



GBV IMS ANNUAL REPORT FOR UGANDA
REFUGEE SETTLEMENTS AND URBAN KAMPALA
January — December 2017



The Sexual and Gender-based Violence (SGBV) strategy in the refugee operation in Uganda is based on a comprehensive and coordinated approach and is guided by the common principles of SGBV programming which include survivor-centered and multi-sectoral prevention and response.

UNHCR coordinates all SGBV interventions in refugee settlements in coordination with the Office of the Prime Minister (OPM), UNFPA, UN WOMEN, UNICEF and partners. The GBV Information Management System (IMS) is used in all refugee settlements to enable humanitarian actors responding to incidents of SGBV to effectively and safely collect, store, analyze and share data reported by SGBV survivors to UNHCR for compilation and analysis.

Trends

In 2017, 5001 new incidents (4,487 females at 90%) were identified, managed, documented and reported from 12 refugee settlements in Uganda. The most prevalent were physical assault (1,640 at 33%) followed by psychological/emotional abuse (1,210 at 24%), rape (1,035 at 21%), denial of resources (551 at 11%), sexual assault/no penetration involved (308 at 6%) and forced/early marriage (257 at 5%). The reported incidents occurred in both country of origin and asylum.

Most of the referrals were made by community/leaders. Analysis of reports reveals that the highest number of incidents occurred late at night. Locations where SGBV incidents occur include survivors' homes with over 80% of the incidents reported between intimate/former partners. Other locations include water points, fire wood points, trading centers and entertainment spots.

- **West Nile Region:** Physical assault is the most prevailing type of incident assessed and documented. Arua District registered the highest number of new incidents with 1,524 identified, documented and managed from Rhino, Imvepi and Lobule settlements at the peak of the emergency. Overall analysis indicates that most of the incidents reported in Imvepi in August-Dec 2017 occurred in the country of asylum (501) compared to country of origin (257). In Rhino settlement, the SGBV incidents were highest in August 2017, which is attributed to the roll-out of SASA (Start Awareness Support Action), a methodology used for mobilizing communities to prevent and respond to SGBV in Uganda. In Adjumani, Parolinya and Lamwo settlements, a total of 926 new incidents were reported in the reporting year.
- **South West Region:** 1,107 new reported incidents were managed, with Nyakabande Transit Centre in Kisoro registering the highest number of reported new incidents (339) as compared to the other refugee settlements in the region.
- **Mid-West:** 457 incidents were identified and documented from Kiryandongo and Kyangwali settlements.
- **Central Region:** 142 cases were identified and managed.

The data in this document reflects only reported cases and should not be considered as representative of the total incidents or prevalence of sexual and gender-based violence (SGBV) among refugees in Uganda.

Contributing Factors

Key contributing factors include power imbalance in relationships, scarcity of food, alcoholism, denial of resources (eg. food, household items, money), harmful traditional practices such as forced and early marriages, changing gender roles that leave men idle or feeling disempowered, limited access to post-primary schools (in all settlements), limited opportunities for livelihoods prompting recourse to survival sex, poverty increasing vulnerability to sexual and other forms of exploitation and abuse, covering long distances to fetch firewood and grass for thatching huts. Incidents of rape and sexual assault were also reported to have occurred especially during flight to the country of asylum. Under-reporting of SGBV cases countrywide in refugee settings remains a major concern.

Interventions

4,822 (96%) survivors received psychosocial support along with assistance to access other services such as medical (962), legal (1,327), safe house (172), livelihood (534) and safety and security (240).

Alongside such interventions to respond to the needs of SGBV survivors, UNHCR and partners are pursuing a multitude of activities for SGBV prevention including awareness-raising and capacity-building, with active engagement of the community.

Recommendations

- Enhance SGBV prevention activities targeting intimate partners and adolescents in and out of school, single and vulnerable women, girls and elders.
- SGBV coordination forums at field level to jointly develop strategies on addressing the concern of under-reporting of incidents.
- Increase prevention activities at household level, and hotspots in settlements such as water points and trading centers in the settlements.
- Mainstream SGBV prevention and response activities into livelihoods and other sectoral interventions.
- Increase follow-up efforts on cases identified, assessed and referred to other service providers, including harmonization of data on interventions reflected in the GBVIMS.
- Strengthen coordination with and participation of police, livelihood and medical staff in SGBV coordination forums at National and field level.
- Promote activities on safe environments and safe access to domestic energy.
- Strengthen the standardization of SGBV reporting.