

Addressing sexual violence against Syrian refugees in Jordan through a multi-sectorial approach

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Share-Net
International



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Background



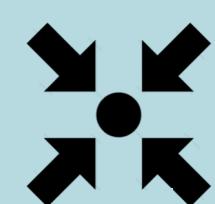
Sexual violence (SV) is an aggressive act that is rarely related to sexual desire, but rather stems from the determination to control and humiliate a population.



Prolonged displacement may increase the risk of SV and for this reason, Syrian refugees in Jordan are considered to be particularly vulnerable to such violence.



Factors that exacerbate the risk of SV are related to the deteriorating socio-economic situation of refugees in Jordan, and may include early marriage, shifting gender roles, crowded living conditions and poor working environments.



The commitment of multiple actors is required to address the complex needs of survivors, as SV not only affects the health of survivors, but also undermines their legal rights and security.

Research aim

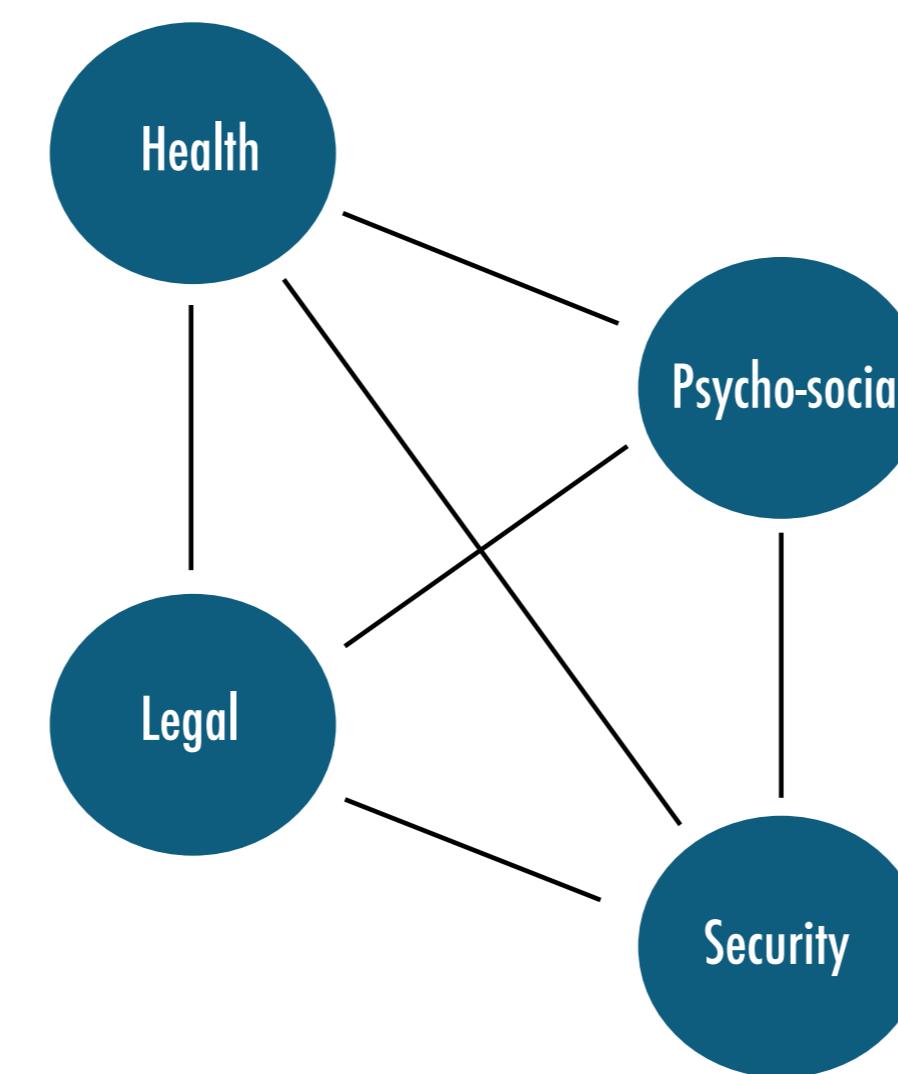
To investigate if and how multi-sectorial approaches are applied to prevent and respond to sexual violence against Syrian refugees in Jordan, in order to make recommendations to policy makers and practitioners dealing with sexual violence in Jordan.

Key references

Horga, I., Nicoara, B., & Abaszaide, N. (2015). *Multi-sectorial response to GBV: An effective and coordinated way to protect and empower GBV victims/survivors*. Istanbul, Turkey: UNFPA Regional Office for Eastern Europe and Central Asia (UNFPA EECARO). http://femroadmap.eu/MSR_Generic_model_eng.pdf

United Nations High Commissioner for Refugees (UNHCR). (2003). *Sexual and gender-based violence against refugees, returnees and internally displaced persons; Guidelines for prevention and response*. https://www.unicef.org/emerg/files/gl_sgbv03.pdf

Conceptual framework



Method

Convenience sampling by using the network of Share-net Jordan and KIT Royal Tropical Institute.

6 semi-structured interviews with key experts from local NGOs, international NGOs and UN agencies.

Data analysis in Excel by using structured coding.

Results

Health and **psycho-social** needs of survivors are prioritized and doctors, psychologists and nurses often work together in teams.

- Health is considered a humanitarian issue rather than a starting point for developmental activities.
- Lack of specialised psycho-social services that focus on long-term recovery support.

Legal and **security** support are considered a second priority and are often accessed through referral.

- Seeking legal assistance is highly stigmatised.
- Lack of shelter opportunities.

Underreporting of SV is a great challenge for service providers. Reasons for this include social stigma, embarrassment and fear of retaliation by the perpetrator.

Awareness raising of SV and gender stereotyping in society is a fundamental component of prevention strategies and is often carried out collaboratively by different organisations.

Conclusion & Discussion

Although organisations aim to provide their services in a multi-sectorial way, integration of health and psycho-social services is more advanced compared to legal and security services, which are mostly offered by separate organisations. However, underreporting and stigma often prevent survivors from accessing services in the first place.

Limitations

Small sample size, poor representation of legal and security sector.

Strengths

In-depth interviews with experts from the field.

Future directions

- Engaging men and boys to change community attitudes.
- Move to sustainable SV interventions that provide long-term support to survivors.