ON THE MOVE AND IGNORED: Responding to GBV in European Refugee Crisis

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Sarah Martin, Marcy Hersh, Sarah Moseley
Background

- In 2015 – 2016, significant refugee movement of Syrians and Afghans to Europe
- 2015: 1 million refugees in 2015, 2016: Jan-March, 171,000
- EU-Turkey deal to stop the flow left thousands stranded or resorting to the “overland route” through Bulgaria.
- Following the “Balkan Route” to preferred countries of Germany and Sweden.
Data Collection

- IRC and Women’s Refugee Commission conducted a number of assessments in Europe from Autumn 2015 to August 2016
- Germany (Berlin): FGD with asylum seekers (male and female), KII (single women, widows, lesbians, adolescent girls), visits to shelters, and meetings with feminist groups and local NGOs.
- Serbia: Visit to borders w/Croatia/Hungary/Bulgaria/Macedonia, interviews with women, working with Atina (local women’s org)
- Bulgaria/Albania/Macedonia/Hungary: Field visits to refugee sites, interviews with women, local NGOs, local volunteers and government authorities
- Greece: Visits to camps and islands, interviews with women, volunteers, local NGOs
Women and Girls

- May 2015: 10% women
- January 2016: 30% women
- No sex disaggregated data from many agencies—many not registered with UNHCR.
- Women faced: separation from their families, enduring psychosocial stress, physical harm and sexual exploitation, sexual harassment, and sexual assault (from authorities, criminals and other refugees), and increased health complications for pregnant women
- Contrary to popular belief, many traveled alone or were head of family.
- Often traveling alone, and dependent on smugglers, further exposing them to sexual violence.
Humanitarian Response

- Refugee organizations were slow to respond, significant part of early response lead by volunteers who were un-trained
- INGOs slow to deploy- concern about whether or not they can work in Europe as responders. Gender-blind response.
- Countries “race to the bottom” to provide worst services as disincentive for refugees to stay. Ex. Hungary and Bulgaria.
- Very little gender response in any country.
UNHCR’s spokesperson said “I don’t see how there’s a gender issue here, honestly, these issues happen when you register women in refugee camps, when certain people get privileges and aid and others don’t, things like that. There’s not even time for that ... [Sexual assault or exploitation] is definitely not the problem... Women are not traveling alone, they are traveling with their husbands, or in large family groups, with 20 or 25 people, which in itself is the protection system they usually also have at home.”
GBV Services?

- Lack of Clinical Care for Sexual Violence
- Very few countries allowed PEP – emergency contraception also rare.
- Very few female translators
- No GBV experts in humanitarian organizations
- No Private Spaces for women, no safe spaces/houses in many countries (only 2 beds in all of Macedonia)
- No Formal Case Management (some in Serbia)
- No Gender Sensitive Advice for Asylum Seekers
- Racist attitudes to refugees “in their culture, they don’t mind being beaten”
Same Old Problems

• No separate shelters for women traveling alone or women-headed households
• Few sex-segregated toilets or showers, none with locks or lights
• No systems in place to report Sexual Exploitation
• Male security guards and male translators
• Expected to report to all male police
Greece

- Over 200 million euros given to improve refugee conditions but where did it go?
- Brothels being operated inside camps, aid workers not there overnight
- Violence between men of different countries
- Very little local capacity
- Clinical care for rape difficult to access
- Women afraid to leave shelters because of sexual harassment.
Macedonia/Greek Border

• Women stuck in the “no man’s land” for months with no support and no chance to apply for asylum after abusive husband left her behind.

• Young girls afraid to leave the pre-fab housing with no power.

• Only 2 beds in 1 safe house for whole country of Macedonia, no female translators.
Bulgaria

• Little understanding of women’s needs aside from pregnancy care and no services tailored specifically for women or childcare.
• Most social workers and social mediators lack any training to identify and support GBV survivors – burned out.
• Most lack training in clinical care for sexual assault survivors (CCSAS).
• Few female translators and no proactive programming to create an environment for women to discuss their problems.
Serbia/Hungary Border

- Pregnant women living in the “no man’s land” between the two countries.
- Women living in tents next to men, refugee men make decisions about who crosses border
- No GBV or women’s services for refugees in Hungary
Germany

- Women can “relax” and are now coming to terms with the violence they experienced.
- Still problems in shelters (toilets, showers, security)
- Rights education has been welcomed.
- Fears about finding jobs/education.
Focus on Men

Protection

The Missing Women in the Refugee Response
Violence against men eclipsed violence against women

- Who were the perpetrators?
  - Border Guards
  - Smugglers
  - Other Refugees
  - Family Members

- Despite there being almost no services for women in Greece, int’l aid workers complained that focus was too much on women and should shift focus. “women get too much”

- Men took over women-safe spaces in Greece; loitering around breastfeeding spaces in Serbia, No barriers to women areas in refugee centers in Bulgaria, food distributions became dangerous. Trafficking was rampant.

- Yet very little media attention to the violence refugee women faced except for political purposes to push back against “savage refugee men”
What happened?

• Normally the excuse to fail to respond is:
  – Not enough money/Hard to recruit staff/ Language barriers
  – Too busy providing life saving interventions
  – Unstable governments, insecurity, difficult operating environment

• The European Union provides plenty of funding, proper infrastructure in countries, and stable governments.
Resource Mobilization?

• Donors failed to prioritize funding for GBV programs in Europe, leaving little support for local women’s networks, the frontline GBV service providers.
• INGOs and UN slow to respond to GBV as well. First training for local NGOs conducted May, 2016 for 9 countries and 22 orgs. “Blue Dot” resources still not rolled out in most places by August 2016.
• Funding is now “tight to non-existent” particularly for GBV in Europe.
Do they see us? Do they hear us?

• Humanitarian response de-incentivized GBV survivors leading to an “out of sight, out of mind” approach to GBV and mental health: In some countries, in order to receive services, a survivor must file an official report with the police which de-incentivizes women from disclosing as they may fear being detained or separated from their travelling group.
No Political Will

• GBV and the needs of women and girls are low on the agenda for humanitarian response in the European crisis.

• Women are low on the agenda for many of the countries that hosted refugees – trafficking, IPV, sexual assault laws are weak.

• Exposed the lack of support for GBV for European women as well – can we fix this?
Unprepared

- **Services for GBV survivors are piecemeal**: Service providers in Europe were unaware of international minimum standards or guiding principles that underpin quality protection response. Many smaller NGOs have little knowledge about EU legal frameworks that can be used to support refugees including legislation on domestic violence and human trafficking. No GBV in contingency planning.
- **Can we shift to bridge the development-to-relief gap?**
Women seen as only powerless

Little understanding of how to reach women and girls refugees, how they make decisions, or what information they need in order to mitigate GBV risks or seek services.

The agency of women on the move, their information needs, and their strategies for survival has been little documented nor included in protection strategies.