The Global Women's Institute
THE GEORGE WASHINGTON UNIVERSITY

IRC & GWI Dignity Kit Distribution, Empowered Aid Pilot 2

Point of Distribution Questionnaire
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Executive Summary

As part of Empowered Aid, the International Rescue Committee (IRC) Uganda and the Global Women's Institute (GWI) are working to adapt tools for monitoring distributions to more proactively identify risks for sexual exploitation and abuse (SEA) and take action to mitigate them. These tools build on the findings from Empowered Aid's first phase, which identified ways in which the distribution process can put women and girls at risk of SEA, and how to mitigate those risks.[1] In May 2020, IRC and GWI conducted a dignity kit distribution in all zones of Bidi Bidi refugee settlement in Northwest Uganda to 880 women and girls of reproductive age and matching certain vulnerability criteria. The distribution applied one of the recommendations from Phase 1: organizing aid recipients in small groups to come at pre-assigned times,

[1] For more information about Empowered Aid, visit https://globalwomensinstitute.gwu.edu/empowered-aid. Findings from the first phase in Uganda can be found in the report online here: https://globalwomensinstitute.gwu.edu/empowered-aid-resources.

to minimize crowding and confusion at distribution points. Women and girls were assigned to groups of 20, with each group pre-assigned a time to arrive at the distribution site (in this case, the IRC Women & Girls Centers) to collect their dignity kits.

This distribution method also happens to be supportive of maintaining social-distancing protocols related to the COVID-19 pandemic, which started after the second phase of research had begun and required further adaptations to the distribution monitoring process to maximize safety of both staff and target recipients. Within each group of 20, 4 women were randomly selected to take part in a short 4-question questionnaire, making the total sample of 176 women and girls. This questionnaire replaced plans for a longer household survey, which was not possible due to COVID-19 regulations; plans for focus group discussions were also dropped. Safety audits were still conducted, as they are observational tools that do not require interactions or proximity to aid recipients.

This report summarizes the analysis from the short "point of distribution" questionnaire (PODQ), covering four main areas on women's experiences in relation to distributions: information and communication, feelings of fear during the distribution process, SEA risk during aid distribution, and reporting mechanisms and accessing services.

"Yes they happen, now that due to corona people need support anything can happen, some girls were made pregnant by drivers but have been abandoned" – Woman living in Uganda as a refugee

Information and Communication findings

Megaphones, microphones, other mobile announcement systems (vans with megaphones communicating distribution information) and door-to-door mobilization are used to share information about distributions, with NGO volunteers and community leaders often communicating such information. Men and boys were reported as more likely to hear information communicated via announcement

"Physical violence has become common especially when men are selling part of the food received and if the women resist, they are beaten" – Woman living in Uganda as a refugee

systems in public spaces, while women and girls were more likely to hear information communicated via door-to-door mobilization.

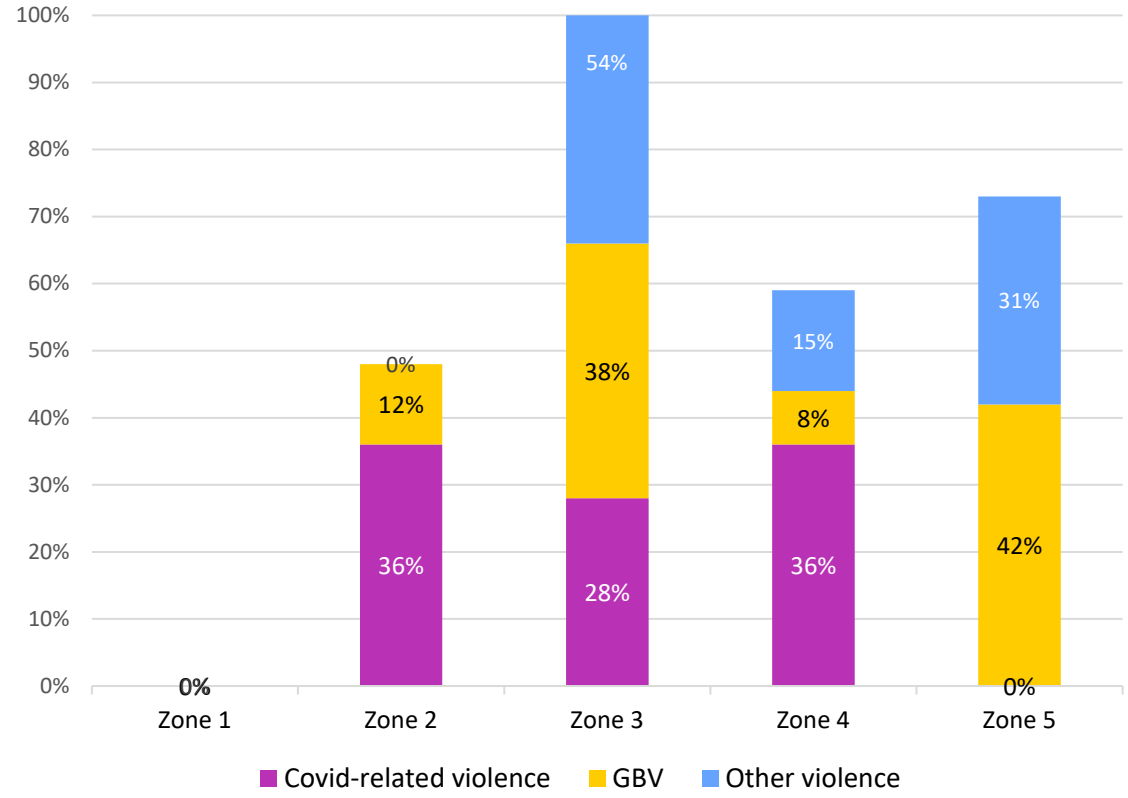
Feelings of fear during the distribution process

Overall, 81% (134) of respondents reported that they felt fear throughout the distribution process in relation to 3 main categories: (1) fear of COVID-19 exposure, restrictions, or enforcement of those restrictions, (2) fear of gender-based violence, and (3) fear of other types of violence. Feelings of fear were most frequently reported while at the distribution point, followed by traveling to and from the distribution point. COVID-19 related fears were particularly reported at distribution points due to crowding and

coming into contact with other people (especially those who don't abide by social distancing or other COVID-19 prevention measures) as well as fear of police and security using physical violence to enforce social distancing measures.

Gender-based violence related fears were most common in regard to intimate-partner violence (IPV), with that fear stemming from being unable to securely store or maintain aid from partners. For example, husbands may steal or attempt to steal food aid and abuse their partner if she protests, or husbands can inflict violence on their wives if they are late returning with the food aid, or accuse them of potentially infecting the husband with COVID-19 after attending a distribution. Other fears related to gender-based violence include fear of rape when traveling to and from distributions, sexual assault while waiting in line for aid, and increased early or teen pregnancies due to the lockdown and closure of schools and businesses, but respondents did not identify a point in the distribution when this was a concern. Other violence-related fear stemmed primarily from COVID-19 exposure fear and restrictions at the distributions or when walking home.

Figure 1: Women reporting feelings of fear during the distribution process: COVID-19 violence fear vs. GBV fear vs. other violence fear per zone (n=53)



SEA risk during aid distribution

Over a third (37%, n=65) of respondents reported SEA risks in aid distribution. Risk was most often mentioned in relation to food aid distributions but other types of aid mentioned were also mentioned including WASH, education, health, shelter, and energy needs. NGO volunteers and security personnel were reported as those most likely to perpetrate SEA or put women and girls at risk, using their position of access to food aid to sexually exploit women and girls. Respondents also reported that COVID-19 lockdown and restrictions further expanded SEA risk as businesses/places of work and schools were shut down, placing women and girls in even more desperate need for income or basic necessities. Aid workers, transport drivers such as truck or boda boda drivers, NGO volunteers, and security personnel were reported as taking advantage of this exacerbated unequal power dynamic, perpetrating sexual exploitation and abuse by offering access to basic needs in exchange for sex.

Figure 2: Women reporting fear during the distribution process (n=134 due to non-response)

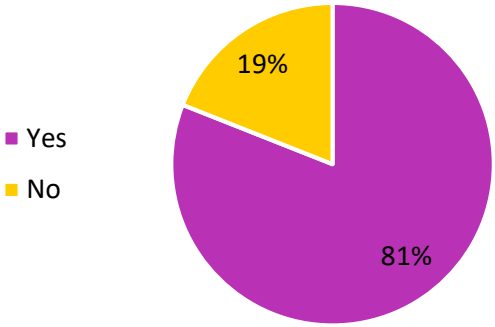
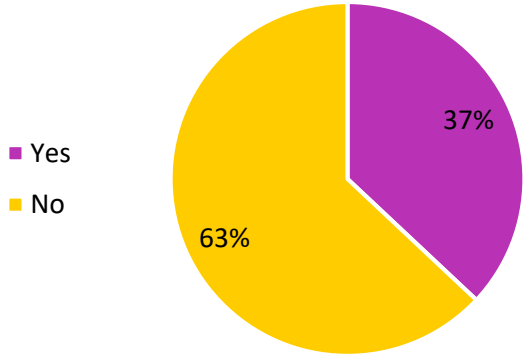


Figure 3: Women reporting SEA Risk in aid distribution processes (n=176)



Reporting mechanisms and accessing services

Respondents overwhelmingly (91%, n=176) stated that they could go to Women & Girls Centers to report complaints, provide feedback, and obtain support and services, with 45% of those respondents stating they would feel *most comfortable* accessing services from Women & Girls Centers. However, some women noted challenges around accessing services during lockdown since they weren't able to leave their homes and the Women and Girls Centers were closed. Other places where respondents stated they could report complaints and access services included information support centers, community leaders, trusted friends or family members, and police. However, in terms of where they would be *comfortable* reporting, no respondents stated they felt comfortable reporting to police.

Recommendations

1. **Ensure that IRC Women and Girls Centers are well staffed with social workers and volunteers,** as these workers play a critical role critical in women and girls' ability to access services and report complaints. Not only were they most frequently mentioned as a place woman could go to obtain support, respondents overwhelmingly pointed to IRC Women and Girls Centers as where they feel most comfortable reporting complaints and accessing services. Women and Girls Centers should also have lockable doors and sex segregated to improve safety because the Centers are not fenced, and any community member can access the latrines. For more specific information on latrine issues, see the *Pilot 2 Dignity Kits Safety Audit Report*.

2. **Hire more female security personnel at food distribution points and provide PSEA trainings for security personnel,** or include them in staff and volunteer trainings prior to starting their role Women and girls reported fear of violence used by security personnel who attempt to stop crowding and ensure social distancing at food distribution points. While these measures are important, it is also critical to reduce violence at distribution points so that women can receive their food free of fear and will be less likely to seek other ways to access food that could put them at risk of SEA.

3. **Implement door-to-door mobilization that targets women and girls for future distributions in addition to megaphone/microphone and mobile van announcements to ensure information is delivered more equally amongst women, girls, men, and boys**. According to the PODQ findings, women and girls were more likely to hear about distributions through door-to-door mobilization since they are at home more often. By increasing door-to-door mobilization by NGO volunteers or community mobilizers before distributions, women and girls may have better access to information, reducing their risk of SEA by those who may seek to exploit their lack of knowledge.

4. **Continue PSEA awareness raising activities with community members, particularly as respondents identified COVID-19 restrictions as increasing SEA risk.** IRC's WPE and protection activities provide a critical platform through which PSEA messages can be shared with community members, such as through the *Listen Up!* program. Key messages can be delivered at Women and Girls Centers, protection desks, and in collaboration with World Vision at distribution points (such as through pre-addresses or community help desks). Zones 3 and 5 should be targeted with increased outreach as respondents from these zones reported the highest SEA risk.

5. **Implement recommendations women, girls, and other aid recipients shared to make distribution points safer.** Distribution points were most frequently reported as the place where women experienced the most fear during the distribution process. Based on Empowered Aid's findings from Phase I and other pilots, World Vision, IRC, and other NGOs should implement recommendations women and girls have made to increase their feelings of safety at distributions,

including sex-segregated lines, increased female staff and volunteers working at the distribution, and transport support.

6. **Expand ways of working with communities to prevent early marriage and teenage pregnancy, taking special care to prevent SEA by COVID-19 related drivers.** Distributions represent one way that aid actors interact with large swaths of the refugee community at a time when many other centers and activities have been shut down or minimized, including the IRC Women and Girls Centers. IRC can collaborate with World Vision to deliver key messages on SEA, early marriage, and teen pregnancy prevention as part of mobilization and pre-address announcements, as well as through visual and low-literacy signage at distribution points. IRC Women and Girls Centers and protection desks represent important information and referral points and should also help to deliver SEA prevention messaging. These entities should collaborate with other NGOs such as World Vision. Additionally, usage of IRC's existing early marriage programming is encouraged.

7. **Display more visual aids on COVID-19 prevention and restriction measures at all IRC Women and Girls Centers**. Fear of exposure to COVID-19 or enforcement of COVID-19 restrictions were mentioned more than any other fear (74%). Awareness materials for those with low literacy level should also be displayed at the Centers.

Overview of the Distribution

From May 14 – 29, 2020, the International Rescue Committee Uganda (IRC) and the Global Women's Institute (GWI) distributed 880 dignity kits to a targeted group of women and girls living in Bidi Bidi refugee settlement. Dignity kits support the health, safety and dignity of women and girls. These kits were packed in a bucket and included soap, panties, pads, kanga fabric, and Vaseline. The kits were procured by the Empowered Aid Uganda team prior to the COVID-19 pandemic, with the intention of executing a pilot to test the recommendations arising from Empowered Aid's first phase and adapt distribution monitoring tools to better measure SEA risk and safety in aid distribution.

With the onset of the COVID-19 pandemic, IRC and GWI decided to distribute the dignity kits despite the inability to execute a full-scale pilot, as the community exhibited continued need for dignity kits. The IRC Women's Protection & Empowerment (WPE) and Protection & Rule of Law (PRoL) teams identified women and girls of reproductive age (12-45 years) from their databases who met vulnerability criteria including female- and child-headed households, women and girls living with disabilities, persons with special needs (PSNs), extremely vulnerable individuals (EVIs), active GBV cases, and GBV survivors. After the Empowered Aid Project Officer and WPE Manager generated a list of 880 aid recipients, WPE Community Volunteers conducted door-to-door mobilization for the distribution, visiting the women and girls at their homes to inform them of the location, time, and date of the distribution and sharing key messages on SEA and COVID-19 preventative measures.

To protect the health and safety of all involved in the distribution and monitoring exercises, the IRC and GWI team reduced the number of monitoring tools tested. Specifically, the household survey and focus groups were dropped completely. The team maintained safety audits and developed a brief (4 questions) survey to be administered at the point of distribution to 20% of aid recipients. This shortened survey allowed women and girls to provide feedback on whether the distribution met their needs, and also on COVID-related issues that they may not otherwise be able to communicate to IRC due to new limitations of services and mobility. Minimizing interactions to only occur at the distribution site is one example of how the team prioritized safety in all distribution decisions.

The distribution applied one of the recommendations from Phase 1: organizing aid recipients in small groups to come at pre-assigned times, to minimize crowding and confusion at distribution points. Women and girls were assigned to groups of 20, with each group pre-assigned a time to arrive at the distribution site to collect their dignity kits. This distribution method also happens to be supportive of maintaining social-distancing protocols related to the COVID-19 pandemic. The distribution took place outside IRC's Women and Girls Centers in each zone. Targeted women and girls waited at designated points that were spaced 6 feet apart, either drawn by circles or marked by rocks. An IRC WPE staff member would then give the dignity kits to the women and girls and once all were handed out, the group could leave while still maintaining social distance. If an aid recipient needed further assistance or wanted to ask questions in private, they could ask to speak to a social worker. At the distribution, IRC staff and community volunteers relayed messages on SEA and COVID-19 prevention to each group of women and girls

The Point of Distribution Questionnaire was administered by a team of trained IRC WPE staff and community volunteers who supported translation at each distribution site and focused on four key

questions on distribution information-communication, fear in the distribution process, SEA risk, and accessing complaint mechanisms and services. Within each group of 20 women and girls, every 4th woman was selected to take part in a short, 4-question questionnaire, making the total sample of 176 women. No girls were included in the sample as consent was taken immediately before the interview and the research team could not guarantee a parent or guardian would be on site to agree to consent for the survey. All those selected for the questionnaire agreed to complete it. No demographic or descriptive data was collected to reduce the amount of time spent with each respondent, but the zone and Women's Center at which the distribution occurred was captured. Due to COVID-19 safety measures, no other groups were surveyed except for the aid recipients.

Table 1: Number of aid recipients and percent included in sample

Zone	# DKs distributed to women & girls	# Women sampled for PDM	Percentage
Zone 1	160	32	20%
Zone 2	160	33	20%
Zone 3	240	47	20%
Zone 4	160	32	20%
Zone 5	160	32	20%
Total	**880**	**176**	**20%**

Summary of Findings

Information and Communication on Aid Distributions

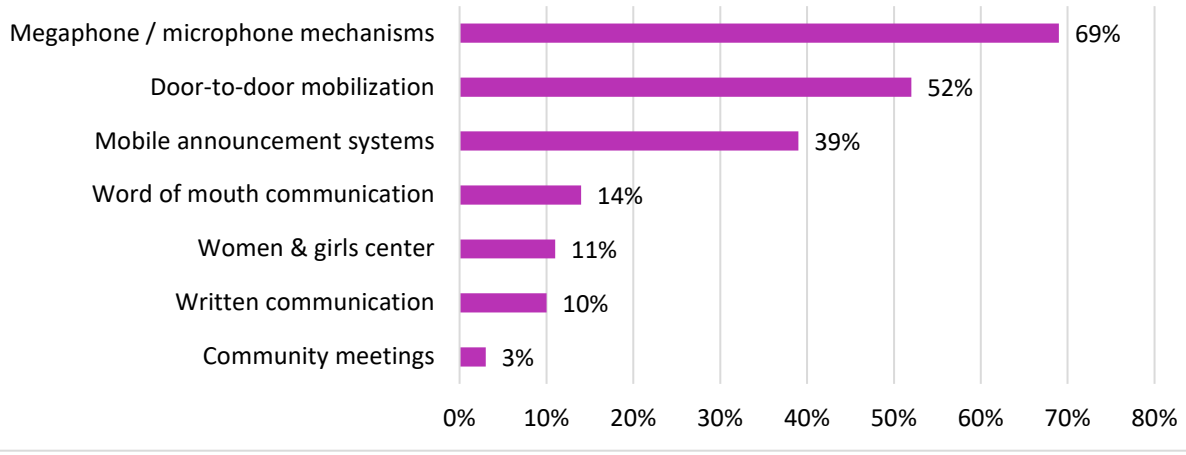
Methods of receiving information

Megaphones and microphones (69%), other mobile announcement systems such as vans or boda bodas, with megaphones communicating distribution information (39%), and door-to-door mobilization (52%) were most frequently used to share information about distributions. Community leaders, RWCs, and NGO staff and volunteers move through villages with megaphones and microphones and make announcements amongst the refugee community about upcoming distributions.

When executing door-to-door mobilization, NGO volunteers visit aid recipients at their homes and deliver distribution information. This method was used for the dignity kit distribution. Mobile announcement vehicles drive on major roads through the settlements announcing distribution information. Other methods that women reported being used to deliver information on distributions included word of mouth communication from friends or neighbors (14%), social workers or WPE volunteers sharing distribution information at IRC Women and Girls Centers (11%), written communication such as flyers or other visuals

(10%), and lastly, community meetings held by community leaders who share information on the distribution (3%).

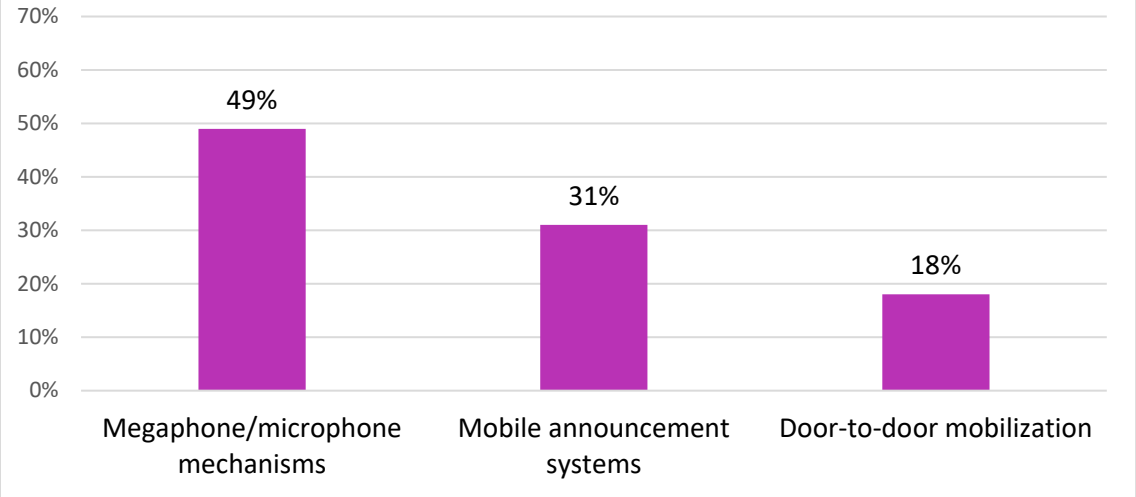
Figure 4: Methods of receiving information on distributions identified by women (n=176)



Most effective methods for communicating the information

The three most effective methods of communication on distributions stated by respondents were megaphone/microphone mechanisms, mobile announcement systems, and door-to-door communication or mobilization. Other methods mentioned as most effective included community meetings, sharing by word of mouth such as phone calls, sharing at the IRC Women & Girls Centers, and written communication methods.

Figure 5: Three most effective methods to communicate distribution information identified by women (n=119)



The method most frequently stated as the most effective method of communication were megaphone/microphone mechanisms. The reasons given for this include:

Megaphones, microphones, and mobile announcement systems can communicate the information quickly to a larger group of people, cater to illiteracy, and deliver information at a safe social distance that adheres to COVID-19 safety measures. However, some respondents' stated the megaphones don't reach far off houses and people who don't leave their homes, such as the elderly.

> *"Use of megaphones is the best method because it can reach many people at once and also cater for those who are far from the road."* – Woman living in Uganda as a refugee

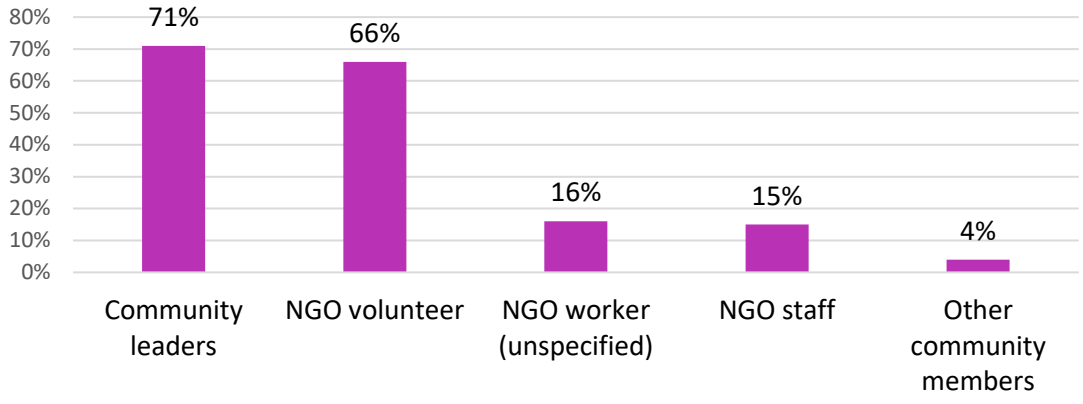
> *"I prefer announcement by used of megaphones because it caters for everyone including the illiterate persons."* – Woman living in Uganda as a refugee

NGO volunteers who conduct door-to-door mobilization speak the same language as the aid recipients. As a result, the information goes directly to the individual who receives the aid and is not distorted through the use of an intermediary. However, some expressed a fear of contracting COVID-19 during door-to-door dissemination, as this method brings them in closer proximity to the mobilizers making the distribution announcement.

Sources of information

Community leaders (71%) and NGO volunteers (66%) most frequently deliver information on the distributions to the aid recipients, followed by NGO workers (unspecified if they were volunteers or staff) (16%), NGO staff (15%), and other community members (4%). Community leaders are chosen by other refugees living in the settlement and act as intermediaries between the community and NGOs or the governing bodies of the camp. NGO volunteers are also refugees who sign up to volunteers with NGOs, therefore community leaders and volunteers most frequently communicate with the communities since they speak the same language and are embedded in the community.

Figure 6: Sources of distribution-related information identified by women (n=176)



Who most often hears the information

There as little difference reported in whether men and boys (46%) or women and girls (49%) are most likely to hear about distributions when information is communicated. Of the respondents who said men and boys are most likely to hear about the information, reasons included that men and boys are more often the head of household, more often community leaders, and more likely to be literate and capable of reading written communication about distribution. In addition, men and boys often share information amongst each other as they walk on the roads and "idle" or hang out at the market, trading centers, and outside their homes. Meanwhile, women are at home doing domestic work, so they don't hear announcements

> *"Boys and men are most likely to hear about it because they are not confined at homes"* – Woman living in Uganda as a refugee

> *"Men are the most likely to hear about distribution aid because they are always mobile, literate and stays mainly at busy places like markets."* – Woman living in Uganda as a refugee

Of the respondents who said women and girls are most likely to hear about the information, reasons that they stated for this include that women and girls are more likely to hear announcements when they are delivered door-to-door because they spend more time at home, whereas men and boys are more likely to hear announcements communicated in public spaces. Some respondents mentioned that women's role as family caretaker, situation in strong social networks where information is shared amongst women, and engagement in the community and Women and Girls Centers also support women's access to information.

> *"Women are most likely to hear about distribution aid because they are people who always care for their families especially their wellbeing thus they will always be vigilant and ready to get any information."* – Woman living in Uganda as a refugee

> *"Women are most likely to hear about distribution aid because women have strong social networks and very active people in the communities."* – Woman living in Uganda as a refugee

In many ways, women, girls, boys and men's likelihood of hearing distribution announcements adheres to dominant gender roles. Men and boys will hear announcements that are in town centers and other public spaces, whereas women and girls are more likely to hear announcements when the information is disseminated within villages or from home to home.

Fear Reported Throughout the Distribution Process

Overall, 81% of respondents reported that they felt fear throughout the distribution process in relation to 3 main categories: (1) fear of COVID-19 exposure, restrictions, or enforcement of those restrictions, (2) fear of gender-based violence, and (3) fear of other types of violence. Feelings of fear were most frequently reported while at the distribution point, followed by traveling to and from the distribution point. COVID-19 related fears were particularly reported at distribution points due to crowding and coming into contact with other people (especially those who did not abide by social distancing or other

COVID-19 prevention measures) as well as fear of police and security using physical violence to enforce social distancing measures. Gender-based violence related fears were most common in regard to intimate-partner violence (IPV), with fear stemming from not being able to securely store or maintain aid from partners. For example, husbands may steal or attempt to steal food aid and abuse their partner if she protests, inflict violence on their wives if they are late returning with the food aid, or accuse them of potentially infecting the husband with COVID-19 after attending a distribution. Other fears related to gender-based violence include fear of rape when traveling to and from distributions, sexual assault while waiting in line for aid, and increased early or teen pregnancies due to the lockdown and closures of schools and businesses closed, but respondents did not identify a point in the distribution when this was a concern. Other violence-related fear stemmed primarily from COVID-19 exposure fear and restrictions at the distributions or when walking home.

Figure 7: Women reporting feelings of fear during the distribution process (n=134)

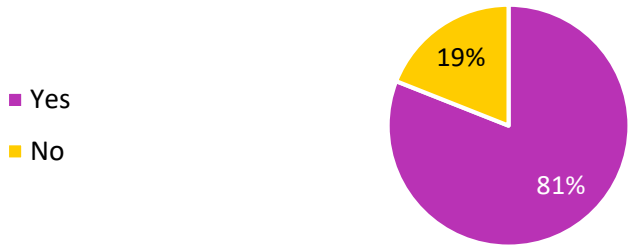


Figure 8: What elicits fear amongst women during the distribution process (n=134)

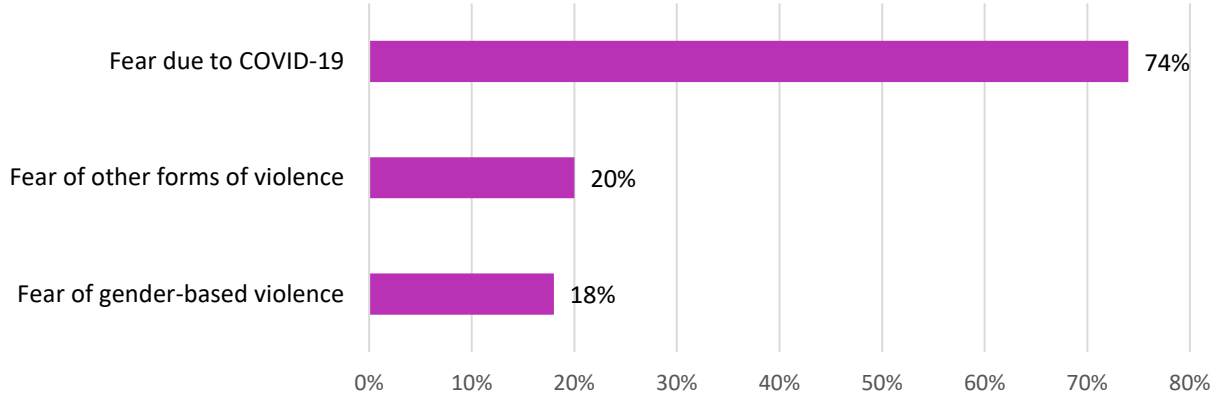
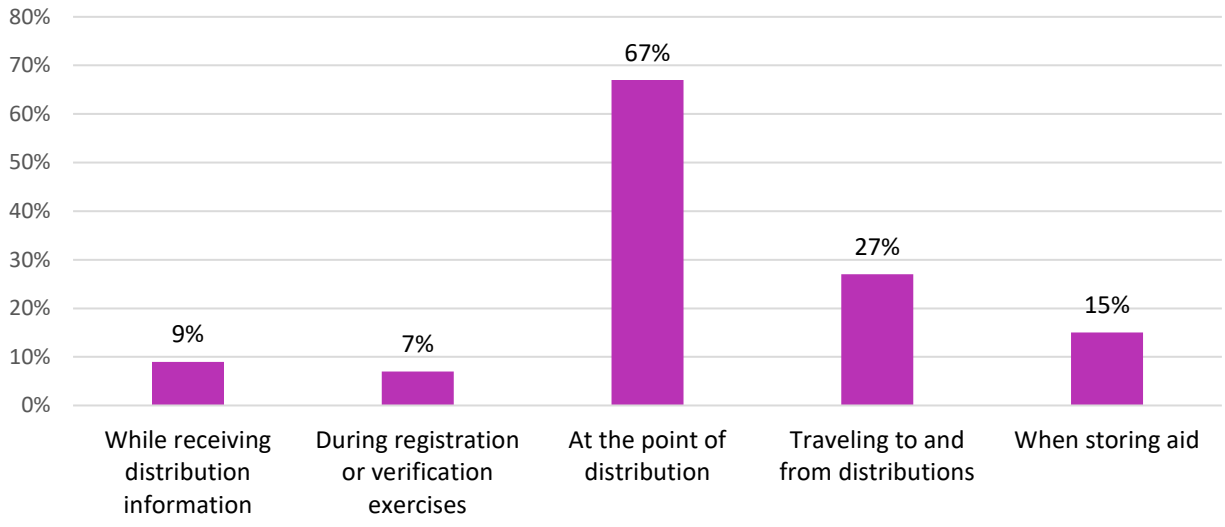


Figure 9: Feelings of fear at different points of the distribution process reported by women (n=134)



COVID-19 related fear

Among survey respondents who said they felt fear during the distribution process, 81% (105) said they felt fearful of exposure to the virus, restrictions put in place due to COVID-19, or enforcement of those restrictions, particularly at distribution points. These COVID-specific fears are further broken down in Table 10.

Fears that survey respondents expressed included fear of COVID-19 exposure due to the crowding at the distribution point (31%); fear of exposure when interacting with people whose COVID-19 infection status is unknown (16%); *f*ear of COVID-19 exposure due to other refugees not observing social distancing or attempting to come into physical contact, such as hugging or shaking hands (18%); and fear of COVID-19 exposure from other refugees coming to the distribution who live outside of Bidi Bidi (in areas such as Arua or Koboko) but travel to the settlement for the food distribution (16%):

> *"I also fear each time am to walk from my house to the distribution point and back home thinking I will get Covid-19 and infect my family"* – Woman living in Uganda as a refugee

> *"Yes I fear being in a crowded place, though there is social distance some people come from other districts, besides the community has no mask"* – Woman living in Uganda as a refugee

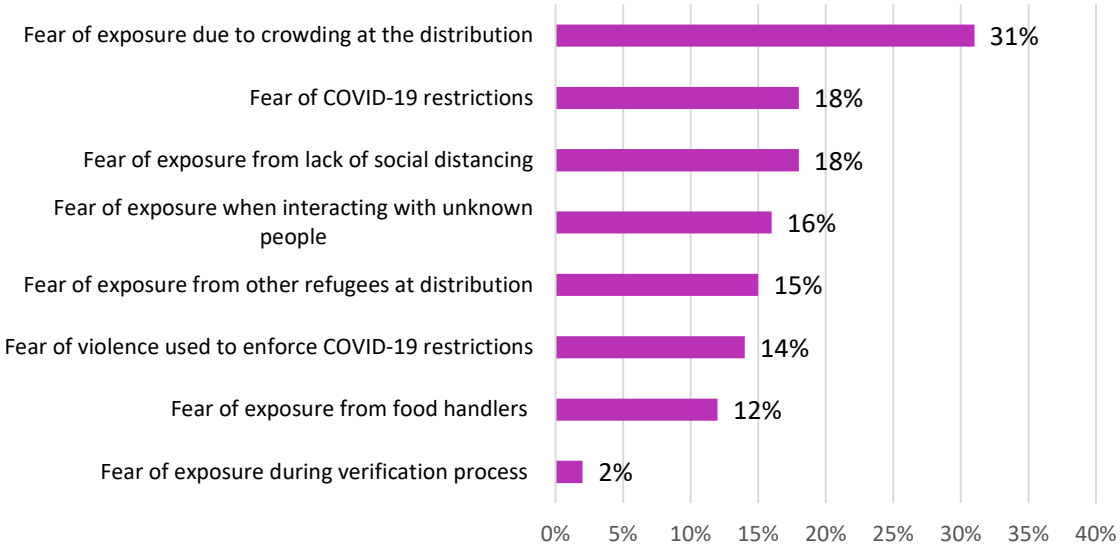
Women expressed fear of violence by security or police at distribution points as police use physical violence to enforce COVID-19 restrictions while people wait in line for the food distribution (14%). Violence by police to enforce COVID-19 restrictions was reported in Zones 2-5, but not in Zone 1. Women also reported insults and shouting from security guards and aid workers hurrying them through the distribution or enforcing COVID-19 restrictions, and refugees fighting with one another if someone is not following COVID-19 safety guidelines.

"I have felt fear at a distribution because people gather together in large numbers and a lot of violence like insults and beating of women/girls who fails to follow the guidelines in preventing the COVID-19 by security officials." – Woman living in Uganda as a refugee

> *"I have felt fear of violence at a distribution because if I want someone to support me carry out my heavy load of food, the men who are working there insults and shouts on me to carry it alone because of social distances to prevent Covid19 infection."* – Woman living in Uganda as a refugee
>
> *"The restrictions have been so tight and failure to adhere, you can be beaten up bitterly. An example is when you don't keep the social distance."* – Woman living in Uganda as a refugee

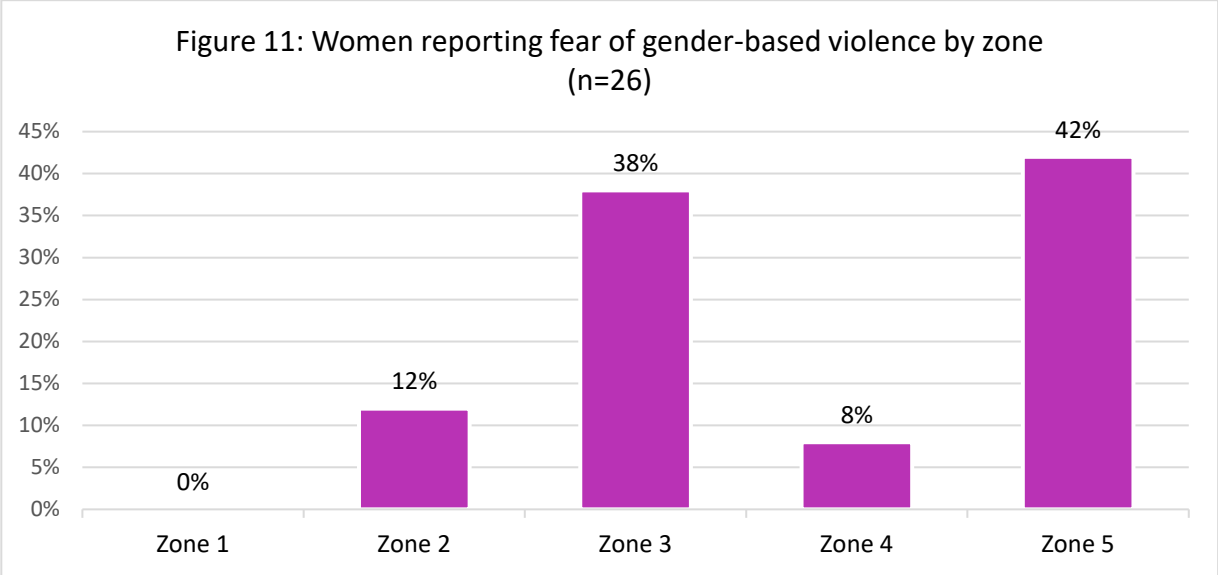
Women also reported fear of COVID-19 exposure from food handlers who may transfer the virus through droplets onto the food or packaging (12%) and fear of exposure during the verification process at the distribution point (2%).

Figure 10: COVID-19 specific fears in the distribution process identified by women (n=105)



Gender-Based Violence (GBV) related fear

Among women who said they felt fear at some point in the distribution process, 18% (26) said they were fearful of gender-based violence.



Of the respondents who reported a fear of gender-based violence, 46% (12) felt fear of intimate partner violence in the distribution process. Eighty-three percent of that fear occurred when they were storing their aid and 25% at the distribution point. Explanations women gave for fearing intimate partner violence included spouses attempting to steal and sell food, which could lead to an altercation and physical violence; physical violence for not cooking food for the family in a timely manner; and violence inflicted upon women by their spouses who forget to wash their hands or believe the food has been exposed to COVID-19.

"Physical violence has become common especially when men are selling part of the food received and if the women resist, they are beaten" – Woman living in Uganda as a refugee

> *"I fear because of delays at the FDP you can go back late and if you don't cook, your husband can beat you"* – Woman living in Uganda as a refugee
>
> *"I also experience emotional abuse inflicted by my husband by insulting me vulgarly if I come back home with the food and forgot to wash my hands."* – Woman living in Uganda as a refugee

Twenty three percent (6) of respondents felt fear of rape in the distribution process, and 83% of those (4) respondents who reported fearing rape said this fear occurred when they were traveling to and from the distribution point and 17% (2) when storing aid. Women mentioned feeling fear of rape because they have to travel far distances through bushy areas and valleys to and from the distribution point. Some mentioned traveling alone due to COVID-19 restrictions and social distancing guidelines that increase their

fear. One woman mentioned fearing living alone and that someone may break into her house and rape her.

> *"I fear that I am alone at home; someone may break my door and take advantage of me not having a man."* – Woman living in Uganda as a refugee

> *"I fear walking back especially in bushy places someone can catch you, and forcefully have sex with you."* – Woman living in Uganda as a refugee

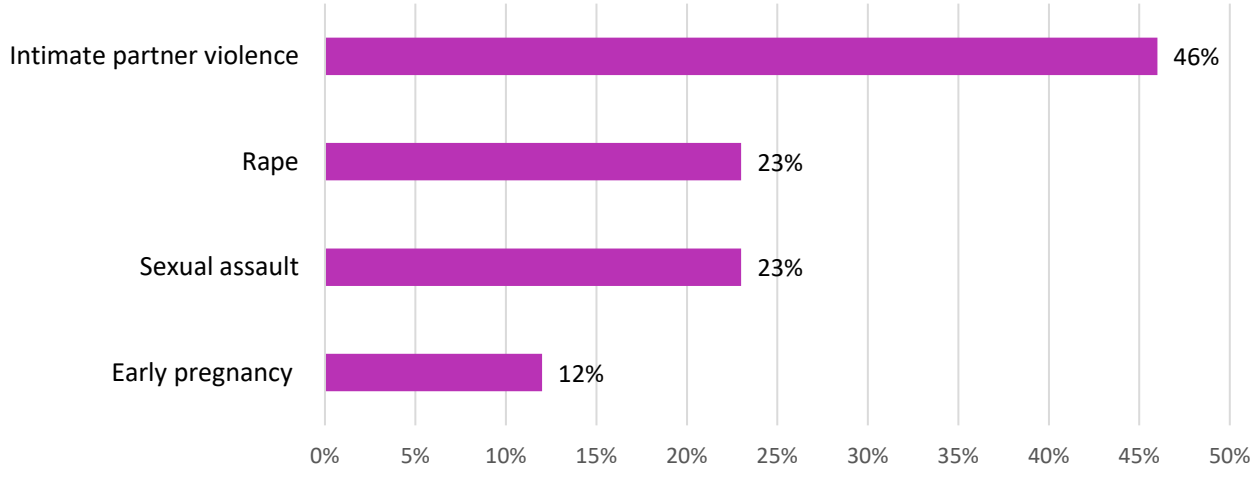
Twenty three percent (6) felt fear of sexual assault in the distribution process, with all of that fear occurring at the distribution point. Women mentioned fear of sexual assault at the distribution while waiting in line with men. Men will yell, physically assault, beat, or intimidate women while waiting in line and, in some instances, steal their food packages.

> *"They experience fear of violence because of the long queues…men tend to touch (harass) and push and insults on the girls and women. After receiving food men tend to steal women's packages because they are men."* – Woman living in Uganda as a refugee

Twelve percent (3) felt fear of early/teenage pregnancies but did not mention a particular point in the distribution process where they felt this fear. In the three instances in which early pregnancy was mentioned was in relation to a fear of young girls getting pregnant, respondents suggested that pregnancy was more likely because girls are "idle" due to lockdown and schools being closed. This sentiment was also commonly expressed in the food PODQ.

> *"My only fear is my children getting pregnant before schools open because times are hard"* – Woman living in Uganda as a refugee

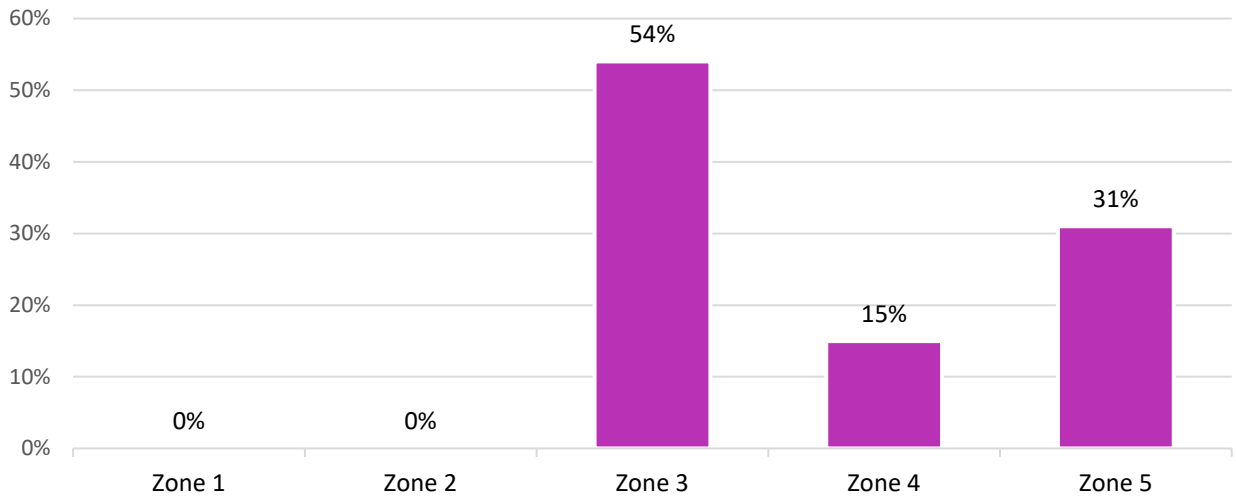
Figure 12: Women reporting gender-based violence specific fears (n=26)



Other violence-related fear

Among survey respondents who said they felt fear during the distribution process, 11% (13) said they felt fearful of other types of violence (non-gender based violence).

Figure 13: Women reporting fear of other types of violence by zone (n=13)



Of the respondents who expressed fear of violence, 24% (6) felt fear of physical violence or assault. Women feared physical violence at food distributions and when traveling to and from distributions because food rations were reduced and they feared getting attacked by others attempting to steal their food.

> *"Fears of physical violence, this commonly happened when food was reduced and got scared that someone would attack me just to pick the food from me on my way back home."* – Woman living in Uganda as a refugee

Fourteen percent (4) feared that their aid will be stolen from their homes or when walking from a distribution.

> *"I fear storing food because of food ration cut, thieves break into people's home, it's worse for those without husband."* – Woman living in Uganda as a refugee

One woman felt fear of emotional or psychological violence since she wasn't sure when she was going to get food again, and three women mentioned fear of other types of violence but did not specify the type of violence.

Figure 14: Women reporting other types of violence specific fears (n=13)

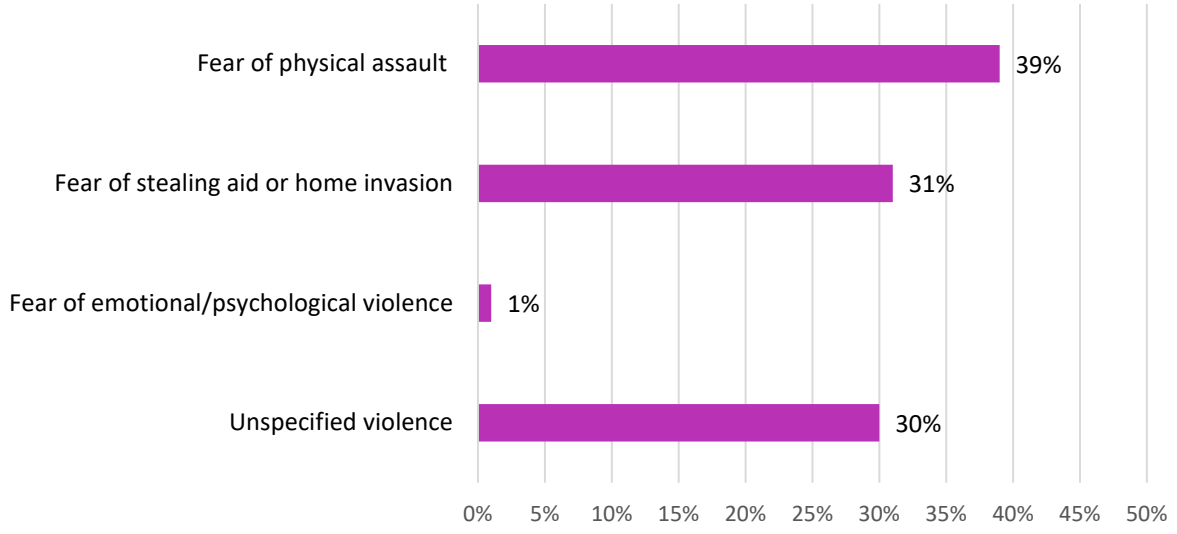
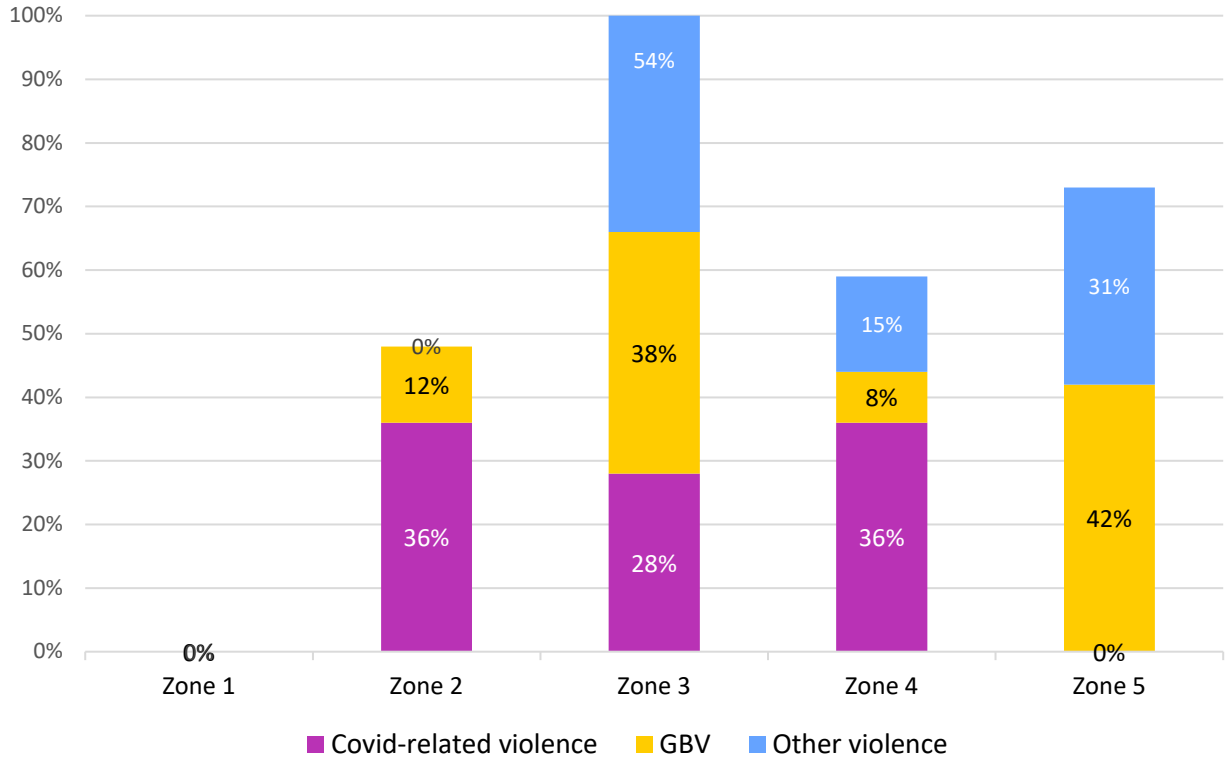


Figure 15: Women reporting feelings of fears during distribution process: COVID-19 violence fear vs. GBV fear vs. other violence fear per zone (n=53)

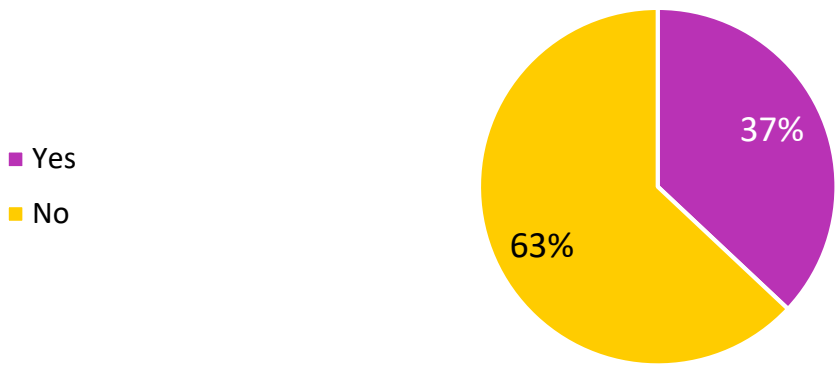


No fear of the three types of violence was reported in Zone 1. Women in Zone 2 reported COVID-19 related violence fears, such as security, staff or other refugees using violence to enforce COVID-19 restrictions, and GBV fear but no other violence related fear. Zone 3 reported fear of all three types of violence, including the highest percentage of other violence related fear. Zone 4 also reported fear of all three types of violence, with the highest percentage of reported fear being COVID-19 related violence. Zone 5 reported no fear of COVID-19 related violence but the highest percentage of GBV related fear and some other violence related fear.

SEA Risk in the Distribution Process

Thirty seven percent (65) of survey respondents said they had seen or heard about SEA occurring, and of those, 30% (19) named food aid as the context in which SEA risk could occur. In many cases, food aid was offered or promised in exchange for sex or a sexually exploitative relationship. 32% (20) of women mentioned other types of aid in relation to SEA risk, such as health, education or WASH aid.

Figure 16: Women reporting SEA risk in aid distribution processes (n=176)



"The people who distribute the food especially the security personnel, have been cited in community trying to deceive girls to have sex with them in exchange for more food." – Woman living in Uganda as a refugee

"…I am a survivor of SEA. [A] volunteer of [NGO] confused me and left me pregnant, then ran away. The issue was taken to police, but he was later left free." – Woman living in Uganda as a refugee

"I think it happens but these girls and women haven't seen it as a harmful practice thus not reporting." – Woman living in Uganda as a refugee

> *"There are some men at the distribution points who add us more food and serve us fast, and in particular they promise us salt and later they demand for sex in return. In schools there are some teachers have promised the learners more marks in exchange for sex."* – Woman living in Uganda as a refugee

> *"Mostly the single women whose husbands are in South Sudan are facing this exploitation"* – Woman living in Uganda as a refugee

Survey respondents identified several perpetrators of SEA including security guards (19%), NGO volunteers[2] (19%), truck drivers (17%), boda boda drivers (13%), teachers (8%), businessmen or sellers (8%), aid workers (6%), community leaders (6%), construction workers (3%), host community members (3%), and medical staff (3%).

Respondents often reported that NGO volunteers and security guards at food distribution would restrict access to goods and services or offer additional goods and protection in exchange for sexual favors.

> *"Yes, I have heard about the security officers guarding the food at FDPs deceiving girls to give in for sex so that they will be given more."* – Woman living in Uganda as a refugee

> *"This was a volunteer who told a woman that, 'I can give you more food because I can talk to the officer of World Vision in charge of food distribution, he will add you more food if you can give me sex.' Even the boda bodas who carry our food demand for sex after carrying the food to our homes."* – Woman living in Uganda as a refugee

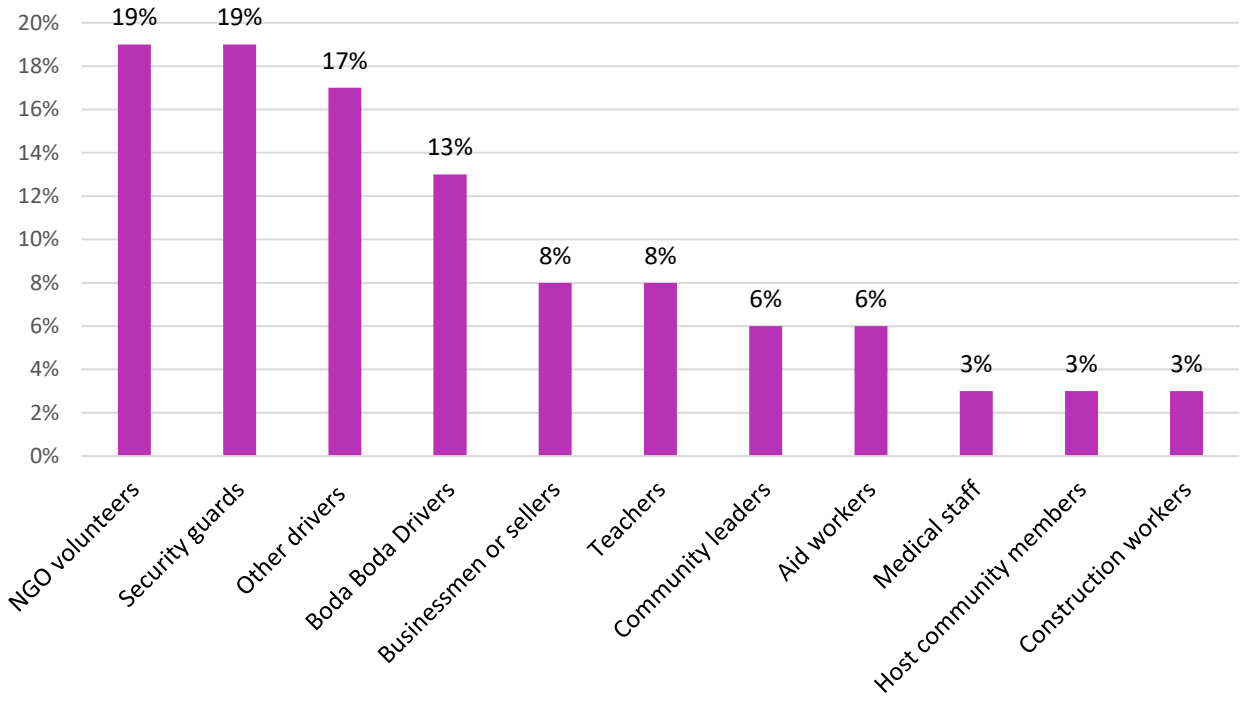
Respondents also reported that COVID-19 lockdown and restrictions increased risk of SEA as businesses/places of work and schools were shut down and women and girls were in even more desperate need for income or basic necessities. Respondents said that aid workers, drivers – including boda boda drivers – and other refugees commit SEA because they know women and girls are in need because of COVID-19 restrictions and take advantage of the situation.

> *"Yes they happen, now that due to corona people need support anything can happen, some girls were made pregnant by drivers but have been abandoned"* – Woman living in Uganda as a refugee

> *"Yes, some girls accept these drivers and boda boda men because they provide for them panties, pads and clothes that their parents cannot afford."* – Woman living in Uganda as a refugee

[2] NGO volunteers are recruited from the refugee community, therefore it easy to identify them as volunteers versus NGO staff or aid workers. They also wear visibility markers/clothing that identifies them as volunteers.

Figure 17: Perpetrators associated with SEA risk in aid distribution (n=49)

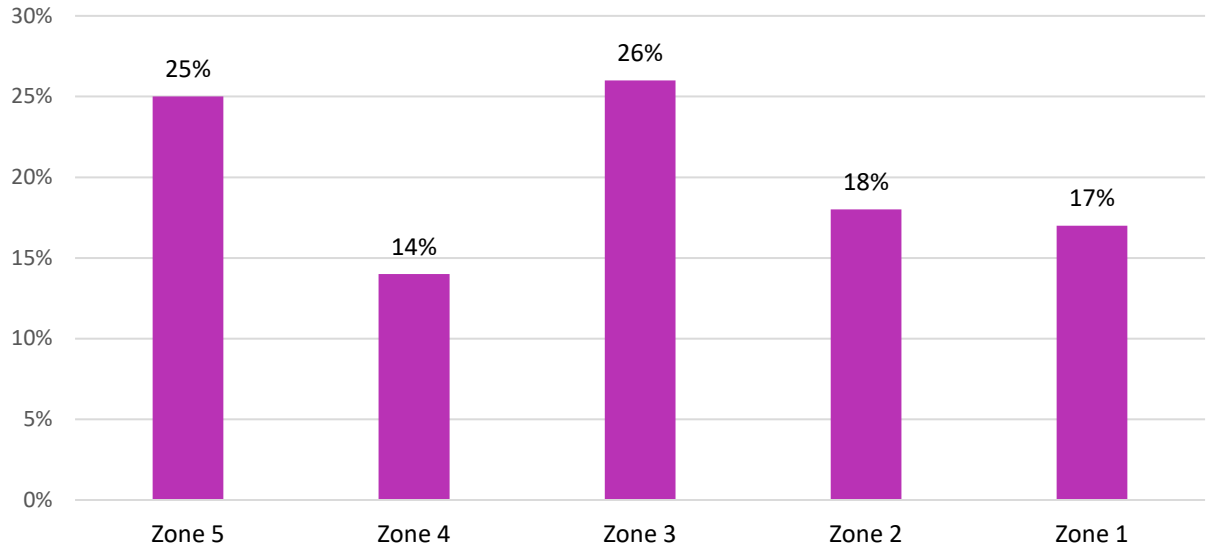


Several respondents expressed fear that young women in the community would be impregnated by businessmen, teachers, truck drivers, and other community members and then left to take care of the child on their own. These fears were exacerbated by COVID-19 restrictions and lockdowns, as girls are not in school and families have decreased income.

> *"Yes, it happens because of lock down there is no money our girls are being sexually exploited by the drivers, boda boda men to meet their basic needs and some end up in early marriages."* – Woman living in Uganda as a refugee

Of the 37% of respondents (65) who reported SEA risk in aid distribution processes, risks were reported highest in Zone 3 (26%) and Zone 5 (25%), which are the first and second largest Zones in Bid Bidi, followed by Zone 2 (18%), Zone 1 (17%) and then Zone 4 (14%).

Figure 18: SEA risk identified by women per zone in Bidi Bidi refugee settlement (n=65)



Reporting Complaints, Obtaining Support, and Accessing Services

The vast majority (91%) of women named the IRC Women and Girls Centers as a place where they could go to report a complaint or obtain support and services.

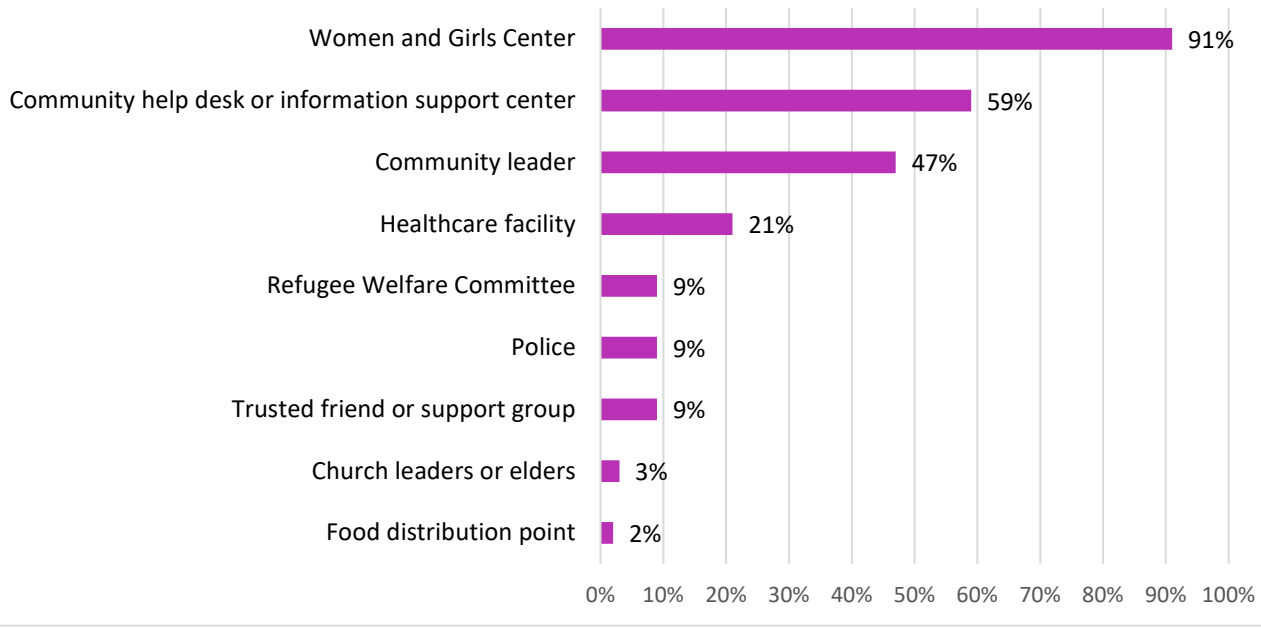
Other places where they would go included Information Support Centers or protection/help desks, community leaders, healthcare facilities, the Refugee Welfare Committee, a trusted friend or support group, the police, church leaders or elders, and food distribution points.

Services that women noted they can access at the Women and Girls Centers include psychosocial support, counseling, legal justice support, livelihood activities, dignity materials such as sanitary pads and soap, and referrals to healthcare. Respondents said they felt comfortable talking to the social workers and community volunteers at the Women and Girls Centers.

Some women noted challenges accessing services during lockdown since they weren't able to leave their homes and the Women and Girls Centers were closed.

> *"I would report to our village chairperson and to the health facility however I would feel comfortable reporting to a female health worker. I don't have an idea about where women go for support these days because of lockdowns."* – Woman living in Uganda as a refugee

Figure 19: Where women would report a complaint, obtain support, and access services (n=176)



Where women feel most comfortable or safe reporting a complaint, obtaining support, or accessing services

Almost half (45%) of women named the Women and Girls Centers as the place where they would feel most comfortable or safe reporting a complaint, obtaining support, or accessing services.

> *"I report to women centers and complaint desks and I prefer talking to a social worker. Women still get support from their safe spaces and are referred accordingly to other services depending on their needs."* – Woman living in Uganda as a refugee

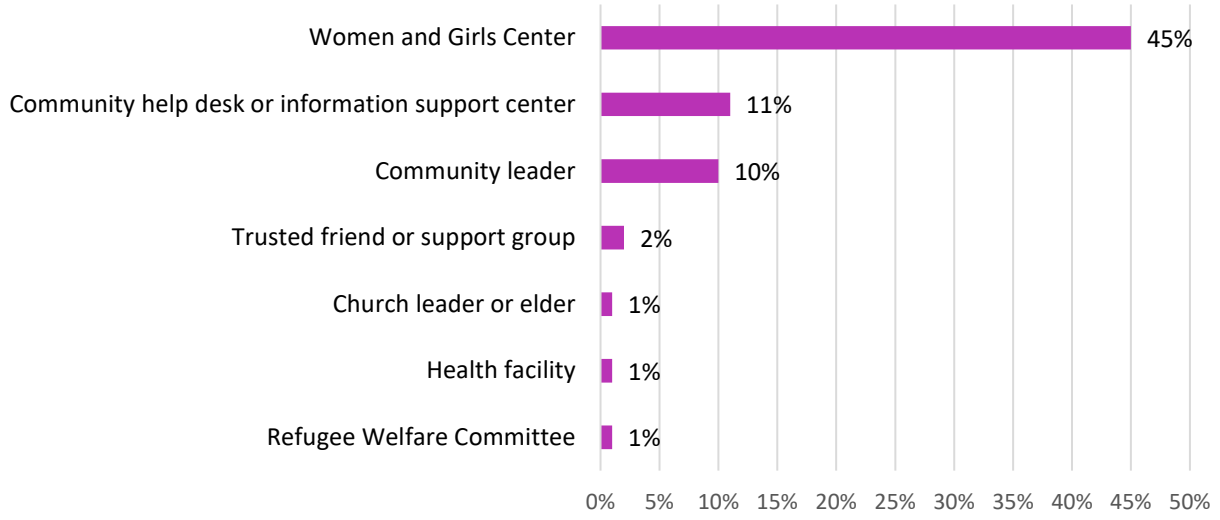
> *"I feel very comfortable and safe reporting a case to the Women and Girls Centers of IRC and I feel free reporting to the staff and volunteers because they give us psychosocial support. Women also go to the women representative, the chairman, police and health center by walking and also support from IRC."* – Woman living in Uganda as a refugee

Other places where women said they would feel most comfortable or safe include help or protection desk/information support center and community leaders. Of the 10% who said they felt most comfortable approaching a community leader, 19% said they preferred to talk to a female community leader.

Other places where women mentioned feeling most comfortable reporting included trusted friends or support groups, the Refugee Welfare Committees, health facilities and church leaders or elders. None said

they felt comfortable going to the police or the food distribution point to report a complaint or access support and services.

Figure 20: Where women feel most comfortable reporting a complaint, obtaining support, or accessing services (n=96)



Recommendations

1. **Ensure that IRC Women and Girls Centers are well staffed with social workers and volunteers,** as these workers play a critical role critical in women and girls' ability to access services and report complaints. Not only were they most frequently mentioned as a place woman could go to obtain support, respondents overwhelmingly pointed to IRC Women and Girls Centers as where they feel most comfortable reporting complaints and accessing services. Women and Girls Centers should also have lockable doors and sex segregated to improve safety because the Centers are not fenced, and any community member can access the latrines. For more specific information on latrine issues, see the *Pilot 2 Dignity Kits Safety Audit Report*.

2. **Hire more female security personnel at food distribution points and provide PSEA trainings for security personnel,** or include them in staff and volunteer trainings prior to starting their role Women and girls reported fear of violence used by security personnel who attempt to stop crowding and ensure social distancing at food distribution points. While these measures are important, it is also critical to reduce violence at distribution points so that women can receive their food free of fear and will be less likely to seek other ways to access food that could put them at risk of SEA.

3. **Implement door-to-door mobilization that targets women and girls for future distributions in addition to megaphone/microphone and mobile van announcements to ensure information is delivered more equally amongst women, girls, men, and boys**. According to the PODQ findings, women and girls were more likely to hear about distributions through door-to-door mobilization since they are at home more often. By increasing door-to-door mobilization by NGO volunteers or community mobilizers before distributions, women and girls may have better access to information, reducing their risk of SEA by those who may seek to exploit their lack of knowledge.

4. **Continue PSEA awareness raising activities with community members, particularly as respondents identified COVID-19 restrictions as increasing SEA risk.** IRC's WPE and protection activities provide a critical platform through which PSEA messages can be shared with community members, such as through the *Listen Up!* program. Key messages can be delivered at Women and Girls Centers, protection desks, and in collaboration with World Vision at distribution points (such as through pre-addresses or community help desks). Zones 3 and 5 should be targeted with increased outreach as respondents from these zones reported the highest SEA risk.

5. **Implement recommendations women, girls, and other aid recipients shared to make distribution points safer.** Distribution points were most frequently reported as the place where women experienced the most fear during the distribution process. Based on Empowered Aid's findings from Phase I and other pilots, World Vision, IRC, and other NGOs should implement recommendations women and girls have made to increase their feelings of safety at distributions, including sex-segregated lines, increased female staff and volunteers working at the distribution, and transport support.

6. **Expand ways of working with communities to prevent early marriage and teenage pregnancy, taking special care to prevent SEA by COVID-19 related drivers.** Distributions represent one way that aid actors interact with large swaths of the refugee community at a time when many other centers and activities have been shut down or minimized, including the IRC Women and Girls Centers. IRC can collaborate with World Vision to deliver key messages on SEA, early marriage, and teen pregnancy prevention as part of mobilization and pre-address announcements, as well as through visual and low-literacy signage at distribution points. IRC Women and Girls Centers and protection desks represent important information and referral points and should also help to deliver SEA prevention messaging. These entities should collaborate with other NGOs such as World Vision. Additionally, usage of IRC's existing early marriage programming is encouraged.

7. **Display more visual aids on COVID-19 prevention and restriction measures at all IRC Women and Girls Centers**. Fear of exposure to COVID-19 or enforcement of COVID-19 restrictions were mentioned more than any other fear (74%). Awareness materials for those with low literacy level should also be displayed at the Centers.