violence/abuse.

from Kahda district, Banadir region, Hirshabelle state, spoke of some personal experiences of domestic violence in his own family: *“violence against women is a reality. My own daughter was physically assaulted by her husband. She ended up divorcing her husband who refused to give her, her rightful dues. She now lives with me in my house. I had to pay for her medication, the situation is very sad”*. The root cause for domestic violence was identified by the FGD participants primarily as a limitation of financial resources to support families. Multiple displacements caused by floods, and loss of livelihoods, have compromised the resources available to families to meet their basic food, medical and other needs. The struggle to prioritize spending of scarce financial resources in families have led to increased tensions, especially

in situations where men have lost respect as head of households and primary provider. FGD participants noted that domestic violence stems from financial problems within households, explained here by a man from Erigavo district, Sanaag region, Somaliland: *“sometimes there is domestic violence in the home and sometimes it can bring, or be caused by, financial problems in the household. Sometimes wives blame their men for being irresponsible and unable to provide for their basic needs. This can result in men feeling discouraged and disappointed which may lead to couples fighting”*. GBV has led to an increase in the prevalence of divorces, as well as a weakened protection for divorced women due to lack of male protection.

Early/Forced Marriage

FGD participants noted that early/forced marriages are occurring in Somalia and Somaliland. Oftentimes it is a matter of girls being forced to marry much older men who offer money and/or a so called “bride price”. In Somalia and Somaliland, these marriages mostly occur as a means by poor families to reduce the number of mouths to feed. It is understood as a form of social security: older, financially secure men are regarded as good choices to cushion the burden of providing for poor families in-law. A lack of strong legal protection against early or forced marriage, the Somali girl child or adolescent has very little say in when to get married, whom to marry, when to have children and the number and spacing of her children.

Denial of Resources

FGDs noted that a denial of resources, specifically with regards to education, is experienced by girls in Somalia and Somaliland. Despite efforts to improve access to and retention in formal schools for female children and adolescent girls, there remains a stronghold of cultural practices in which it is preferred that sons access education as a right and a resource to improve opportunities for better income and livelihood options. An adolescent boy from Bosaso district, Bari region, Puntland explained that *“educating girls and women improves health outcomes. Despite progress made over the last years however, girls are still less likely than boys to attend school”*. The implication of having generations of illiterate women and adolescent girls in Somalia, eliminates the opportunities of improving the health and lives of families and children, given the global recognition that educating girls yields better outcomes for the overall health and wellbeing of communities. In IDP camps and host communities in Somalia, efforts to keep girls in school are yet to yield better returns because of dwindling family resources. Most poor families can barely afford to feed their families and will quickly sacrifice the education of girls to plough scarce resources to other competing needs.

Economic Violence

FGD participants noted that women, girls, men and boys face different forms of economic violence. Information emerging from the assessment indicate that husbands and fathers take over the earnings and income of women. While this does not appear to be cultural or religious, it may be a result of loss of livelihoods of men and food insecurity among poor families, as well as men’s effort to assert authority in such challenging times. In Somalia, it is recognized that women more outside the home to look for casual or formal jobs. A female FGD participant from Qardho district, Bari region, Puntland noted during the discussions that *“women and girls are not treated fairly as their earnings are forcibly taken away from them”*, while a male FGD participant from Berbera district, Woqooyi Galbeed region, Somaliland lamented that *“young people, both boys and girls, work under exploitative and challenging situations. Youth face difficulties in terms of working hours that do not match the salary that is received”*. This issue was emphasized by an adolescent girl from Daynille district, Banadir region, Hirshabelle state who shared her experience while working as a domestic help: *“there was an incident that happened to me two months ago with a family I was working for, for eight months. They were constantly beating me when I made some small mistakes. Sometimes I was injured, and no one bothered to take me to hospital. When I was leaving, they refused to give me the wages they owed me.”*

Cyber Violence and Forced Abortion

FGD participants noted that cyber violence has emerged as a new modality of harassing and molesting women and girls. Cyber violence may occur as publishing photos of girls and women who have been sexually assaulted, as a way of humiliating them. These actions result in the stigmatization of the survivor and them potentially being rejected by their communities. In the worst case it may lead to the survivor committing suicide. A female FDG participant from Kahda district, Banadir region, Hirshabelle state recounted that *“there was a girl who was*

Cyber Violence, a New GBV Trend in Somalia

"There are lots of violations and abuses such as recording sexual videos and then using it to blackmail girls and women."

- Community and religious Leader Gaalkacayo district, Mudug region, Galmudug state.

sexually assaulted, and her photo was used to tarnish her reputation within the community. She committed suicide by hanging herself, because of the shame that people made her feel". GBV experts from Puntland have also noted this new trend, in addition to the issue of forced abortion. A GBV expert from one of the Federal Member States in Somalia noted that forced abortion is an emerging issue of concern, of which GBV actors should be aware. Accounts of parents and relatives forcing their pregnant adolescents' daughters to undergo abortion have been reported, especially when the pregnant female is considered unable of taking care of their future child, or in cases of the pregnancy affecting their potential of getting married, or if there is a risk of them absconding.

Consequences of GBV on Women and Girls

"We feel unsafe, and we are used to the violence. You cannot even get out of the house, and if you do, you will be mugged and killed. We are fearing for our lives. We are confined in our homes."

- Adolescent girl from Baletweyn district, Hiraan region, Hirshabelle state

The findings from the assessment revealed the causes of and explanations for why violence has become normalized in Somalia and Somaliland. The normalization of violence and corresponding risk factors is foremost a result of years of general insecurity. The consequences of such insecurity, general violence and GBV on women and girls may vary but are often inter-linked. For instance, physical, psychological and social impacts can be linked to the violence that women and girls may have been subjected to. There are serious health consequences, and even death, resulting from excess bleeding, due to female genital mutilation/cutting. A community and religious leader from Kismayo district, Lower Juba region, Jubaland explained during the FGD that girls are taken to the hospital because of excess blood loss, due to FGM. In addition, an adolescent boy from Daynille district, Banadir region, Hirshabelle state noted that many adolescent girls contract sexually transmitted infections after being subjected to sexual violence, from early marriage practices and FGM. FGD participants similarly explained that early forced marriage, and subsequent early pregnancy, most often leads to school desertion as the survivor must stay home to take care of her husband and their home. According to a woman from Belet Xaawo district, Gedo region, Jubaland *"girls face forced marriages while still in school, which has forced many girls to drop out of school to stay at home and create families, resulting in their futures being jeopardized"*. FDG participants also revealed that divorce can be a consequence of early/forced marriage, given the lack of mutual consent for the marriage contract. An adolescent boy from Qardho district, Bari region, Puntland explained that *"marrying girls at a young age will cause misunderstandings between her and the man."*

Shame and stigma can permanently taint the lives of women and girls who have experienced sexual violence and damage their prospects for marriage in Somalia. An adolescent girl from Berbera district, Woqooyi Galbeed region, Somaliland recounted that *“the rape of a girl affects her prestige in society, and she may not get married in the future”*. Negative branding and secondary stigmatization of women and girls who have experienced GBV, prevents survivors from reporting or seeking services for healing. In addition, stigma because of rape, can prevent a woman from attracting future suitors for marriage. As a result, there is a reluctance to report and seek justice for survivors of rape. A man from Belet Xaawo district, Gedo region, Jubaland informed that *“girls are called names, which will not portray a good image in the community when they have become pregnant after being raped.”* Similarly, family rejection may occur, as in many circumstances communities look down upon the family of a girl who has experienced sexual violence. An adolescent boy from Kismayo district, Lower Juba region, Jubaland explained that *“sexual violence does not only destroy the girl’s status, but also the reputation of the girls’ family”*. Furthermore, psycho-social trauma was identified as a major consequence for women, girls, boys and men fleeing violence. Traumatic experiences, such as the death of a loved one; sexual violence; loss of livelihoods; loss of self-esteem for both women and men, affect their functioning as human beings to contribute meaningfully to the socio-economic development of Somalia and Somaliland. A female FGD participant from Bosasso district, Bari Region, Puntland emphasized that *“survivors of rape and sexual assault can experience psychological stress, one of the most common being depression and in some cases suicide”*. An Adolescent boy from Gaalkacayo district, Mudug region, Galmudud state concluded that *“psychological trauma can have a lifetime of personal [repercussions] on the victims, which will have negative impacts on their lives in terms of decision making and planning their futures”*.

“There was a young girl who committed suicide by poison after she discovered that she was pregnant, because she feared the community and her family. When the matter was investigated, it was confirmed that a man who promised to marry her involved her in premarital sex. She hung a rope from the ceiling and was found dead in the room”.

- Man from Kismayo district, Lower Juba region, Jubaland.

Coping Strategies

The assessment revealed the existence of both negative and positive coping strategies among Somali women, girls, boys and men, including disclosure, family support, community mediation, silence, access to GBV services, fleeing and suicide.



PHOTO CREDIT: UNFPA SOMALIA

Negative Coping Strategies

FGD participants noted that women and girls who have experienced sexual violence may not seek support or help, because they fear stigmatization and shaming, in addition to fearing the rejection by their families. A woman from Qardho district, Bari region, Puntland recounted that *“many girls hide or do not report incidents, due to feelings of self-shame and fear of the negative reaction by their family and the community”*. In other instances, GBV survivors do not disclose to the formal justice system, but rather through community arbitration mechanisms that do not adequately protect their rights to justice or apply the principles of confidentiality. In Somalia and Somaliland, GBV survivors are compelled to use these mechanisms to achieve social sanctions or less visible family community rules, which are perceived, by the vanguards of these rules, to protect community cohesion. This intervention mostly ends in mediation and arbitration with the sole purpose of ensuring that the incident is kept within the bounds of community and/or family action, and do not escalate to the formal justice system. By evading the formal justice system, the survivor is not assured their right to justice. A woman from Daynille district, Banadir region, Hirshabelle state noted that *“the community mindset on sexual violence is so bad that sometimes when cases of violence happen it is hidden. Cases are taken to the traditional leaders who sometimes do not give the support to the victim, which negatively affects the victim psychologically.”*

“In Puntland, or Somalia in general, there are certified psychologists that can give psychosocial support to the victim. But people are feeling ashamed to ask for support. For example, if a girl is raped, she will hide the fact that it happened to avoid being shamed by the community, or for her parents to tell her not to speak about the rape because then no family will let their son marry you”.

- Adolescent girl from Garowe district, Nugaal region, Puntland.

Another coping strategy that emerged from the assessment, is the action of fleeing or running away from home and/or community, as well as marrying the perpetrator. Changing one's location is used as a way of diffusing stigmatization, as well as avoiding reprisals from perpetrators. An adolescent girl from Baletweyn district, Hiraan region, Hirshabelle state explained that *“a woman who is a victim of rape, either moves to a different place and sometimes she gets engaged or marries the perpetrator”*. Movement restriction and the movement of girls accompanied by male family members was identified as a coping strategy. An Adolescent girl from Daynille district, Banadir region, Hirshabelle state noted that girls often use this strategy to ward off expected sexual harassment and abuse. She explained that *“during the day, when women go to the neighborhood to fetch firewood, they are mostly accompanied by men and boys to protect them along the way”*. Findings from the assessment also indicate that female survivors of rape often contemplate or commit suicide because of the isolation, shaming and rejection from families. An adolescent girl from Beletweyn district, Hiraan region, Hirshabelle state noted that *“in cases of rape or defilement, some commit suicide”*. In addition, violence may be used by the survivor's family to “revenge” the rape of their sister and protect her honor. A male respondent from Kismayo revealed that district, Lower Juba region, Jubaland explained that *“the brother of the raped girl may gather armed men and create an atmosphere of unrest. Apart from that, the clan of the raped woman or girl may rage violence against the rapist's family”*.

Restrictions of Movement and Freedom

Restriction of movement is often used as a coping mechanism to tackle GBV and insecurity. Parents and communities limit the movement of women and girls, as well as persons with disabilities, older persons and ethnic group minorities, for the fear of them being attacked, sexually harassed or abused. The consequences from these negative coping mechanisms include the restriction of access to services, such as GBV services, and opportunities, such as schooling.

The findings from the FGD indicate that many beneficiaries suffer from restricted access to GBV and humanitarian services.

It is important to note that some FGD participants recounted feeling free to move and travel most parts of the country. An adolescent boy from Berbera district, Woqooyi Galbeed region, Somaliland explained *“we have an ability to go freely everywhere, especially in the city surroundings. We visit everywhere in Berbera without fear”*. On the other hand, however, other FGD participants noted that insecurity makes it difficult to leave one’s home without fear. An adolescent girl from Bosaso district, Bari region, Puntland gave the opposite account: *“adolescent girls are not protected in our society and are not free to go anywhere”*. A woman from Kismayo district, Lower Juba region, Jubaland verified the former account. She explained that *“women and girls cannot move at night, it is dangerous. They often feel insecure and unsafe”*. Movement restrictions were also attributed to the spread of the COVID-19 pandemic. An adolescent boy Kismayo district, Lower Juba region, Jubaland noted that *“since last year, schools were closed due to the virus. When the schools were closed there was little violence committed compared to when the schools were open”*. Insecurity during crisis similarly increase incidents of GBV, such as rape, which forces movement restriction, whether self-imposed or by families. An adolescent boy from Kismayo district, Lower Juba region, Jubaland explained that *“girls cannot freely move at night, they risk getting raped and being physically abused”*.

It is important to note that a GBV AoR Rapid GBV/FGM assessment conducted in July 2020 revealed that movement restrictions implemented to curb the spread of COVID-19 impacted the source of income of some 15 per cent of 243 female respondents.

Due to fear of harassment and violence, most parents prefer that their female children are accompanied by male relatives as they go long distances, as a protective measure. A man from Dhahar district, Sanaag region, Puntland

informed that *“there is no freedom of movement and parents make sure that girls are traveling with male family members, such as her brother or nephew or relative. It is not safe for her to go alone on long road trips”*. This statement was emphasized by another man from Gaalkacayo district, Mudug region, Galmudug state who explained that *“women and children cannot travel alone, unless they travel with males guarding them to be safe”*.

Some of the consequence of not restricting people’s movements are arbitrary arrests or detentions, *“boys can especially be targeted by patrol soldiers that arrest them without cause”*, as explained by a Community and Religious Leader from Laasanod district, Sool region, Puntland. FGD participants noted overwhelmingly that movement restrictions are necessary as another consequence of not restricting movements can be sexual harassment at places such as checkpoints: *“it happens that people are harassed at checkpoints, and women are more likely to be harassed, just like women may be harassed in her hometown”*, as explained by a Community and Religious Leader from Dhahar district, Sanaag region, Puntland.

Positive Coping Strategies

COVID-19 Coping Strategies for GBV

GBV AoR GBV/FGM Rapid Assessment, July 2020

Out of 756 respondents, 40 per cent stated that they would report incidents of GBV to a family member; 23 per cent would report to a community leader; 18 per cent would report to the police; eight per cent would report to an NGO working with women; four per cent would report to any female aid worker; three per cent would report to a friend; and three per cent do not know where to report. Two per cent of the respondents relayed that they would report to ‘other’ sources, and one per cent relayed that they would report incidents of GBV to an UN agency.

Discussions revealed that girls may seek support from their mothers and women networks, *“girls report to their mothers or other older women in the community when violence happens to them”*, as informed by an adolescent boy from Kismayo district, Lower Juba region, Jubaland. Girls may also seek support from their friends: *“girls seek help and share problems with their friends if the problem relates to the family”*, as explained by an adolescent girl from Bura’o district, Togdheer region, Somaliland. Boys on the other hand will reach out to their parents: *“when this problem faces boys, they don’t know where they can go for help. But they will always tell their parents to get exactly the help they need”*, as informed by an adolescent boy from Erigavo district, Sanaag region, Somaliland. Some women and girls may use self-defense: *“it is good to teach girls self-defense and how to protect themselves. Girls learn to be wary of their surroundings”*, as explained by an adolescent girl from Baletweyn district, Hirshabelle state.

Survivors of GBV may also be taken to health services for treatment: *“in cases of rape or defilement, we take the victim to hospital and treat their wounds if they were stabbed or beaten”*, as explained by a community and religious leader from Kahda district, Banadir region, Hirshabelle state. Psychosocial support services are reportedly also utilized: *“when violence, such as rape happens to girls, they are first given counselling to build up their psychology and morale”*, as explained by a community and religious leader from Baletweyn district, Hirshabelle state. A man from Hargeisa district, Woqooyi Galbeed region, Somaliland noted that some survivors access the formal justice system: *“men are often stronger than women and children, and when they face abuses they use their coping mechanisms, or they seek help through law and security”*. Others may use community mechanisms, third party mediation or through camp committees, as noted by a community and religious leader from Garowe district, Nugaal region, Puntland: *“community elders*



usually solve the abuse cases, and the community supports them with the final decision". However, this mechanism can have negative consequences for the survivor, since the objective is not necessarily to get justice for the survivor, but to pacify the survivor by offering some form of compensation for the harm caused. This mechanism may also embolden the perpetrator to continue to implement actions that will endanger the safety of the survivor and other women and adolescent girls. A community and religious leader from Daynille district, Banadir region, Hirshabelle state affirmed that camp committees provide good support to women and adolescent girls who have suffered GBV. He said that *"most of the small cases that happen within the camp are resolved at the committee level within the camp and do not end up with the police. The committee sits and calls both sides, listens to each side of the case and reaches a conclusion. If the committee cannot reach a conclusion, then the case is transferred to the police who will take up the case"*.

Availability and Quality of GBV Response Services

For survivors to access the services they need, outreach efforts and awareness raising within communities must occur. When such measures are in place, survivors' awareness and trust in services increases, which leads to a stronger collaboration between service providers and the presence of confidential and safe referral system. Nevertheless, the spread of COVID-19 in Somalia presented challenges for GBV service provision. During the peak of COVID-19 restrictions and protocols, the 756 community members surveyed through the GBV AoR GBV/FGM rapid assessment revealed the impact on service provision and access for GBV survivors. In the following pattern they reported that 24 per cent had access to medical and health services, 20 per cent had access to Psychosocial Support (PSS) services, and 18 per cent had access to Safety and Protection services. These services received the highest ratings since they are basic services

that most GBV service providers offer to the survivors of GBV. The respondents also mentioned access to Prevention (17 per cent); Legal aid/ access to justice (11 per cent), GBV Hotlines (7 per cent). Two per cent of the respondents reported having access to 'other' and 'none of the mentioned' services. Furthermore, out of the 318 service providers surveyed, 83 per cent noted that they suffered a 1-20 per cent reduction in capacity; three per cent indicated a 21-40 per cent reduction; eight per cent indicated a 41-60 per cent reduction; four per cent indicated a 61-80 per cent reduction; and two per cent indicated more than a 80 per cent reduction in capacity (GBV AoR GBV/FGM Rapid Assessment, July 2020). The FGDs conducted by GBV experts for this report affirmed that there was a reduction in service provision: *"targeted programming was not fully achieved due to the adverse challenges caused by the COVID-19 pandemic. GBV cases were reported, but the survivors could not access services, as the centers were not operational. In some instances, the community was not reporting the cases, due to stigmatization"*. Nevertheless, efforts are continuously made to address gaps, as living conditions and interactions return to normal as the population in Somalia continues to receive COVID-19 vaccinations.

While the COVID-19 pandemic created huge challenges to service availability and accessibility for many beneficiaries, GBV experts interviewed for this assessment noted that there are still gaps in service provision not linked to COVID-19. A lack of funding was identified as a major barrier to broadening service provision in Somalia. A GBV expert from Mogadishu informed that *"limited funds could not cover all the needs of the population intended to be reached"*. Another GBV expert noted that, in addition, neither is program design inclusive of women or girls prone to other vulnerabilities, such as a disability, and most beneficiaries in remote areas do not have access to many specialized GBV services.

During the FGD, community member participants mentioned the services available and accessible



to them, while also noting similar gaps as those highlighted by GBV experts. Services identified as available in some areas, but suffering gaps include medical, psychosocial support services and women and girls' safe spaces. A female participant from Belet Xaawo district, Gedo region, Jubaland testified to the importance of and need for psychosocial services: *"some organizations provide psychosocial support to the survivors, and this has had a positive impact on community awareness on GBV"*. Services identified as less available include GBV shelters and to some extent legal services and information. While some FGD participants highlighted the lack of safe spaces for women and girls, others agreed that there are available community centers where people can gather and discuss violent experiences to enable healing, build friendships and learn how to protect themselves from GBV. A community and religious leader from Kismayo district, Lower Juba region, Jubaland disagreed and explained that *"there are no safe spaces in place to cater for children, women, older persons, PWDs and vulnerable women, nor are there places to deal with survivors of violence, or a place to live or a place for children to play"*.

Nevertheless, FGD participants inferred that the government uses penal code in situations when there are no sexual offences legislations to facilitate access to justice for GBV survivors. A female FGD participant from Berbera district, Woqooyi Galbeed region, Somaliland informed that *"families access legal services in government institutions, and some justice actors providing specific legal services to GBV survivors"*. An adolescent boy from Gaalkacayo district, Mudug region, Galmudug affirmed this by stating that *"there is justice service available for the GBV victims, and protection laws are available to protect them"*. FGD participants also noted that the level of security has improved in IDP camps in some locations and that police has responded adequately to some of the reported GBV cases. A community and religious leader from Daynille district, Banadir region, Hirshabelle state noted that *"in recent time, we feel the presence of security personnel and they normally deal with threats like armed militias. I can say that the security in the camp has improved"*. Another community and religious leader from Berbera district, Woqooyi Galbeed region, Somaliland also noted that *"survivors report their cases to legal authorities, such as the police and courts working for the city, and they do their best to follow up on these cases"*.

FGD participants believed that GBV awareness sessions are routinely conducted, especially with regards to how to access services, mitigate and prevent GBV. This may have reduced the prevalence of GBV and mitigated the impact for those affected. According to an adolescent boy from Gaalkacayo district, Mudug region, Galmudug state *“awareness-raising is conducted in our community towards gender-based violence, and communities are informed about how to act if anyone experiences any kind of abuse”*. Despite these efforts, FDG participants expressed a need for a more sustainable education, sensitization and awareness on GBV. A woman from Daynille district, Banadir region, Hirshabelle state explained that she believes *“the civic education has helped a lot and we have great improvement, however we still need to continue with more efforts to eradicate it [GBV]”*.

Gender and Vulnerable Groups

An adolescent female FGD participant from Bosaso district, Bari region, Puntland noted that women do not always receive adequate priority when they seek GBV services: *“the first risk that women face when receiving help is that they do are not prioritized, rather priority is given to men”*. FGD participants furthermore noted that that in some districts, persons with disabilities, older persons and divorced and/or widowed women do not have access to services addressing their needs.

Quality of Services

FGD participants noted several challenges with the quality of services provided to GBV survivors, including a lack of follow-up for case management, treatment of physical injuries, and clinical management of rape. An adolescent girl from Garowe district, Nugaal region, Puntland explained that *“most of the time, victims are interviewed and registered by the authority and humanitarian agencies, but it is rare to see that the case is followed through the entire process, from the interview until the case is solved. I believe that only 10 per cent receive full attention and support”*. A possible explanation to this statement could be a

“We know that victims of abuse receive support from humanitarian agencies and family members, but a few days later everyone forgets her or him and life goes on”.

-An adolescent girl from Garowe district, Nugaal region, Puntland

lack of human resources dedicated to providing such services. It could also be due to a major gap in ensuring client satisfaction and proper case closure. Given the significance of follow-up in assuring quality of services, this area should receive attention and immediately be improved.

FGD participants further noted the lack of health facilities, skilled health workers providers, limited humanitarian assistance, in particular the provision of psychosocial counselling and support, to meet population needs. An adolescent boy from Gaalkacayo district, Mudug region, Galmudug state explained that *“in my community, there is no more awareness around or psychosocial support for GBV survivors. Neither is their financial support service available for the survivors”*. An adolescent boy from Erigavo district, Sanaag region, Somaliland affirmed this statement by explaining that in his district *“there is no psychological counseling or hospital in Erigavo for children to get their rights”*.

An additional area identified as needing further enhancement under safety and security, is the attitude of the police and their capacity to manage GBV survivors, to ensure that their rights are respected and followed up on in terms of prosecution. FGD participants expressed a need for further improvement in this area, especially for the rural areas. An Adolescent boy from Bura’o district, Togdheer region, Somaliland noted that *“violence always happens in rural areas because people are illiterate, but there is also no safety services and the police stations do not work”*. In Somalia and Somaliland, the

GBV AoR partners have in recently prioritized collaborations with the police to improve the collection and preservation of forensic evidence from rape incidents, to better manage GBV survivors using the survivor centered approach and implement existing legislation in Puntland. Efforts have also been made to integrate police focal points in existing referral pathways, to improve reporting and action.

Access to Justice

GBV experts in Puntland noted that perpetrator impunity may be impeding the healing process for GBV survivors: *“injustice and lack of punishment for the perpetrator is affecting the healing process”*.

“I think the biggest reason survivors take compensation money is that they do not trust the current justice system, since the probability of GBV perpetrators being convicted is very low. However, in most cases, victims receive less than 30 per cent of the compensation, since clan elders take 70 per cent”.

– Community and religious leader from Gaalkacayo district, Mudug region, Galmudug state.

FGD participants furthermore noted the lack of capacity by some justice actors: *“the legal authorities in our country do not have enough capacity”*. A community and religious leader from Bura’o district, Togdheer region, Somaliland explained that *“most of the cases are reported and justice is served for the victim. The government may not be that strong, but it does follow up on abuse cases”*. While GBV survivors may feel that they have no choice but to accept the findings through informal justice mechanisms, GBV experts have noted that some women may defy rulings they consider unjust: *“we have seen cases where some women defied clan elders who wanted to settle sexual offences cases outside of court. The women went ahead to seek justice through the support of an NGO, and the case was prosecuted in the court, resulting in the perpetrators facing sentences according to the law”*.

⁵ A tricycle used in Somalia as public means of transport.

Barriers to Services

In any emergency, barriers to accessing services exist, and it is vital that GBV and humanitarian actors consider these when designing and implementing interventions. The FGDs revealed that, in the context of insecurity, long travel distances are a barrier for survivors to access services, especially with regards to specialized health treatments. A community and religious leader from Baletweyn district, Hiraan region, Hirshabelle explained that *“we do not have MCH [Mother and Child Health] clinics or hospitals in the camp. This increases the risks of women dying during delivery or from bleeding when they are raped. In such events, women are taken to Beletweyn, using either Bajaj⁵ or donkey cart, which is very difficult since it is insecure during the night”*. A man from Borama district, Awdal region Somaliland and an adolescent boy from Belet Xaawo, district, Gedo region, Jubaland affirmed this by explaining that *“all the services except a few are in the center, so community members here cannot access them” and “blocked roads also serve as barriers, some places are simply not accessible”*. In addition, movement restriction and the closure of service centers due to COVID-19 were identified as major barriers to access services for vulnerable women and girls. An adolescent girl from Bosaso district, Bari region, Puntland explained that *“disease outbreaks affect women and girls, and the pandemic has made existing gender inequalities for women and girls worse. Now it impacts how they receive treatment and care”*.

FGD participants noted that vulnerable groups, including persons living with disabilities or from minority clans, were not sufficiently targeted for service provision, as they may not be aware of the available services and face challenges accessing them. A woman and adolescent girl from Bosaso district, Bari region, Puntland informed that *“sometimes, minority women do not receive any services or help in the event of violence. Justice is not provided to minority women who have been abused”*. Another identified barrier was the cost of services. FGD participants explained that in some specific locations, the high cost of services prohibits them

from accessing them. An adolescent girl from Gaalkacayo district, Mudug region, Galmudug state explained that *“there are no free humanitarian services available in our area, only MCH [Mother and Child Health] care facilities may provide free services through humanitarian agencies but most of the time we pay for everything”*. With regards to access to justice, FGD participants noted two main barriers, namely fear and the high cost of services for youth. An adolescent boy from Gaalkacayo district, Mudug region, Galmudug state noted that *“gender-based violence survivors face challenges to get humanitarian services because of their vulnerability and fear for their life and dignity”*.

Location of Violence

“All women are vulnerable to all forms violence: they face violence in schools, workplaces and homes.”

- An adolescent girl from Borama district, Awdal region, Somaliland

According to the above statement, women and girls experience violence everywhere in Somalia. It is important to locate where violence takes place to inform targeting and focus of response and mitigation strategies. If GBV survivors and those at risk of GBV do not feel safe to leave their homes to reach a distribution site, walk to school or use a latrine for fear of sexual harassment, assault, rape, physical violence and other forms of GBV, then they may not access the services required to meet their needs.

Home

FGD participants noted that violence occurs in the home. A woman from Kismayo district, Lower Juba region, Jubaland explained that *“violence happens at home: a neighbor can take advantage of your child while you are away, and we hear cases of girls being defiled at home”*. This was also affirmed by A Man from Belet Xaawo district, Gedo region, Jubaland affirmed her statement: *“women might experience violence at home and sometimes they might feel unsecure in their own homes”*.

Women and girls experience violence EVERYWHERE	
Overcrowded Places	<p><i>“Violence happens in markets or crowded places; people take advantage of children and sexually harass them when they are sent to the shops”</i>.</p> <p>- An adolescent girl from Belet Xaawo district, Gedo region, Jubaland</p>
Deserted Roads	<p><i>“Violence happens on deserted roads between the IDP camps and the city surroundings”</i>.</p> <p>- A man from Qardho district, Bari region, Puntland</p>
Public Transportation	<p><i>“Young women are sexually assaulted by groups of men inside ‘matatus’”</i>.</p> <p>- A woman from Bosaso district, Bari region, Puntland</p> <p><i>“The harassment and assault that women face in the matatus represent broader problem with gender-based violence”</i>.</p> <p>- A woman from Bosaso district, Bari region, Puntland</p>
Rural Areas	<p><i>“Rape and killing of girls also occur in rural areas”</i>.</p> <p>- A man from Hargeisa district, Woqooyi Galbeed region, Somaliland</p>
Farms	<p><i>“Violence occurs in the camps but mostly in the farms, since most of the people are farmers”</i>.</p> <p>- An adolescent girl from Baletweyn district, Hiraan region, Hirshabelle state</p>
Police Stations/ Detention Centers	<p><i>“Sometimes some of the violence happens in police stations and detention centers. We saw a lady who was arrested and sentenced to two years in prison, and after some time she was pregnant. She said that she was raped in the cell”</i>.</p> <p>- A community and religious leader from Baletweyn district, Hiraan region, Hirshabelle state</p>



Schools

Girls experience violence while walking to school. An adolescent girl from Kismayo district, Lower Juba region, Jubaland noted that *“when we go to school, there are jobless youth wandering around who will say unpleasant words to us. They sometimes insult us”*.

Workplace

A woman from Bura’o district, Togdheer region, Somaliland noted that violence also occurs in the workplace: *“violence happens in workplaces. Especially young women fall victim to this”*.

Markets

Women also encounter violence when going to the market. Two adolescent girls from Kahda district, Banadir region, Hirshabelle state and Beletyweyne, Hiran region explained that *“when we are sent to marketplaces, especially at night, we face threats of sexual abuse”* and *“I am concerned when I go to the marketplace. I am afraid I might be raped or physically abused”*.

Fetching Firewood and/or Water

Having to travel long distances to fetch firewood was similarly identified as a risk for being subjected to GBV. According to a community and religious leader from Baletweyn district, Hiraan region, Hirshabelle state *“women face*

violence when they go to fetch firewood for kitchen use”. A woman from Beletweyn district, Hiraan region, Hirshabelle state confirmed the former statement by explaining an experience of her own: *“many times, women walk for long distances to get firewood and men defile them. I was defiled by three men when I went to look for firewood, they attacked me and stabbed my body and my left breast”*.

Inside IDP Camps

FGD participants further noted that violence occurs in various areas within IDP camps. A community and religious leader informed that *“the most dangerous are the IDP camps”*. An adolescent boy from Qardho district, Bari region, Puntland agreed that IDP camps are the worst places when it comes to violence, due to poorly lit areas and unsecured latrines. An adolescent girl from Garowe district, Nugaal region, Puntland agreed with her fellow FGD participants and noted that *“we have concerns when going to the washrooms”*. A woman from Kahda district, Banadir region, noted that *“women have escaped rape when they are helping themselves in the bush because the camp does not have toilets”*.

Crisis-Related Forms of GBV

During crisis, specific types of GBV impact women and girls. Crisis-related GBV is often

used to instill fear and terror among a population, including men and boys who are often perceived as protectors of women and girls. Some forms of GBV are aimed at men and boys specifically, to force them into becoming part of the aggression of conflict and/or to cripple them economically. By making it impossible for them to procure work, women and girls are compelled to leave their homes to seek employment to meet the needs of the family. FGD participants identified forced armed recruitment of men and boys as continuing, specifically against children. A community and religious leader from Belet Xaawo district, Gedo region, Jubaland stated in the FGDs that *“boys are recruited to militias at an early age without their consent”*. A woman from Bosaso district, Bari region, Puntland affirmed this information by explaining that *“during the year, there were continued reports of the unlawful use of child soldiers, with the latter committing the large majority of violations”*. However, other FGD participants explained that boys enter the police force to secure a livelihood and that all entries into such work are not by compulsion. Nevertheless, the FGD participants expressed a concern around the young age at which this happens.

With regards to abduction and kidnapping, women and girls are significantly more vulnerable to such risks. An adolescent girl from Baletweyn district, Hiraan region, Hirshabelle expressed a sincere fear of such events: *“we fear being abducted and raped”*. Abductions and kidnappings may also take place to facilitate trafficking, another crisis-related form of GBV. A woman from Bosaso district, Bari region, Puntland stated that *“soldiers, or anyone seemingly needing help from poor women, are more likely to be involved in sex trafficking”*. FGD participants also noted a fear of arbitrary arrest and/or detention. A man from Bosaso district, Bari region, Puntland explained that *“women, in particular have been arrested, detained, and tortured”*.

Findings from the FGDs highlighted radicalization as a source of violence within communities. An adolescent boy from Kismayo district, Lower Juba region, Jubaland explained that *“boys experience radicalization from the insurgent groups, which increases the violence perpetrated in the community”*.

“Three incidents of the rape and murder occurred in 2020. Two of the cases occurred in a camp, potentially as a result of a conflict between two families or two groups of the army. The third victim had her body removed from waste disposal”.

- A man from Kismayo district, Lower Juba region, Jubaland

Furthermore, inter-communal tension may become a crisis-related form of GBV when the crisis is divided along ethnic lines. Ethnic minority women and girls are often the target of such kind of violence. Women and girls are killed or raped, with the objective of them bearing the children of the dominant group as an illustration of their total repression. An adolescent boy from Gaalkacayo district, Mudug region, Galmudug state explained that *“tribalism increases the violence and abuse by giving the perpetrator the confidence to normalize the abuse of power over others. The perpetrator believes that because he is from a clan that is superior to another, the people belonging to the minority clans can be killed and raped”*.

Documents identified by FGD participants as the most needed civil documents in their communities	
National ID	<p><i>"Access to documents issued by the government of Somalia is the biggest challenge, especially National ID and passport".</i></p> <p>- Adolescent boy from Hargeisa district, Woqooyi Galbeed region, Somaliland</p>
Passport	<p><i>"When you want a passport, it takes time and money".</i></p> <p>- Adolescent boy from Dhahar district, Sanaag region, Puntland</p>
Land Titles	<p><i>"People may get land or inherited land and it takes very long to get an ownership certificate".</i></p> <p>- Man from Erigavo district, Sanaag region, Somaliland</p>
Birth Certificates	<p><i>"We all want documentation for our children. Hopefully we can be assisted on how to get them in the future".</i></p> <p>- Woman from Daynille, Banadir region, Hirshabelle state</p>
Educational Certificates	<p><i>"A person is often harassed in public office, such as when students want their end-of-year certificate. They may end up losing their patience, and not receiving their documents, which they have the right to".</i></p> <p>- Adolescent girl from Dhahar district, Sanaag region, Puntland</p>
Driving Licenses	<p><i>"There are some challenges you may encounter when you are traveling, like not having a driving license".</i></p> <p>- Adolescent boy from Bura'o district, Togdheer region, Somaliland</p>

Gender and GBV in Other Clusters

General Protection - Civil Documentation

Civil documentation, such as birth, marriage and death certificates, identification cards, and land titles are vital for accessing resources, rights and opportunities in Somalia.

FGD participants acknowledged that there were some challenges around obtaining of civil documentation. Some of the FGD participants informed that some individuals do not know obtain documents, such as a national ID or a passport. A woman from Hargeisa district,

Woqooyi Galbeed region, Somaliland explained that *"in my community people are not aware of how to get a national ID and passport"*. Other participants informed of challenges related to replacing national IDs and passports, due to the location of civil registrars. A woman from Hargeisa district, Woqooyi Galbeed region, Somaliland explained that *"replacing a national ID and passport takes time, since you have to go to Hargeisa"*.

A community and religious leader from Bosaso district, Bari region, Puntland explained that the high cost associated with obtaining civil documentation is a major obstacle for people: *"we generally do not find getting government documentation a challenge. The challenge we face is financial"*. The high cost is associated with the requests from relevant officials for bribes to obtain the documents, as explained by a community and religious leader from Dhahar

"Access to national ID card is the biggest problem in our community".

- A man from Erigavo district, Sanaag region, Somaliland

district, Sanaag region, Puntland: *“the person who sits in the office may ask you for money to process your documents, which you have a right to have. If you don’t pay, then he may refuse to provide you with your documents”*. Another identified barrier is the limited number of civil registrar offices. A woman from Dhahar district, Sanaag region, Puntland explained that *“there are no offices here to get your certificates from. It is a big problem for us, and we face a lot of challenges because of it”*. A man from Belet Xaawo district, Gedo region, Jubaland noted the same in his region: *“there is no central office where we can access government services or documentation, such as documents of land ownership and civil registrations”*. The findings from the FGDs also indicate that persons from minority clans face significant challenges in obtaining civil documentation. A woman from Garowe district, Nugaal region, Puntland explained that *“the minority groups that do not have representation within civil registrars meet the most challenges in getting legal national documents”*. Lastly, FGD participants noted that other costs can be incurred, that are not linked to the actual processing of civil documents.

The consequences of not having civil documentation include not being able to apply for employment, access remittances or take a loan to purchase land or start a business. A man from Beleetweyn district, Hiraan region, Hirshabelle state explained that *“sometimes when you want to apply for a job for an organization, or you want to access money remitted to yourself, or take a loan, you cannot because of lack of documentation”*. FGD participants noted that access to humanitarian assistance can also be a challenge without an official ID. A community and religious leader from Baletweyn district, Hiraan region, Hirshabelle noted that *“the humanitarian organizations only recognize official documents. They only call people who are registered with them, which is issued by the administration”*. Eviction is another consequence resulting from lack of civil documentation. An adolescent boy from Baletweyn district, Hiraan region, Hirshabelle state explained that *“we live in camps, but we have nothing to show for that we live there. We just live, and anytime we are told to move out we have no option but to comply”*. Given the importance of civil documentation to access



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rights and resources in Somalia, women and girls who neither have the financial capacity to obtain these documents nor a guardian to act on their behalf, are less likely to own land or access other resources that could build their resilience to escape poverty and GBV.

Health

While FDG participants indicated that there are locations where vulnerable women and girls have access to health services, most of them agreed with the following statement made by a woman from Garowe district, Nugaal region, Puntland: *“generally, people do not have access to full health service in the country, and if they do, it is private and expensive”*. A community and religious leader from Erigavo district, Sanaag region, Somaliland explained that *“getting health services free of charge is difficult for some people, since they live very far and cannot afford the bills associated with health care”*. In addition, some FDG participants noted the lack of specific health services needed for women and girls of reproductive age. Inadequate

health provision and insufficient access to health services, including specialized rape treatment, treatment for injuries inflicted by GBV, skilled birth attendance, negatively impacts the well-being of women and girls. These issues do not only have the potential to increase maternal mortality rates, but they also discourage survivors from seeking medical treatment to facilitate their recovery, in addition to making it difficult for rape survivors to secure forensic evidence required for prosecution of perpetrators. Ultimately, these issues worsen access to justice for vulnerable women and girls, including GBV survivors.

Water Sanitation and Hygiene (WASH)

WASH is a key cluster for the provision of services to women and girls in the humanitarian emergency in Somalia, since they, traditionally, manage water collection, storage and disposal. While many of the FDG participants agreed that efforts have been made to improve access to water, many also indicated gaps and challenges related to inadequacy and long travels to reach water



sites. A community and religious leader from Kismayo district, Lower Juba region, Jubaland gave the following account: *"we are IDPs. Let me tell you something about Central; it had 26 camps, and for nine months nine of those camps were moved 4-5 kilometers outside Kismayo. Before this move, the distance to the water points was 4-5 kilometers, and after the move that distance grew to 8-9 kilometers. The smallest of the camps has at least 63 households, some are included over 100 households. These people have no access to water! If you visit them right now, make no mistake, you will find them dehydrated. Their biggest problem is a lack of water. A water vendor with a donkey cart cannot reach there without suffering, and those who can reach with cars charge 12,000 shillings (USD120 for a 20-litre jerry can. These people need urgent humanitarian assistance"*.

Some FGD participants identified a lack of WASH items as a concern. A woman from Belet Xaawo district, Gedo region, Jubaland explained that *"there are some organizations that provide WASH [products], but I have never received any"*. A lack of proper hygienic areas was furthermore identified by FGD participants as one of the immediate gaps, especially for menstruating women and girls, and pregnant women, since clean water and bathing areas are necessary for sanitary reproductive health care. When women and girls cannot access clean latrine areas, they will resort to using more remote areas for open defecation, thus placing themselves at risk of attack, physical and/or sexual violence. Similarly, a lack of electricity in camp areas accessed by women and girls, such as washrooms, was also reported as a major GBV risk. An adolescent girl from Baletweyn district, Hiraan region, Hirshabelle state affirmed this by explaining that *"we need electricity, having electricity will greatly help us access washrooms at night"*. The risk of being subjected to sexual exploitation and abuse is increasing in Somalia, as women and girls must travel long distances to collect water or to use sanitation facilities. In order to properly protect women from being subjected to GBV, there is a need to improve the availability of secure latrines, implement

security patrols along the routes down which women need to travel to collect water, to go to schools and markets, GBV service sites and health facilities.

Camp Coordination and Camp Management (CCCM)/Shelter

other FGD participants indicated that living conditions in the camps are a challenge. A community and religious leader from Kismayo district, Lower Juba region, Jubaland *"the biggest problem is our living conditions. I am grateful that there is safety"*. FDG participants further noted the inadequacy of shelters and their poor infrastructure in the camps. According to a woman from Daynille district, Banadir region, Hirshabelle state *"we are in serious need of shelter, including bedding and tents from the humanitarian organizations. We have some houses and structures in the camps that were completely destroyed by the rains"*. An adolescent girl from Gaalkacayo district, Mudug region, Galmudug state explained that *"we need shelter since we all live in a hut that can burn down easily, and it doesn't protect us from the cold weather rains or summer wind"*.

Education

Access to education is crucial for boys and girls to become productive members of society. In Somalia, formal education certification has become a necessary requirement to gain higher employment. This type of education is also necessary for 'late learners', prevented from accessing formal education due to the conflict in Somalia. FDG participants acknowledged the presence of schools in their communities but expressed a concern about the schools being located far from where they live. A community and religious leader from Kismayo district, Lower Juba region, Jubaland explained that *"schools are located very far, and children are unable to reach them. It would be better if schools were located closer to our children"*. In addition, although parents and caregivers are not required to pay for classes or teacher salaries, there are still burdensome costs associated with education, such as school uniforms, notebooks, pencils, copies of textbook

assignments, transportation and snack/lunch. An adolescent girl from Kismayo district, Lower Juba region, Jubaland explained that *“we don’t have enough schools and the few schools available, they need money from the children”*. Some FGD participants also informed that movement restrictions associated with the COVID-19 pandemic further limit access to education. A community and religious leader from Kismayo district, Lower Juba region, Jubaland explained that *“we have a challenge when it comes to education. NGOs used to fund education, but due to COVID-19, schools were closed. The learning environment was terrible too because the teachers did not get enough incentives motivating them to deliver better. The students do not have learning materials”*. Given patriarchal structure in Somalia and a culture in which sons are prioritized, scarce financial resources discourage families from investing in girl child education. In addition, the values associated with the girl child and the link to reproductive potentials, gravely worsens the situation for the girl child in Somalia. Since educating women, improving school retention, delaying marriage, and providing choices for health child spacing, barriers to girls’ education impacts significantly on women in Somalia, as well as their ability to build their potentials and become stakeholders in Somalia’s socio-economic and political development.

Child Protection

“To survive and to reach livelihood self-sufficiency, parents may send their children to the market as a crucial source of income of the house. If the children are small, they go to the market to work within the informal sector or they start selling Qat⁶ to meet their own needs”.

– Community and religious leader from Laasanod district, Sool region, Puntland.

Child Labor

FGD participants noted the existence of child labor in Somalia and Somaliland, as well as the presence of unaccompanied minors and/or orphans. FDG participants noted that boys

“There are children who were forced to depend on casual jobs, like shoe polishing to gain some income. They face being exploited and abused”.

– Community and religious leader from Daynille district, Banadir region, Hirshabelle state

often are found working as shoe shiners, facing risks such as economic exploitation and physical violence. An adolescent boy from Erigavo district, Sanaag region, Somaliland explained that *“over the last few years child labour is increasing in the market in the Erigavo district, such as the young shoe cleaners, they may be between eight and ten years old. They always face many obstacles. For example, as shoe shiners they sometimes do not get any of their earnings because some people command them to clean his shoes without any payment”*. In addition, a man from Baletweyn district, Hiraan region, Hirshabelle state informed that *“the children who are the shoe-shiners are subjected to violence. These children are denied money and if they attempt to fight back, they are beaten”*. FGD participants mentioned situations in which female children are used as domestic workers for chores, such as washing clothes and house cleaning. A community and religious leader from Kismayo district, Lower Juba region, Jubaland confirmed this by saying that *“girls are forced into domestic labour and are never paid”*.

Unaccompanied Children

With regards to unaccompanied children, the opinions of the FGD participants varied. Some adolescent FGD participants noted that there are no unaccompanied or orphan children around the communities, while others noted that they do exist and that they face significant risks of sexual and mental abuse and molestation. An adolescent boy from Kismayo district, Lower Juba region, Jubaland explained that *“most of these kids are treated unequally to the others in the*

⁶ The leaves of a shrub, which are chewed (or drunk as an infusion) as a stimulant.

family with which they live. When food is served, they are given less, and they are generally harassed". A community and religious leader from Kismayo district, Lower Juba region, Jubaland agreed with the former statement and explained that *"the difference between a child living with his/her parent and the unaccompanied or separated child is that the former gets the best care available, while the latter barely survives on crumbs"*. An adolescent boy from Borama district, Awdal region, Somaliland further noted that *"they [unaccompanied children] are believed to be inferior to other people. People insult and abuse them, its hard life"*. Some of the respondents attempted to differentiate on the impact of the abuse on boys and girls, respectively. A community and religious leader from Garowe district, Nugaal region, Puntland stated that *"separated children encounter lots of abuses and violence from their new caregivers, such as neglect, physical abuse, child labor etc. This kind of violence and abuse is mostly faced by the girls, since the boys will not tolerate abuse and go to live on the streets instead. Young girls are defiled sexually abused"*. The FGD participants further explained that unaccompanied children do not benefit from formal education because no one supports them financial, and that oftentimes they may be tempted to get involved in criminal activities or drug abuse. A man from Baletweyn district, Hiraan region, Hirshabelle state explained that *"these children may be recruited and indoctrinated by armed groups, while others are vulnerable to armed recruitment"*.

Some of the reasons listed by FGD participants as to why children become unaccompanied or orphaned were death of a caregiver and separation during displacement or conflict. An adolescent girl from Garowe district, Nugaal region, Puntland explained that *"the loss of one or two parents, or if they divorced are the biggest factors causing child separation"*. According to an adolescent girl from Garowe district, Nugaal region, Puntland *"fleeing from violence or flooding can cause child separation when the parent flees in one direction and the child in another"*. Other persons caring for unaccompanied children include grandmothers,

aunts, uncles and siblings. FGD participants similarly noted that these children can also be cared for by the community. A man from Erigavo district, Sanaag region, Somaliland explained that *"their [unaccompanied children] neighborhood may assist with clothes and food provisions for a short time period"*, while an adolescent boy from Belet Xaawo district, Gedo region, Jubaland mentioned that unaccompanied children may also be accommodated in home-based centers: *"we have a home-based center where they are taken care of"*.

Child Protection Services

FGD participants, in particular adolescents and community and religious leaders, noted the lack of, or in-sufficient, child friendly spaces, playgrounds and other recreational spaces and activities for children. A community and religious leader from Kismayo district, Lower Juba region, Jubaland noted that *"when child friendly spaces are created, we end up with a small space that does not accommodate more than five to ten children"*.



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An adolescent girl from Baletweyn district, Hiraan region, Hirshabelle state further noted that *“the camp does not have schools, dugsis⁷ and playgrounds for children”*. Most of the participants noted that few very child protection programmes exist in their communities. Some adolescent FGD participants expressed the need to establish more childcare centers to support children who are neglected. FGD participants emphasized how important these centers are in supporting child tracing, family re-unification and prevention of violence against children. An adolescent boy from Daynille district, Banadir region, Hirshabelle state explained that *“when a child disappears, we call the camp director for an immediate search around the camp and neighboring area. We provide the name, basic characteristics and any information that is important. We participate in child protection programs, for example when we see lost kids out of the camp or anywhere else, we bring them back safely to their families”*. In addition, an adolescent boy from Kahda district, Banadir region, Hirshabelle state noted during the FGD that there are units in the police stations where violence against children’s cases is reported.

⁷ An Islamic school that teaches Quran (Islamic Holy Book).

Mine Action

“There are explosive hazards in this area. Just recently, a boy was serious injured while playing with an explosive device that exploded. Many people don’t know what an explosive device looks like and cannot differentiate it from other things. The most affected are the children who play with anything they will find in the bushes”.

– Community and religious leader from Daynille district, Banadir region, Hirshabelle state

The information provided by FGD participants demonstrate that land mines, Improvised Explosive Devices (IEDs), and other explosive hazards occurred less compared with previous years. A woman from Hargeisa district, Woqooyi Galbeed region, Somaliland stated that *“there are no explosives in our region”*, and a community and religious leader from Erigavo district, Sanaag region, Somaliland explained that *“there are no explosive hazards within our community. The dangerous bombs have ended, and other explosives have been removed”*. Nevertheless, these incidents do occur and cause injury. An adolescent girl from Kahda district, Banadir region, Hirshabelle state explained that such incidents had greatly affected her community: *“it caused death and*

injuries. Whenever there are clashes between different groups, they abandon explosive devices, that later affect both people and animals. I heard incidents of people who were injured in our area while they were walking in the bushes”.

Type of Explosive Hazards and Locations/ Structures Impacted

FGD participants noted that there are still many remnants of IEDs and landmines. A man from Garowe district, Nugaal region, Puntland explained that *“in Somalia, there has been a war for a long time, and we live in a country which has thousands of war zone, therefore IEDs and landmines used for war are buried on the roadsides”*. A community and religious leader from Daynille district, Banadir region, Hirshabelle state explained that *“years of armed conflict has resulted in widespread landmines. Although the abandoned explosives have reduced, there are still threats as we walk in nearby bushes”*. FGD participants also noted that IEDs and landmines have had severe impact on communities, especially with regards to the destruction of bridges and pastoral grazing lands. An adolescent girl from Kismayo district, Lower Juba region, Jubaland noted that *“there are many places that were affected, especially bridges that used to connect important roads and pastoral grazing lands”*. Explosive hazards have also destroyed business investments, such as hotels and business centers, and have resulted in the physical disability and death of people. An adolescent boy from Kismayo district, Lower Juba region, Jubaland explained that *“we know of incidents where people lost limbs and now, they are crawling. It [explosive hazards] has also caused death, economic collapse and destruction”*. FGD participants confirmed that child victims and survivors of landmines and explosive devices have been affected during play, while adults mostly are affected when they are going about their normal businesses.

FGD participants noted that children are most adversely affected by explosive hazards. A woman from Erigavo district, Sanaag region, Somaliland explained that *“there are explosive hazards within*

our community, but it is not common. For example, there was a boy that was digging the surface area where landmines were located. Unfortunately, one exploded while he was digging, which left him disabled”. Another group at risk are persons with disabilities and older persons. A community and religious leader from Beletweyn district, Hiraan region, Hirshabelle explained that *“it also affects the most vulnerable, the people with disabilities and special needs. For example, when the explosion happens, if it happens to or close to someone who cannot run, it will be difficult for that person to escape from danger. The same goes for the elderly who are weak or people who are visually impaired”*. FGD participants also confirmed that herders and pastoralists belong to a group at risk of landmines and IEDs.

Housing, Land and Property

FGD participants identified a lack of land ownership and shelter as factors increasing the vulnerability of persons being subjected to GBV, especially women and girls. A woman from Hargeisa district, Woqooyi Galbeed region, Somaliland explained that *“land disputes can sometimes cause conflicts, loss of property and even death”*. An adolescent girl from Gaalkacayo district, Mudug region, Galmudug state affirmed this by stating that *“there are lots of land-related disputes in our communities and in some of the cases it results in the two sides killing each other over a piece of land”*. The group mostly affected by land disputes and ownership are women, especially considering their low status in Somalia. A man from Gaalkacayo district, Mudug region, Galmudug state explained that *“land disputes are a common problem in Somali communities, since land is the most expensive property that the society invests in. People from the most vulnerable social groups are robbed by the strong ones because they can't protect themselves or their land. Minority clans and IDPs [Internally Displaced Persons] are victims of land-related disputes and loss of property. These kinds of land disputes affect women mostly since they are vulnerable, and men usually intimidate them”*. The FGD participants similarly highlighted the

lack of strong justice mechanisms for redress. A community and religious leader from Belet Xaawo district, Gedo region, Jubaland explained that *“there no strong government which can mediate the land-related disputes. The most common problem faced with regards to land issues and disputes is to get justice. Land disputes are common and sometimes cause clashes among the community”*.

Furthermore, FGD participants revealed that property theft is a challenge that women and girls face in the communities. A woman from Bahdan district, Sanaag region, Puntland even stated that *“property theft is the main problem faced by women and girls”*. Similarly, the lack of documentation contributes to property theft. A woman from Kismayo district, Lower Juba region, Jubaland stated this as her main issue: *“I have no documents to show that I own this land”*. FGD participants explained further during the discussions that high land registration fees can impede proper legal registration and the corresponding ability to obtain documentation. An adolescent boy from Borama district, Awdal region, Somaliland noted that *“high costs for registering land property and even a lack of registration in some places make it difficult to obtain the papers to show ownership”*.

Another major challenge identified by FGD participants with regards to housing security was forceful eviction of IDPs from camps and the inability to pay rent. A community and religious

leader from Kismayo district, Lower Juba region, Jubaland explained that *“the challenge we have is about land ownership. You have heard about the nine camps that were moved to another place. Evictions are common. You will settle in one place and then you are evicted. This vicious cycle needs to be broken”*. An adolescent girl from Dhahar district, Sanaag region, Puntland confirmed this when she said that *“there are challenges that could be caused by one’s inability to pay rent. There are poor people who are not able to pay the rent for three or four months and they could face eviction or discrimination”*. FGD participants also noted that even if proving one’s ownership of land was made easier, many IDP women and girls do not have the money to purchase land. A woman from Berbera district, Woqooyi Galbeed region, Somaliland stated that *“the vulnerable do not get such rights due to their low economic status”*. Women from minority clans, in particular divorced women, are more vulnerable to lose their lands since they may be unable to assert their rights to such because of discrimination. A man from Kismayo district, Lower Juba region, Jubaland explained that *“people from minority clans and/or IDPs face challenges in potentially losing the ownership of their property, since they can’t protect their land from other major clans. When it comes to women advocating their rights to property, they face suppression and are told that their rights are to stay indoors”*. A woman from Bura’o district, Togdheer region, Somaliland further explained that *“divorced women face culture barriers. Our community doesn’t accept women to have wealth”*. Community elders were identified as the main mediators in disputes concerning land housing, while where formally established land committees exist it is their responsibility to mediate in such cases. A woman from Belet Xaawo district, Gedo region, Jubaland explained that *“whenever a dispute occurs, it is settled in the traditional way. The complainant raises his/her case, and the elders will summon the other party, and both listen to the case and determine it. If someone is not satisfied with the outcome then he or she can go to the police, but in essence the main dispute resolution lies with the*

“Land-based violence occurs especially when the landowner is absent, and the land is occupied illegally by other people. The moment the owner returns, she or he is told to vacate the land and forget about any ownership. I know a man who was absent from his land as he lived as a refugee for years in another country. When he returned for his land, he saw an apartment built on his plot. He presented evidence before the court, spent a lot of time and resources, but it was all in vain.”

- A man from Kismayo district, Lower Juba region, Jubaland



PHOTO CREDIT: UNSOM

elders". However, these outcomes do not usually translate into justice for the affected, because many prefer to relinquish their rights to evade potential violence or retaliation. A woman from Gaalkacayo district, Mudug region, Galmudug state explained that *"it is hard for IDPs and people from minority groups to get justice. Even if they get justice, they may give up their land because they fear for their lives"*. The marginalization of vulnerable groups and discriminatory cultures around land and property ownership disposes women to increased poverty and inability to access collateral that enables them to loan for business and other profitable ventures. This context does not only predispose women to financial insecurity and negative coping mechanisms to overcome such challenges, but also negatively impacts their physical security and mental wellbeing. Housing and property are a resource that contributes to the well-being of persons, while the denial of access to such resources have negative impacts on people's lives.

Humanitarian Distributions: NFIs, Food, and Cash Assistance

FGD participants noted that they are aware that humanitarian organizations are distributing materials for assistance to persons identified to be in need. However, they also noted that there is an issue with safety and security when assistance is distributed. A community and religious leader from Daynille district, Banadir region, Hirshabelle state explained that *"we use to have disputes during the distribution of humanitarian assistance but in recent times security personnel are present whenever there is distribution of food or other items"*. The FGD participants also noted that humanitarian actors are addressing the unique needs of ethnic minorities and persons with disabilities. A community and religious leader from Daynille district, Banadir region, Hirshabelle state informed that *"when there is assistance of food or other items, we requested that the most vulnerable should be given priority, and the NGOs have heeded to our request. We don't have people who were denied aid for their disability or ethnic background"*.

In 2020 and 2021 Somalia was affected not only by the COVID-19 pandemic, but by natural disasters, resulting in an increase in food insecurity and loss of livelihoods. A man from Kismayo district, Lower Juba region, Jubaland explained that *“there is hunger and starvation in the camps”*. However, FGD participants noted that food aid is the type of assistance mostly distributed in the camps, in addition to cooking utensils. The participants agreed that cash assistance is significantly contributing to alleviating food insecurity. An adolescent boy from Beletweyn district, Hiraan region, Hirshabelle state noted that *“we get food and non-food items, and we are also provided with cash for work programs”*. An additional type of assistance identified as helpful is school feeding. A community and religious leader from Erigavo district, Sanaag region, Somaliland explained that *“there are some organizations that distribute cash vouchers, but there are also school feedings: students get breakfasts, and some students get lunch, however, these donations do not reach the society as a whole”*.

Barriers to Humanitarian Assistance and Distributions

Some FGD participants noted that humanitarian distributions were no longer available to them. An adolescent girl from Gaalkacayo district, Mudug region, Galmudug state explained that *“humanitarian distributions dropped due to a lack of funds and therefore we usually don’t receive humanitarian assistance”*. They noted that some distributions have not occurred since the COVID-19 pandemic began in 2020. An adolescent girl from Baletweyn district, Hiraan region, Hirshabelle state noted that *“the last time we received assistance was before COVID-19 came, we get nothing nowadays”*. FGD participants revealed during the discussions that women and girls are developing their own mechanisms to meet basic needs. A woman from Bahdan district, Sanaag region, Puntland explained that *“women and girls support themselves through contributions amongst themselves”*, while a woman from Belet Xaawo district, Gedo region, Jubaland explained

that *“I have not heard of those mentioned services provided”*.

FDG participants complained during the discussions about the inadequacy of distributions and distributions being delayed. An adolescent girl from Hargeisa district, Woqooyi, Galbeed region, Somaliland explained that *“one of the challenges facing the community in accessing humanitarian assistance is that the distributed items do not meet the needs of the community”*. Other FGD participants noted that the items that are being distributed are often exhausted by the time they arrive. An adolescent boy from Daynille district, Banadir region, Hirshabelle state described that *“sometimes the services are not available for everybody in the camp. For example, sometimes items that are being distributed may finish before everyone has received them”*. FGD participants also noted that in some instances, distributions do not reach remote areas where IDPs and refugees are residing.

During the discussions, an adolescent girl and a woman from Bosaso district, Bari region, Puntland, stated that women receive less than men and that women are vulnerable to sexual harassment and abuse during the distributions: *“the dangers that women face when receiving help include being asked for sex while waiting in line for the distributions, and ending up with less or poorer commodities compared with those that men receive”*. In addition, a woman from Bosaso district, Bari region, Puntland affirmed that *“during the distributions, women may be targeted and forced into prostitution by bystanders in exchange for assistance. Women are harassed and discriminated against during food distributions”*.

While some of the FGD participants agreed that distributions are provided for free, they argued that this does not necessarily mean that distributions are provided on a gender equal basis. A woman from Garowe district, Nugaal region Puntland explained that *“we are provided these services for free, but ultimately the community decides who should get the services. If it is your*

turn to get it, then you are provided for without any condition. The services are free, but not equal, and in general women and vulnerable people are not receiving enough help". Other FGD participants disagreed and stated that the distributions are indeed not for free, and that people have to pay money in order to receive assistance. A woman from Berbera district, Woqooyi Galbeed region, Somaliland explained that "whether you receive distributions or not is based on a person's socioeconomic status". A man from Gaalkacayo district, Mudug region, Galmudug state elaborated on this: "to my knowledge, humanitarian services are available for the poor population, but the delivery of these services is poorly managed by the agency workers and sometimes people try to benefit from those humanitarian services". A man from the same region explained further that "humanitarian services are in place, but the question is if the right person will get the services. In some cases, middle class people take the services that are designed for the poor population. I believe it is because there is no strong beneficiary selection criteria or quality control". A community and religious leader from Berbera District, Woqooyi Galbeed region Somaliland informed further: "the leaders provide the rations through an illegal process by making selections based on nepotism". During the discussions, the issue of discrimination and/or favoritism was mentioned multiple times as a barrier to access humanitarian assistance. Corruption was further identified as a challenge. A man from Garowe district, Nugaal region, Puntland explained that "corruption is everywhere, even the humanitarian aid workers make money from the aid. It's hard to see transparency in the humanitarian arena".

FGD participants furthermore identified long travels to distribution sites and having to fight to get the portions as barriers to receiving assistance. An adolescent girl from Beletweyn district, Hiraan region, Hirshabelle state explained that "the challenges are, for instance, when leaving the distribution point or when getting the aid itself, only the strongest survive". A Woman from Kismayo district, Lower Juba region, Jubaland confirmed

that "most times fights break out when there are food distributions". Other FGD participants noted that food may also be taken from them while they are walking home. An adolescent girl from Beletweyn district, Hiraan region, Hirshabelle state explained that "you cannot safely get home when you have taken your portion or even at the distribution point where a stronger person forcefully takes your food, or some security agents snatch the assistance before it reaches to people. So, an alternative could be that the assistance is changed to cash and transferred to EVC⁸". While most of the GBV experts' part of the FGD discussions informed that there have been trainings on Prevention of Sexual Exploitation and Abuse (PSEA) for humanitarian actors, others noted that Sexual Exploitation and Abuse (SEA) is still a challenge for women and girls when accessing distributions: "young women and girls face greater risk when trying to access humanitarian services", as explained by one GBV Expert from Somaliland.

Findings from the discussions revealed that while there has been some improvement in reaching older persons and persons living with disabilities with humanitarian assistance, a great majority of them are not able to access distributions, due to a lack of civil documentation and restrictions caused by disabilities. An adolescent boy from Daynille district in Banadir region, Hirshabelle state explained that "there is a challenge for those with disabilities, they might be forgotten". An adolescent girl from Beletweyn district, Hiraan region, Hirshabelle state furthermore informed that "it is hard for those with disabilities as they are not able to queue in the line. It would be better if their assistance were delivered to where they stay, since they do not have the capacity to access the distribution point". A community and religious leader from Baletweyn district, Hiraan region, Hirshabelle informed that "there is a big problem with not having documents, because you cannot get the humanitarian assistance if you do not have your name on that card".

⁸ A mobile money transfer system by Hormud Telecom (a telecommunications company based in Mogadishu), that is used across Somalia.

Recommendations

The crisis in Somalia and Somaliland, is unique as it is ongoing for 30 years, and affected populations may have experienced displacement more than three times. Displacement may have occurred during the past five to ten years, or as recent as in the past five months, due to drought, flooding, or communicable disease outbreaks, such as the recent COVID-19 pandemic. Some crisis-affected persons may have been residing in camps for anything between one to ten years, and their inability to leave the camps have been caused by challenges, such as insecurity, fear of GBV risks, lack of civil documentation that would facilitate obtaining employment or a loan for a small business, ownership of land, property or housing.

An approach that takes into consideration the gendered dimensions of the cultural systems, norms and practices in Somalia and Somaliland is critical to reduce GBV and achieving a durable solution to improve the lives of affected populations. This approach necessitates a coordinated response amongst all actors, as well as a wider network of stakeholders. With the rise of new emergencies across the world, funding may progressively diminish for the emergency in Somalia. It is therefore vital that humanitarian interventions in Somalia and Somaliland are preceded by a gender analysis to determine targeting, focus and prioritization of needs. The following recommendations are primarily aimed at specific GBV actors but should be considered by other humanitarian actors for more synergistic holistic response. The recommendations are presented below.



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Improved Public Awareness to end GBV

FGD participants noted the need for increased awareness in addressing harmful gender norms and unequal power dynamics, and how they serve as risk factors for violence. An adolescent boy from Belet Xaawo district, Gedo region, Jubaland suggested that *“prevention efforts [are scaled up] that address unequal gender power relation as the root cause for gender violence”*. The importance of girl child education and the cost of illiteracy amongst female children to families and the society should be a priority in awareness-raising initiatives aimed at ending child, early and forced marriage. A man from Baletweyn district, Hiraan region, Hirshabelle state suggested that *“by creating awareness and encouraging girls in education and abolishing forceful marriage we can reduce this harmful practice and improve the lives of girls and their families”*. In addition, FGD participants noted that training workshops and awareness campaigns focused on improving social coherence and elimination of discrimination against women and girls are important to reduce GBV and achieving gender equality. An adolescent girl from Berbera district, Woqooyi Galbeed region, Somaliland stated that *“training or workshops about preventing discrimination”*.

Specialized GBV Services

Findings from the FGDs revealed that holistic GBV services were neither available nor accessible or of adequate quality. Most FGD participants expressed the need for improved reach in remote areas. They also explained that service provision initiatives should be designed to accommodate women and girls with disabilities, as well as older women. An adolescent girl from Hargeisa district, Woqooyi Galbeed region, Somaliland stated that *“in order for these services to reach the people better, special facilities must be set up for the elderly and people with disabilities”*. FGD participants noted the lack of necessary skills amongst some service providers and proposed that focus be placed on providing routine capacity strengthening of GBV service providers. Capacity

strengthening can be achieved through ongoing refresher training and mentoring programmes on the integration of humanitarian principles, basic GBV concepts and specialized case management skills within the area of health. Furthermore, improved cross cluster collaborations on referrals for Food, Security and Livelihood (FSL), Water, Sanitation and Hygiene (WASH) and Non-Food Items (NFI) was another suggestion made by FGD participants, as well as the importance of collective development of vulnerability criteria. These are all valid inputs as it indeed important to broaden reach of services for vulnerable women and girls via GBV inter-cluster focal points.

Establishing or rehabilitating Women and Girl Safe Spaces

Women and Girl Safe Spaces (WGSS) are vital for first line response, healing and recovery. The WGSS similarly serve to facilitate re-integration of survivors into the community through the sharing of experiences, routine psycho-therapy, friendships and recreational activities. In addition, these spaces provide education sessions on prevention of GBV, sexual and reproductive health issues, FGM, and other harmful traditional practices. WGSSs often provide vocational and livelihood skills to women and girls who are survivors or at risk of GBV, as well as consultations on most appropriate prevention measures. Beneficiaries include the most vulnerable in the communities and camps, in particular women and girls with disabilities, adolescent girls and older women. FGD participants emphasized the importance of these safe spaces and indicated a need to increase their number within IDP camps and communities. A woman from Kahda district, Banadir region, Hirshabelle state stated that *“we also want a place where we can go to discuss when we have problems”*. A community and religious leader from Kismayo district, Lower Juba region, Jubaland explained that *“we have not reached that level yet. There are no safe spaces in place to cater for children, women, older persons, PWDs and vulnerable women”*.

Increased Women/Girl Participation in Community-Based Activities (Decision Making Roles)

Changing the roles of women within families to become primary income earners has not transformed the status of women in communities in Somalia and Somaliland. Women are still perceived as subordinate and unable to make critical decisions within the family, camp and community structures. FGD participants expressed the importance of implementing programmes that educate the public and create spaces for women to play leadership roles at these levels. A woman from Bosaso district, Bari region, Puntland stated that *“girls should take up leadership roles. After being trained as leaders, girls can serve as key educators and role models for siblings and peers within and outside of school by sharing resilience-building and risk reduction information and encouraging related actions”*.

Improved Coordination Amongst Humanitarian Assistance Providers

It is important to improve coordination on the levels of “who”, “what”, “where” and “how” with regards to service provision, for both GBV services and humanitarian assistance, including WASH, FSL and NFIs so that people in need receive assistance. A man from Kismayo district, Lower Juba region, Jubaland stated that *“it is important that organization share information on beneficiaries and target groups so that the right people will receive assistance”*. Such coordination would similarly support improved camp security to protect against GBV and other forms of violence, with Camp Coordination and Camp Management (CCCM) as lead to facilitate the establishment of camp-based committees and/or improved training, monitoring and evaluation of such committees. FGD participants recommended that such committees support the reduction of GBV.

An adolescent boy from Kahda district, Banadir region, Hirshabelle state suggested that *“the community can form a committee representing the residents in the camp and that this committee works closely with the security agencies to monitor the improvements, risks and resolutions to the existing violence”*.

Sex and Gender Disaggregated Data and Information

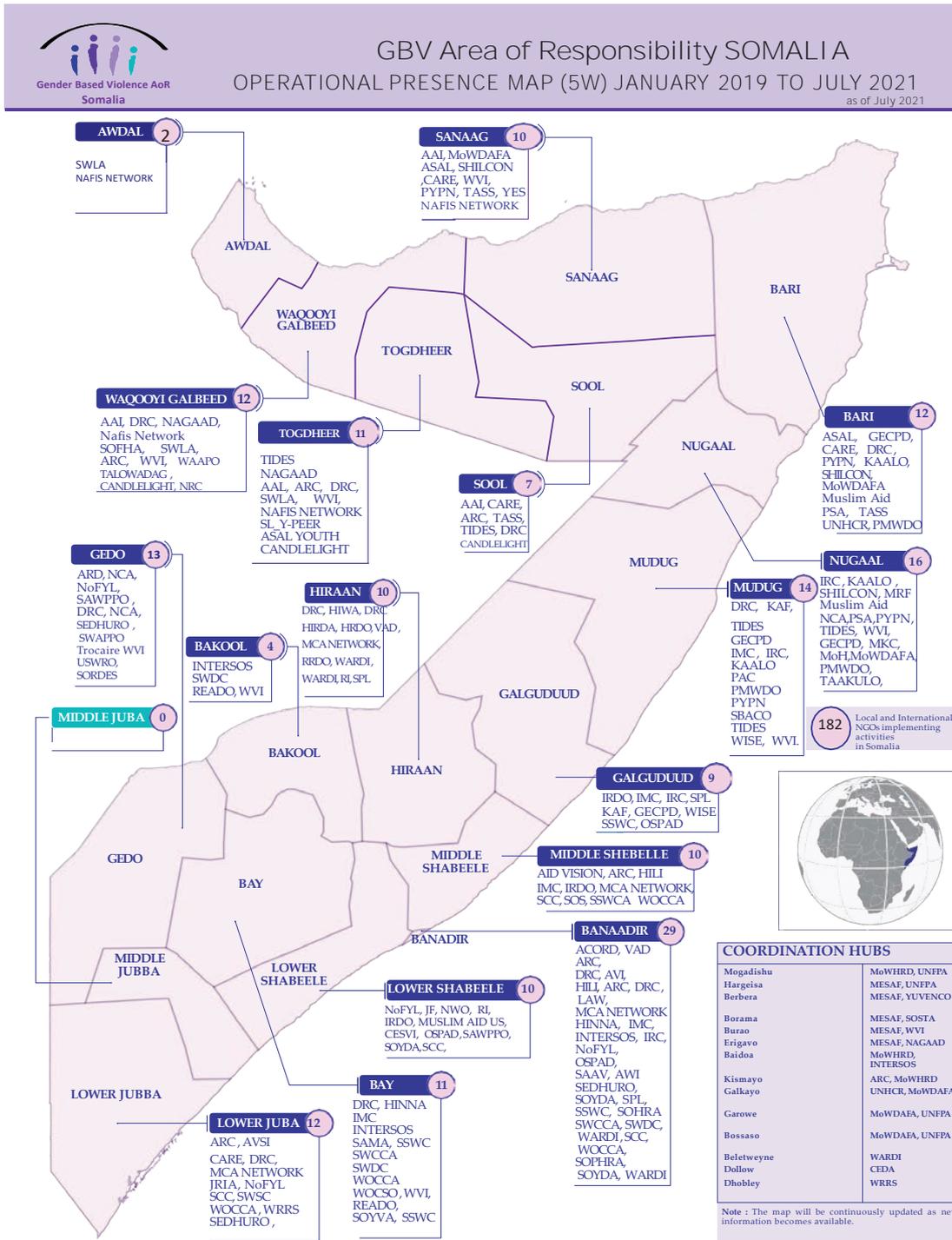
FGD participants noted that increasing transparency in service provision would improve with the availability of sex and gender disaggregated data and information. They explained that the current process for humanitarian distributions were largely not transparent and that the most affected persons in need of assistance do not receive assistance. In addition, GBV experts participating in the discussions noted that the lack of disaggregated data makes it difficult to target beneficiaries and ensure that services are available and accessible: *“there are no clear disaggregated data that specifies the exact target beneficiaries. This information would have been helpful to confirm if those at most risk of GBV were indeed reached”*, as explained by a GBV expert from Federal Member States, Somalia.

“We live in IDP camps, meaning that we are from different places. Some are from Brava, Middle and Lower Jubba. I would request NGOs to carry out a data collection exercise. We all had different occupations: farming, nomadic pastoralism and some people were just displaced. Stop putting us into one basket. Data collection will lead to long-term plans.”

– A community and religious leader from Kismayo district, Lower Juba region, Jubaland

Prevention of Sexual Exploitation and Abuse (PSEA)

FGD participants explained that it was important to continue to enhance the knowledge of humanitarian actors on Prevention Sexual Exploitation and Abuse (PSEA) to remove the possibilities of discrimination and ensure that humanitarian assistance is delivered based on needs of the most affected. It was also important for beneficiaries who receive aid to be aware of how they report cases of PSEA through community-based mechanisms. This will go a long way in improving confidentiality, safety, security and beneficiary satisfaction.



For more info, please visit to Gender-based violence (GBV) page at: <https://www.humanitarianresponse.info/en/operations/somalia/gender-based-violence>

Created: July 2021 Sources: GBV AoR Somalia 5Ws (January 2019 to July 2021),

For more information please contact: GBV AoR Information Management Officer, Abdikhalid Issack Adan-adan-adan@unfpa.org

Annexes

Methodological Approaches for Assessments

Quantitative Data

Quantitative data for Voices was drawn from 4Ws data used to monitor and evaluate GBV programming and interventions. Humanitarian actors in emergencies often encounter challenges in knowing Who is Where, When, and doing What (4Ws) with regard to GBV services and activities. 5Ws information is essential to inform coordination. The 5Ws tool generally aims to map support by GBV and protection actors.

Focus Group Discussion

FGDs conducted by Protection Cluster and GBV Sub-Cluster actors used the following sampling criteria for selecting districts:

- % of IDPs in the district in relation to overall number of IDPs in Somalia
- Population size of district
- Protection and GBV actors reviewed the list of districts and identified capacities of partners, access, feasibility of conducting FGDs.

The GBV AoR conducted five FGDS per district for five states, 17 districts and in 23 IDP camps, with participants disaggregated by sex and age: adolescent girls (age 12-17), adolescent boys (age 12-17), women (age 18 above) and men (age 18 above). Each FGD included between six and 12 participants, constituting a representative sample of the district, i.e., different professions and backgrounds within the district.

Annexed is a glossary of terminology related to protection issues in English. Facilitators were trained on the English tool and glossary during preparation for the roll out, and a Training of Trainers (ToT) package in English was provided, including questionnaire and template. FGDs were based on the humanitarian principles of humanity, impartiality, independence and neutrality and the 'Do No Harm' principle. Participants were

informed that by engaging in the discussion, humanitarian aid would not be delivered in exchange for information. Participants were given the opportunity to make an informed decision about their participation in the FGDs and informed consent was obtained by the facilitators. Privacy of participants and confidentiality of data was ensured.

Moreover, it was ensured that facilitators and note takers were of the same sex as the FGD participants and that facilitators were selected on the basis of having had training on protection issues, on how to respond to disclosures during or after the FGD and on guiding principles of respect, confidentiality, non-discrimination and safety.

Following data collection, the raw data in Somali was shared by GBV AoR partner focal points with UNFPA, as the lead organization of the GBV AoR for translation and data coding (using MAXQDA software). Minimum code taxonomy was provided by GBV, general protection, child protection, and mine action in advance and also comprised geographical data points, as well as age and sex disaggregation, if available. The analysis of FGD data was conducted by each protection sector (gender-based violence, general protection, child protection, mine action).

GBV Expert Focus Group Discussions

The aim of the Expert Focus Group Discussions (FGD) was to agree upon several expert statements on the impact of the crisis with regards to GBV in Somalia and Somaliland. The expert statements complemented data from the quantitative assessments, Focus Group Discussions, as well any other secondary literature data sources. GBV Expert FGDs were conducted in South Central Somalia, Puntland and Somaliland. In all Expert FGDs the Delphi Method was used,

which is a widely used technique for gathering data from respondents within their area of expertise. It is a method which is well suited for consensus building and it has the objective of developing agreed-upon, joint statements of experts on specific issues. All Expert FGD facilitators were protection experts, in particular on GBV issues. They were all neutral in terms of the crisis in Somalia, with an understanding of its context and previous experience in facilitation of this type of FGD. All discussions and information shared in GBV Experts' FGDs were anonymized. An analysis of the GBV Expert FGDs was conducted

by observers, note-takers and facilitators directly after the FGD had taken place. The analysis and coding of this data was streamlined with that of the other qualitative data.

Secondary Literature data desk review

The secondary literature data is comprised of the July 2020 Somalia GBV AoR GBV/FGM COVID-19 rapid assessment, the Somalia 2021 Humanitarian Needs Review, and UN Somalia agency gender reports. The analysis and coding of this data was streamlined with that of the other qualitative data.

Terminology

Abduction

The criminal taking away a person by persuasion, by fraud, or by open force or violence. It is the unlawful interference with a family relationship, such as the taking of a child from its parent, irrespective of whether the person abducted consents or not. Kidnapping is the taking away of a person by force, threat, or deceit, with intent to cause him or her to be detained against his or her will. Kidnapping may be done for ransom or for political or other purposes.

Child or minor

Article 1 of the Convention on the Rights of the Child (CRC) defines a child as “every human being below the age of 18 years unless under the law applicable to the child, majority is attained earlier.” The Committee on the Rights of the Child, the monitoring body for the Convention, has encouraged States to review the age of majority if it is set below 18 and to increase the level of protection for all children under 18. Minors are considered unable to evaluate and understand the consequences of their choices and give informed consent, especially for sexual acts.

Child labour

The term ‘child labour’ is often defined as work that deprives children of their childhood, their potential and their dignity, and that is harmful to physical and mental development. It refers to work that: ▪ is mentally, physically, socially or morally dangerous and harmful to children; and interferes with their schooling by: ▪ depriving them of the opportunity to attend school; ▪ obliging them to leave school prematurely; or ▪ requiring them to attempt to combine school attendance with excessively long and heavy work. In its most extreme forms, child labour involves children being enslaved, separated from their families, exposed to serious hazards and illnesses and/or left to fend for themselves on the streets of large cities — often at a very early age. Whether or not particular forms of ‘work’ can be called ‘child labour’ depends on the child’s age, the type and hours of work performed, the conditions under which it is performed, and the objectives pursued by individual countries.

Confidentiality

An ethical principle associated with medical and social service professions. Maintaining confidentiality requires

that service providers protect information gathered about clients and agree only to share information about a client’s case with their explicit permission. All written information is kept in locked files and only non-identifying information is written down on case files. Maintaining confidentiality about abuse means service providers never discuss case details with family or friends, or with colleagues whose knowledge of the abuse is deemed unnecessary. There are limits to confidentiality while working with children or clients who express intent to harm themselves or someone else.

Conflict-related sexual violence

‘Conflict-related sexual violence’ refers to incidents or (for SCR 1960 listing purposes) patterns of sexual violence, which is rape, sexual slavery, forced prostitution, forced pregnancy, enforced sterilization, or any other form of sexual violence of comparable gravity, against women, men, girls or boys. Such incidents or patterns occur in conflict or post-conflict settings or other situations of concern (e.g., political strife). They also have a direct or indirect nexus with the conflict or political strife itself, i.e., a temporal, geographical and/or causal link. In addition to the international character of the suspected crimes (that can, depending on the circumstances, constitute war crimes, crimes against humanity, acts of torture or genocide), the link with conflict may be evident in the profile and motivations of the perpetrator(s), the profile of the victim(s), the climate of impunity/weakened State capacity, cross-border dimensions and/or the fact that it violates the terms of a ceasefire agreement’.

Consent/informed consent

Refers to approval or assent, particularly and especially after thoughtful consideration. Free and informed consent is given based upon a clear appreciation and understanding of the facts, implications and future consequences of an action. In order to give informed consent, the individual concerned must have all adequate relevant facts at the time consent is given and be able to evaluate and understand the consequences of an action. They also must be aware of and have the power to exercise their right to refuse to engage in an action and/or to not be coerced (i.e., being persuaded based on force or threats). Children are generally considered unable to provide informed consent because they do not have the ability and/or experience to anticipate the implications of an action, and they may not understand or be empowered to exercise their right to refuse. There are also instances where consent might not be possible

due to cognitive impairments and/or physical, sensory or intellectual disabilities.

Denial of Resources, Opportunities or Services

Denial of rightful access to economic resources/assets or livelihood opportunities, education, health or other social services. Examples include a widow prevented from receiving an inheritance, earnings forcibly taken by an intimate partner or family member, a woman prevented from using contraceptives, a girl separated from attending school, etc. Economic abuse is included in this category. Some acts of confinement may also fall under this category.

Disability

Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others. (UN Convention on the Rights of Persons with Disabilities)

Domestic violence (DV) and intimate partner violence (IPV)

While these terms are sometimes used interchangeably, there are important distinctions between them. 'Domestic violence' is a term used to describe violence that takes place within the home or family between intimate partners as well as between other family members. 'Intimate partner violence' applies specifically to violence occurring between intimate partners (married, cohabiting, boyfriend/girlfriend or other close relationships), and is defined by WHO as behavior by an intimate partner or ex-partner that causes physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviors. This type of violence may also include the denial of resources, opportunities or services.

Economic abuse / Violence

An aspect of abuse where abusers control victims' finances to prevent them from accessing resources, working or maintaining control of earnings, achieving self-sufficiency and gaining financial independence.

Emotional abuse (also referred to as psychological abuse)

Infliction of mental or emotional pain or injury. Examples include threats of physical or sexual violence, intimidation, humiliation, forced isolation, social exclusion, stalking,

verbal harassment, unwanted attention, remarks, gestures or written words of a sexual and/or menacing nature, destruction of cherished things, etc. 'Sexual harassment' is included in this category of GBV.

Empowerment of women

The empowerment of women concerns women gaining power and control over their own lives. It involves awareness raising, building self-confidence, expansion of choices, increased access to and control over resources, and actions to transform the structures and institutions that reinforce and perpetuate gender discrimination and inequality.

Female Genital Mutilation/Cutting (FGM/C)

All procedures involving partial or total removal of the external female genitalia or other injury the female genital organs for non-medical reasons. It is a deeply entrenched social and cultural norm in many places

Forced marriage and child (also referred to as early) marriage

Forced marriage is the marriage of an individual against her or his will. Child marriage is a formal marriage or informal union before age 18. Even though some countries permit marriage before age 18, international human rights standards classify these as child marriages, reasoning that those under age 18 are unable to give informed consent. Therefore, child marriage is a form of forced marriage as children are not legally competent to agree to such unions.

Gender

Refers to the social attributes and opportunities associated with being male and female and the relationships between women and men and girls and boys, as well as the relations between women and those between men. These attributes, opportunities and relationships are socially constructed and are learned through socialization processes. They are context/ time-specific and changeable. Gender determines what is expected, allowed and valued in a woman or a man in a given context. In most societies there are differences and inequalities between women and men in responsibilities assigned, activities undertaken, access to and control over resources, as well as decision-making opportunities. Gender is part of the broader socio-cultural context.

Gender-based violence

An umbrella term for any harmful act that is perpetrated

against a person's will and that is based on socially ascribed (i.e., gender) differences between males and females. The term 'gender-based violence' is primarily used to underscore the fact that structural, gender-based power differentials between males and females around the world place females at risk for multiple forms of violence. As agreed in the Declaration on the Elimination of Violence against Women (1993), this includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty, whether occurring in public or in private life. The term is also used by some actors to describe some forms of sexual violence against males and/or targeted violence against LGBTI populations, in these cases when referencing violence related to gender-inequitable norms of masculinity and/or norms of gender identity.

Gender-disaggregated data

The collection of data on males and females separately in relation to all aspects of their functioning-ethnicity, class, caste, age, location, etc.

Gender Equality

This refers to the equal rights, responsibilities and opportunities of women and men and girls and boys. Equality does not mean that women and men will become the same but that women's and men's rights, responsibilities and opportunities will not depend on whether they are born male or female. Gender equality implies that the interests, needs and priorities of both women and men are taken into consideration, recognizing the diversity of different groups of women and men. Gender equality is not a women's issue but should concern and fully engage men as well as women. Equality between women and men is seen both as a human rights issue and as a precondition for, and indicator of, sustainable people-centered development.

Gender roles

A set of social and behavioral expectations or beliefs about how members of a culture should behave according to their biological sex; the distinct roles and responsibilities of men, women and other genders in a given culture. Gender roles vary among different societies and cultures, classes, ages and during different periods in history. Gender-specific roles and responsibilities are often conditioned by household structure, access to resources, specific impacts of the global economy, and other locally relevant factors such as ecological conditions.

Harmful traditional practices

Cultural, social and religious customs and traditions that can be harmful to a person's mental or physical health. Every social grouping in the world has specific traditional cultural practices and beliefs, some of which are beneficial to all members, while others are harmful to a specific group, such as women. These harmful traditional practices include female genital mutilation (FGM); forced feeding of women; child marriage; the various taboos or practices that prevent women from controlling their own fertility; nutritional taboos and traditional birth practices; son preference and its implications for the status of the girl child; female infanticide; early pregnancy; and dowry price. Other harmful traditional practices affecting children include binding, scarring, burning, branding, violent initiation rites, fattening, forced marriage, so-called honor crimes and dowry-related violence, exorcism or 'witchcraft'.

Honour Killings

Violence stemming from a perceived desire to safeguard family "honour", which in turn is embodied in female behaviour that challenges men's control women, including control exerted through sexual, familial and social roles and expectations assigned to women by traditional ideology. Such female behavior may include adultery, extramarital sex, premarital relationships that may or may not include sexual relations, rape, dating someone unacceptable to the family and violations of restrictions imposed on women and girls' dress, employment or educational opportunities, social lifestyle, or freedom of movement.

Perpetrator

Person, group or institution that directly inflicts or otherwise supports violence or other abuse inflicted on another against his/her will.

Physical assault/Violence

An act of physical violence that is not sexual in nature. Examples include hitting, slapping, choking, cutting, shoving, burning, shooting or use of any weapons, acid attacks or any other act that results in pain, discomfort or injury.

Protection from sexual exploitation and abuse (PSEA)

As highlighted in the Secretary-General's 'Bulletin on Special Measures for Protection from Sexual Exploitation and Sexual Abuse' (ST/SGB/2003/13), PSEA relates specifically to the responsibilities of international humanitarian, development and peacekeeping actors to prevent incidents of sexual

exploitation and abuse committed by United Nations, NGO, and inter-governments (IGO) personnel against the affected population, to set up confidential reporting mechanisms, and to take safe and ethical action as quickly as possible when incidents do occur.

Rape

Physically forced or otherwise coerced penetration—even if slight—of the vagina, anus or mouth with a penis or other body part. It also includes penetration of the vagina or anus with an object. Rape includes marital rape and anal rape/sodomy. The attempt to do so is known as attempted rape. Rape of a person by two or more perpetrators is known as gang rape.

Separated child

A child separated from both parents, or from their previous legal or customary primary caregiver, but not necessarily from other relatives. These may, therefore, include children accompanied by other adult family members.

Sexual abuse

The term ‘sexual abuse’ means the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions

Sexual assault

Any form of non-consensual sexual contact that does not result in or include penetration. Examples include attempted rape, as well as unwanted kissing, fondling, or touching of genitalia and buttocks.

Sexual exploitation

The term ‘sexual exploitation’ means any actual or attempted abuse of a position of vulnerability, differential power or trust for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another. Some types of forced and/or coerced prostitution can fall under this category.

Sexual harassment

Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature.

Sexual violence

For the purposes of this publication, sexual violence includes, at least, rape/attempted rape, sexual abuse and sexual exploitation. Sexual violence is “any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances,

or acts to traffic a person’s sexuality, using coercion, threats of harm or physical force, by any person regardless of relationship to the victim, in any setting, including but not limited to home and work”. Sexual violence takes many forms, including rape, sexual slavery and/or trafficking, forced pregnancy, sexual harassment, sexual exploitation and/or abuse, and forced abortion.

Survivor

A survivor is a person who has experienced gender-based violence. The terms ‘victim’ and ‘survivor’ can be used interchangeably. ‘Victim’ is a term often used in the legal and medical sectors. ‘Survivor’ is the term generally preferred in the psychological and social support sectors because it implies resiliency.

Trafficking in persons

The recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.

Unaccompanied child

A child who has been separated from both parents and other relatives and is not being cared for by an adult who, by law or custom, is responsible for doing so. This means that a child may be completely without adult care or may be cared for by someone not related or known to the child, or not their usual caregiver, e.g., a neighbour, another child under 18, or a stranger.

Victim

A victim is a person who has experienced gender-based violence. The term recognizes that a violation against one’s human rights has occurred. The terms ‘victim’ and ‘survivor’ can be used interchangeably. ‘Victim’ is a term often used in the legal and medical sectors. ‘Survivor’ is the term generally preferred in the psychological and social support sectors because it implies resiliency.

