



Forced and ear																
	Information on key SGBV issues is collected safely and ethically, including through the GBVIMS	Ensure stakeholders have access to necessary information on trends and protection initiatives affecting SGBV	C/U	# of updated briefing notes # of briefings provided	UNFPA, UNHCR and other GBVIMS Task Force Members	All	x	x	x	x					Data is reviewed monthly. Public reports are shared once or twice a year.	
		Ensure SGBV concerns are included in assessments conducted in cooperation with other sectors (CP, Education, Protection, food, WASH, Shelter, etc.)	C/U	# of assessments conducted that include SGBV indicators & recommendations	UNFPA, UNHCR	IRC	x	x	x	x					Safety Audits in Zaatar. SGBV recommendations in Azraq, Participatory Assessments. This activity needs to continue	
		Train members and other sectors on safe SGBV data collection guiding principles and methodologies and make relevant tools available	C/U	# of trainings conducted, # of tools made available % of people trained that demonstrate improved skills	UNFPA, UNHCR,		x	x	x	x					Through SOP, Safety Audit, Assessment registry, evaluation system to be developed to assess progress on qualitative indicator	
		Review GBVIMS ISP and continue data sharing and analysis accordingly	C/U	Existence of updated ISP, # of reports shared	UNFPA, UNHCR	GBVIMS TF (UNICEF, UNFPA, UNHCR, IMC, IRC, IFH, JRF)	x	x	x	x					Done, we will need to review the ISP in 2016	
		Mapping and analysis of formal and informal legal framework applicable to SGBV in Jordan	C/U	Existence of document	UNFPA, UNHCR	ARDD-Legal Aid, JCLA	x	x							On-Going only for Jordan. Done for Early Marriage. In 2016 sexual violence and mandatory reporting should	
		Continuing dissemination, use and implement available media tools to promote safe and ethical reporting on SGBV	C/U	# briefings on GBV media guidelines	UNFPA, UNHCR			x	x	x	x					On-Going
		Capacity building efforts are coordinated	C/U	Existence of updated training plan. Inclusion of people with disabilities and other individuals with specific needs, engaging men & boys, LGBTI in training materials	UNHCR, UNFPA	All	x	x	x	x						
		Specific funding for SGBV prevention and response projects is available	C/U	# of donor meetings organized # of funding briefs delivered Existence of resource mobilisation action plan for SGBV SWG in coordination with ISWG and PWG	UNHCR, UNFPA	All	x	x	x	x						Ongoing, resource mobilisation action plan as new activity to be started in 2016
	Advocate for the inclusion of SGBV prevention and response in planning process	Lead and support the development of quarterly advocacy messages to be submitted to the IATF members in coordination with the broader PWG		# of advocacy messages submitted	UNHCR, UNFPA	IRC								First quarterly message submitted		
	Support the participation of SGBV Service Providers in PSEA Focal Points Network	SGBV SWG members are aware and incorporate PSEA mechanisms in their programming	Collect and disseminate information on PSEA mechanisms and promote the participation of SGBV SWG members in PSEA Focal Points Network	C/U	# of SGBV SWG members who incorporate PSEA mechanisms in their programmes # of SGBV SWG members who participate in PSEA network	UNHCR, UNFPA	JRF, IRC							Inter-Agency PSEA community based complaint referral mechanism and awareness materials has been developed with the contribution of the SGBV SWG coordinators and members. It is expected that		
	Specific Objectives	Expected results	Actions	Indicators	Responsible Agencies	Contributing Partners	Time frame									

2. Prevention		2.1. Increase integration of SGBV into the multisectoral government and non-government humanitarian response, including WASH, shelter, food, health, child protection, camp management, ITS etc.											
		Specific Objectives	Expected results	Actions	Camp /Urban	Indicators	Responsible Agencies	Contributing Partners	Time frame				
		SGBV prevention, including for vulnerable groups, is better integrated into the multisectoral humanitarian response	SGBV SWG coordinators and interested members provide guidance and support to the sector WG and Gender Focal Points for integration of SGBV, this process should expand to include all locations especially Urban settings	C/U	# of meetings attended by SGBV SWG coordinators # SGBV-related agenda items in sectoral WGs	UNHCR, UNFPA	UNWOMEN, HI	x	x	x	x		In 2016 the SWG will support the rollout of the IASC GBV guidelines
			Regular trainings on prevention (incl. trainings on SOP and case management) are provided by SGBV SWG members to sector WGs as well as raising more awareness and sensitizing more staff on issues relating to LGBTI, PWD, etc. Other training include PFA and Interview Techniques, Gender and Masculinities, Reproductive Health, Clinical Management of Rape, Refugee protection.	C/U	# trainings and # participants #	UNHCR, UNFPA, JRF, HI		x	x	x	x		to be continued
			Re-evaluate 2016 action plan considering newly available resources and materials, monitor its implementation on prevention activities targeting all members of the community, men and boys, disabled people and other vulnerable groups.	C/U	# Guidance and recommendations shared with other sectors.	UNHCR, UNFPA,	All	x	x	x	x		
			Organize a work shop on Safety-Audit and follow-up on previous audits	C/U	Workshop on Safety audit conducted # Safety Audit tools is available to partner # of safety audits follow-up conducted	UNHCR, UNFPA, IRC, WFP	UNICEF	x	x	x	x		Follow-up is on-going in Zaatari.
		Existing prevention activities are expanded and new activities developed, using a participatory approach and applying AGD principles	Adapt and make available training materials for improving engagement of men, women, girls and boys to prevent SGBV. Training materials should be accompanied with proper orientation or training on using them	C/U	Training materials are endorsed	UNFPA, UNHCR	All	x	x	x	x		
			Inter-agency key messages and campaign materials for prevention of SGBV continue to be used and updated, with active participation from WGBM	C/U	Review of updated inter-agency key messages, # of materials created and distributed, # of WGBM involved in designing, implementing and reviewing SGBV prevention activities	UNHCR, UNFPA,	All, WV	x	x	x	x		
			Outreach prevention activities, including awareness raising, using culturally sensitive methodologies, are continued through a participatory and peer to peer approach for women, girls, boys and men including people with specific needs	C/U	# of outreach prevention activities: # participatory workshops/Focus group discussions	UNHCR, UNFPA,	All, WV	x	x	x	x		Focus on Government, PSEA and LGBTI to be increased
			WGBM's empowerment and active participation in community-based prevention initiatives is further strengthened	C/U	# on WBMG taking part in prevention activities	UNHCR, UNFPA,	ARDD-Legal Aid						
		Specific Objectives	Expected results	Actions	Camp /Urban	Indicators	Responsible Agencies	Contributing Partners	Time frame				

	3. Response	3.1. Increase and improve access and quality of multisectoral response services for SGBV survivors adapted to their age, gender and diversity (AGD)	Survivors have more opportunities to disclose, both to community based structures and service providers	Provide training to services providers (special attention to Govt.) and community based structure members (as possible entry points) on SGBV, SOP, referral pathways, PSEA and LGBTI	C/U	# of stakeholders trained (disaggregated by sex)	UNHCR, UNFPA,	ARDD-Legal Aid JRF, IRC, JCLA	x	x	x	x	Focus on Government, PSEA and LGBTI to be increased
			Improving service provision through mobile teams and confidential centers, ensuring access to SGBV services by refugees living in ITS and at the border	Improving service provision through mobile teams and confidential centers available; Mapping of SGBV service providers by ITS and at the border	C/U	Mapping of Mobile Teams and confidential centers available; Mapping of SGBV service providers by ITS and at the border	UNHCR, UNFPA	IRC	x	x	x	x	

			Disseminate information on existing response services through user friendly materials, radio and sessions, and awareness raising campaigns	C/U	# of materials disseminated: # awareness raising campaigns conducted	UNHCR, UNFPA, IRC, UNICEF, SCI, UPP/JWU, UN WOMEN	All	x	x	x	x	
		Multi-sectoral response based on AGD principles is improved	Continue to roll-out interagency case management training and integrate AGD principles (such as inclusion of people with disability, early marriage, legal framework)	C/U	# of specialized SGBV service providers who receive training on case management (disaggregated by sex)	UNHCR, UNFPA, HI, JRF		x	x	x	x	
			Continue to provide training to medical, PSS, legal, and security actors on caring for SGBV survivors		# of specialized SGBV service providers who receive training on SOP and caring for survivors (disaggregated by sex)	UNHCR, UNFPA, ARDD-Legal Aid, IRC		x	x	x	x	
			Continue to organize series of workshops/trainings and disseminate tools aimed at mainstreaming AGD principles into SGBV response, including people with disabilities, early marriage, PSEA, LGBTI, child survivors, engaging men and boys, PFA & interview techniques	C/U	# of events conducted on people with disabilities, # of events conducted on early marriage, # events conducted on PSEA, # events conducted on LGBTI, # engaging men and boys	UNHCR, UNFPA, ARDD-Legal Aid, IRC		x	x	x	x	
		WGMB SGBV survivors have access to safe, confidential and compassionate multi-sectoral response	Continue providing safe, confidential and compassionate case management services in accordance with survivor centered approach and AGD principles		# of survivors (WGMB) who access and benefit from safe, confidential and compassionate specialized case management services	UNHCR, UNFPA, ARDD-Legal Aid, JRF, IRC		x	x	x	x	
			Continue providing safe, confidential and compassionate medical, PSS, legal, safety/security services to SGBV survivors (WGMB), ensuring the increased inclusion of people with disability, LGBTI and other individual with specific needs	C/U	# of survivors (WGMB) who access and benefit from safe, confidential and compassionate specialized multi-sectoral services (# medical, # PSS, # Legal, # referred to safe shelter)	UNHCR, IRC, IMC, JRF, IAH, UNFPA, UNICEF, UPP/JWU, ARDD-Legal aid, CVT,	UNAIDS, JRF, IRC	x	x	x	x	
			Maintain and update the Inter-agency SGBV SOP including the Referral Pathways and contribute to the development of national framework	C/U	# of organizations who endorsed the SOPs, existence of updated document # of organizations who implement the SOP	UNHCR, UNFPA, UNICEF	ARDD-Legal Aid, JRF, IRC					
			Increase existing capacity to provide safe and confidential medical response to SGBV survivors, including through the improvement of CMR protocols and the inclusion of PEP and HIV testing and consultations	C/U	Protocol in place, # of service providers trained	UNFPA, UNHCR			x	x	x	This activity should be conducted in coordination with Health Sector
			Increase existing capacity to provide safe shelter to SGBV survivors, trafficking survivors and boys by building the capacity of and providing technical support to relevant organizations and institutions	C/U	# shelters which started rehabilitating or establishing, # of training and consultations with shelter personnel	UNICEF, UNFPA, UNHCR, UNWOMEN		x	x	x	x	