



United Nations Population Fund



WOMEN & GIRLS SAFE SPACES

A guidance note based on lessons learned
from the Syrian crisis





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1. Introduction

The creation of women and girls safe spaces (WGSS) has emerged as a key strategy for the protection and empowerment of women and girls affected by the Syrian crisis. This document provides an overview of what safe spaces are, and what key principles should be followed when establishing such spaces in humanitarian and post-crisis contexts.

This guidance is based on the experiences of UNFPA and its partners in Jordan, Lebanon, Iraq, Syria and Turkey. It also refers to experiences documented by the Gender-Based Violence (GBV) coordination mechanisms in Jordan and Lebanon. Lessons learned from other regions are also referenced¹. Guidance has also been taken from the child protection and adolescent girls sectors in establishing child-friendly spaces and girls' safe spaces.



2. What are women and girls safe spaces?

A safe space is a formal or informal place where women and girls feel physically and emotionally safe. The term 'safe,' in the present context, refers to the absence of trauma, excessive stress, violence (or fear of violence), or abuse². It is a space where women and girls, being the intended beneficiaries, feel comfortable and enjoy the freedom to express themselves without the fear of judgment or harm.

The key objectives of a safe space are to provide an area where women and girls can:

- Socialize and re-build their social networks;
- Receive social support;
- Acquire contextually relevant skills;
- Access safe and non-stigmatizing multi-sectorial GBV response services (psychosocial, legal, medical);
- Receive information on issues relating to women's rights, health, and services³.

These spaces may take different names such as women centers, women community centers, or listening and counseling centers, to name a few. Women safe spaces are not the same as shelters or safe spaces at reception centers or one-stop centers⁴.

3. Why women and girls safe spaces?

In most societies, women have limited space to meet, and public spaces are often inhabited largely by men⁵. Traditionally, women's responsibilities include taking care of children, cooking, carrying out household chores, and generally looking after the family. While these roles may change during crisis, where women may find themselves working or becoming the breadwinner, they remain responsible for the household nevertheless.

"For many girls in the developing world, the opportunity to move freely in the community becomes limited at the onset of puberty"⁶. Parents often keep their daughters inside the house, protected from any contact with males. "This unofficial restriction on female mobility tends to persist throughout life. While not necessarily codified in a specific way, there are functional curfews for women in many parts of the world—be it in an urban park in a Western country, or in an impoverished community in the developing world"⁷.

In the Syrian context, women have become more isolated as a consequence of the crisis. Their mobility has been curbed significantly. Women and their family members reported having limited movement of women and girls outside the home due to fear of sexual violence, harassment, and indiscriminate attacks⁸.

Refugee women and girls reported that being strangers in host countries and perceived as using community resources to which they are not entitled, makes them particularly vulnerable. Further, they noted that women had to take on roles they had not played in Syria, such as working or going out to get aid. While freedom of mobility was somewhat limited for many women and girls prior to displacement, increased fear of sexual assault and harassment has placed even further restrictions on displaced women and girls⁹.

However, "evidence suggests that the establishment of women- and/or girl-only spaces helps to reduce risks and prevent further harm during acute emergency responses. These spaces provide women and girls with a safe entry point for services and a place to access information. Safe gathering points also offer them an opportunity to engage with each other, exchange information, and rebuild community networks and support. In this way, safe spaces can be a key way of building women and girls' social assets"¹⁰.

Addressing GBV through UNFPA's Wider Sexual and Reproductive Health Mandate and Beyond

Survivors of violence suffer significant sexual and reproductive health consequences including forced and unwanted pregnancies, unsafe abortions and resulting deaths, traumatic fistula, and higher risks of sexually transmitted infections and HIV. Since all these issues are at the core of the UNFPA programming mandate, it is able to take a holistic approach, working directly with health service providers and establishing specialized GBV services.

Putting its mandate into practice, UNFPA ensures that its safe spaces for women and girls are closely linked to reproductive health services. In some cases, as in the Zaatari refugee camp in Jordan, the services are located within the same facility, which not only guarantees confidentiality, but also enables the programme to reach a wider audience and provide immediate care, if needed. In Syria, UNFPA is supporting comprehensive facilities to ensure that women not only have a safe space to meet, but can also access vital RH services and information. Given the enormous security risk of moving from one area to another, this enables women to access a wider range of services more safely.



"There are so many things which our families desperately need, such as warm winter clothing, which we made ourselves here in the women's centre" says 29 year-old Rabee'a from Aleppo. She lived in Homs but is now at the Azraq camp in Jordan. "My favourite crochet pattern is called 'Yasmeen.' It reminds me of 'ash Sham' (Damascus) - the city of Jasmines. I will teach this pattern to all women in Azraq so that the camp is full of children wearing jasmine flowers. This is the least I can do to stay connected to my land. Sewing, knitting, and crochet helps dispel some of our worries."

A Syrian refugee woman in Jordan

4. What are the guiding principles for establishing women and girls safe spaces?

The following basic principles must be applied when establishing and managing a safe space:

SAFE SPACE

Leadership and empowerment of women and girls



Client/survivor centered



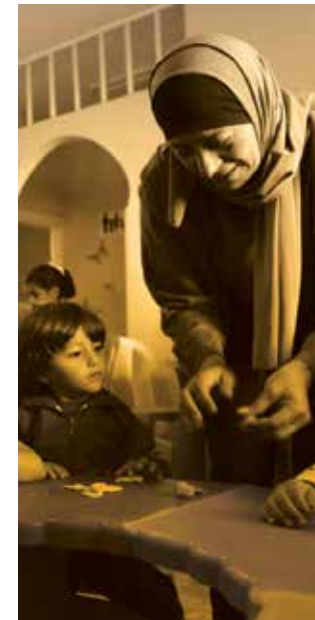
Safe and accessible



Community involvement



Coordinated and multisectoral



Tailored





Leadership and empowerment of women and girls

A safe space should be women and girl-led and offer an inclusive and empowering environment for them. Women and girls should be included in project planning, implementation, and monitoring and evaluation of the space to ensure relevance and ownership¹¹. There should be regular exchanges with them about how the space is to be run and managed. Women and girls should decide the opening hours, as well as the types of activities to be undertaken. They should feel a sense of ownership with the space, rather than considering it a center being run for them by an external source.

Client/survivor centered

The design of the safe space, the activities and services it offers, and the discussions it organizes should prioritize the safety and confidentiality of women and girls accessing the center. Any case files, documentation of services, and client data kept at the center should be properly secured. The center should be open to all women and girls, and their wishes, choices, rights, and dignity should be respected. They should be provided with information about available services and options. The staff should be extensively trained on the principle of non-discrimination¹².

Safe and accessible

The safe space should be located in an area that is conveniently accessible to women and girls, and assures safety and privacy. The decision on where to locate the safe space should be led by women and girls. If that is not feasible, they should at minimum be consulted. Accessibility should also consider timings and days that work best for them. If possible, consideration must be made to support the transportation costs to and from the space. The WGSS should ensure that a Code of Conduct is adopted and all staff is trained on it.

Community involvement

While the safe space should be a space meant for and run by women and girls, its sustainability will require the input and support of many stakeholders. Husbands, parents, and community leaders have a lot of influence over the ability of women and girls to participate in programmes. It is, therefore, essential to understand the perspectives of these individuals while setting up a safe space, and to mobilize community support for the WGSS so that women and girls are able to safely participate in all activities. Ultimately, women and girls spaces should not be isolated units, but an extension of broader community life. Men and boys have an important role in ensuring the success of safe spaces. Engaging them to ensure they understand the purpose, location and benefits of the safe spaces will enable the participation of a larger number of women and girls. Ensuring the involvement of and buy-in from the community for sustainability of the initiative, is vital to the success of the safe space.

Coordinated and multi-sectorial

The safe space should take into consideration, the varying needs and experiences of women and girls. It should deliver services that respond to their life cycle, including issues related to GBV prevention and response¹³. The range of possible activities is rather vast and should be decided with the involvement of women and girls, and according to the specific situation. In some cases, a center may host a range of services from sexual and reproductive health, to psychosocial support, to legal services; at other times, some of these services will be available elsewhere. A clear internal and external referral system, should be in place and staff and volunteers should be able to activate it safely and confidentially, It would be useful to be part of the wider GBV coordination network and standard operating procedure process for an effective referral mechanism.



Tailored

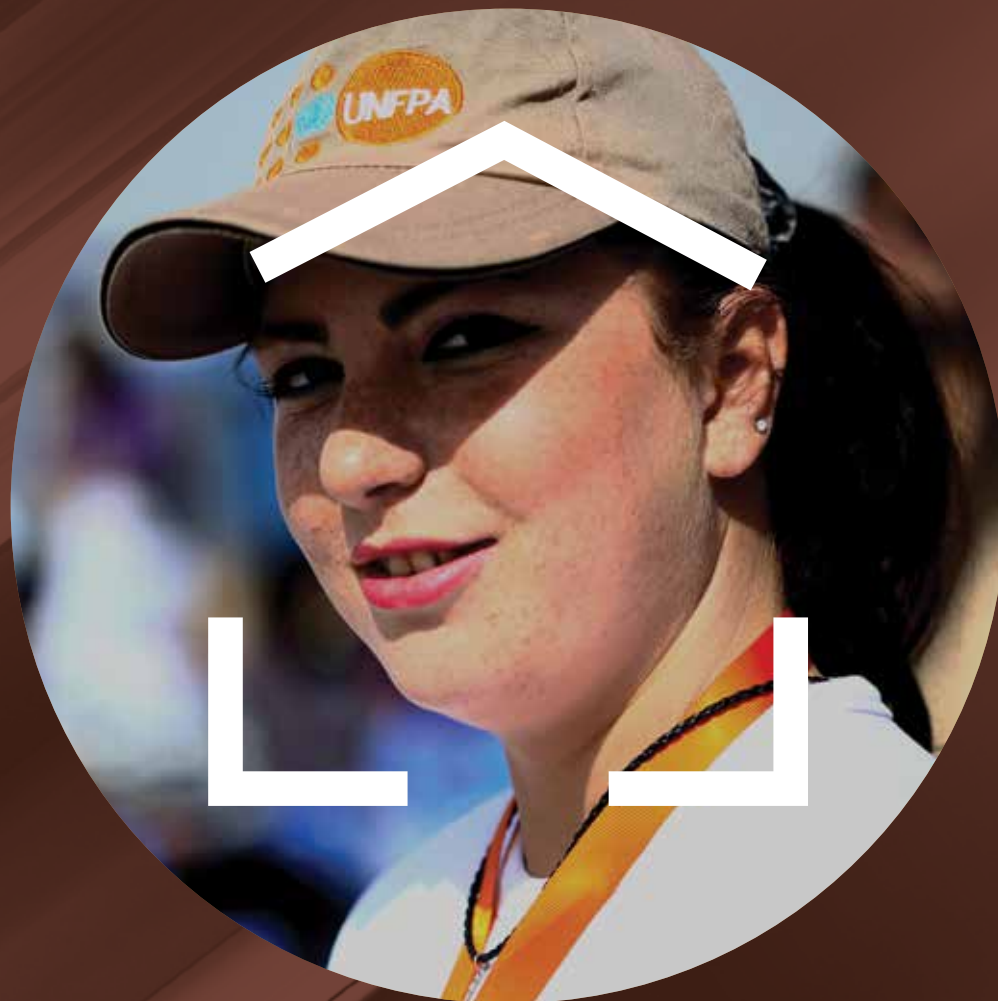
A safe space should be inviting enough for women and girls to feel welcomed and engaged. It is important to maintain balance between structured activities, services, and times to socialize. Activities and approaches need to be culturally and age appropriate as the needs and interests of a 16 year-old girl are bound to be different from those of a 35 year-old woman. A safe space should also take into consideration, the special needs of women and girls living with disabilities.

“It is difficult to simultaneously be both the mother and the father,” said Ameera, mother of a son and two daughters living in al Marj, Lebanon. “Before I came to the centre, I didn’t know about the different forms of violence against women. I didn’t know it could happen within a family too. My husband and I were happy, though we got married when I was very young. After his death, I was unhappy, and my family was very controlling. Now, I feel strong enough to stand up for myself and talk about my experiences. I learn new skills. I even take English classes as that will help me find work. It’s my dream to have my own place where I can live with my children.”

5. How to establish and run women and girls safe spaces



I. Initial assessment¹⁴



A first step is to gather basic information about the needs, preferences, constraints, and assets of women and girls so that they are able to access and participate in programmes. A full assessment may not be possible at the onset of an emergency. However, even when data is not available, it is internationally recognized that GBV increases in times of crisis¹⁵.

An initial assessment helps to determine the feasibility of establishing a safe space. Where possible, questions relating to women and girls safe spaces “should be addressed through coordinated, inter-agency assessments within or across clusters and sectors.”¹⁶ This can help address gaps, prevent overlap in coverage, develop common interagency approaches and standards, coordinate training and capacity development, and share and collaborate on tools. Moreover, the coordinating mechanism may also have mapped the locations of WGSS.

How many safe spaces should be established? *There are no official standards as to how many safe spaces should be available. In refugee camps in Jordan, there is approximately one safe space per 20,000 refugees. In other countries, the number has been determined on the basis of factors such as geographical location and access.*

To sum up, an assessment:

- Should be participatory;
- Should actively engage women and girls, as well as other groups such men and boys, religious and community leaders, etc.;
- Should disaggregate data on the basis of gender, age, and other relevant factors for the sake of inclusivity and better programming/establishment of relevant centers.

Annex II of this document contains a list of questions for each topic to be considered in the assessment.

For greater insight on GBV-related issues, study the WHO guidelines on Ethical and Safety Recommendations for Researching, Documenting and Monitoring Sexual Violence in Emergencies.¹⁷

Initial assessment

a. Safety and security

Women, girls and the community should be consulted in order to understand the security risks in the community, and the types of community support systems that existed for women and girls before the crisis. This part of the assessment will help to determine the need for such a center and/or the type of work/resources it may take to engage the community/ensure community buy-in for the initiative. Other questions focusing on groups of women and girls that are most vulnerable, as well as their location, will provide useful information about security considerations before setting up a safe space.

b. Location

Establishing a safe space does not necessarily mean building a new structure. It means identifying a space that is safe for women and girls to use. This can range from a health center, to school, to community center, to someone's house, to an open space. Adopting the methodology of safety mapping (community mapping¹⁸) can help identify where women and girls are most safe. Women and girls should be involved in mapping their community, marking which times and places are safe and which are not. The same can be done with men and boys, not only to understand how the perception of safety varies, but also to ensure community buy-in.

It might be difficult to answer some of the community mapping questions at the onset of a refugee or IDP situation as refugees and IDPs will know the community less, and camps may have been opened and planned in advance. In the case of refugee camps where it might be necessary to identify a safe space before the population arrives, consultations can still be held with women attending services elsewhere in the location/country, at least to gather some guidance. In all cases, those planning to establish a safe space, and the protection and/or GBV coordination group, in consultation with women, girls, and community leaders should consider the following options when choosing a location for a safe space:

While the physical space of a safe space can be organized in different ways, it is important to consider the range of activities planned when selecting a location and preparing the layout. Some key considerations are:

Inside Structure:

- A spacious activity room with the capacity to accommodate a minimum of 20 people;
- A private room for provision of case management and individual counseling services;
- A day care area for children accompanying mothers; and
- A structure that is accessible for women and girls with disabilities.

In Jordan: A safety audit carried out by the GBV Working Group in Jordan in Azraq camp before it opened, identified that a basketball court (that are general used by men and boys) was going to be located right next to the women center. Based on the recommendations from the safety audit, the camp management was able to get the location of the basketball court changed.

Outside Structure or area:

- Should have a privacy fence or wall to ensure privacy and safety. Discuss with women and girls, how enclosed the space should be; and
- Should preferably have a shaded space around the site to allow for outdoor activities or socialization¹⁹.

In Jordan and Syria, medical teams or a health educator was part of the safe space. This enabled access to health, especially SRH services.

c. Time

It is important to determine, together with women and girls, what time best suits them, and to organize activities that will help customize the safe space for them. One way of doing so is to map their time use and workload. This will provide an indication of when women and girls have time to come to the center²⁰.

d. Activities and services

Interviews and focus group discussions can be organized to understand what kind of activities will be viable. Initially, some basic group activities can be arranged; these can be further developed together with women and girls. It is important to gain knowledge about the types of activities that women and girls used to carry out before their displacement or crisis rather than making assumptions about what they usually may have done or liked. If activities related to economic empowerment are possible, a prior market assessment would be advisable so as to choose one that is most financially viable.

Iraq: UNFPA and UN Women partnered in supporting safe spaces. UN Women brought in the economic empowerment expertise and UNFPA ran the safe space.

Jordan: UNFPA is running the OASIS space with UN Women in Zaatari camp.

e. Partnerships

“Establishing safe spaces means managing complex and context-specific risks. Approaches to safe spaces should be organized and managed in consultation with communities. In some situations, a formal safe space established by an international organization may be the most accessible and appropriate. However, spaces may also be less formal, within the community, or educational spaces linked to women’s leaders and/or networks, for example.²¹”

An important consideration in understanding how best to implement a safe space project is the model of implementation. More specifically, it would be useful to decide whether the model will be actualized through partnership with a local institution, a local or international NGO, or through a joint project with a UN Agency. It may be interesting to partner with an organization that has a different expertise. If possible, specialized organizations working with people with disabilities should also be engaged to ensure access to these centers.

Amal, a 46 year-old woman with five children, was admitted to Al-Halbouni center, in Damascus, Syria, for a medical consultation after being severely beaten by her husband. Thanks to the integrated package of support services provided at the center, she was able to recover. “I know how to access support when needed,” Amal says. Three months after having accessed various services, Amal is better. She visits the center regularly, knowing that it provides her with psychosocial support, a social network, and skills that can help enhance her livelihood prospects.

A Syrian woman in Syria



II. Staffing: roles and capacity development

While the staffing structure depends on need and population size, there are certain basic roles that often appear in a safe space. Depending on the situation, it will be worthwhile to strive for a combination of volunteer and paid staff. Some thought should also be given to where the staff comes from.

The selection of staff should be governed by factors like transparency and level of skill. The hiring of female staff should be prioritized; however, the induction of some male staff members as outreach workers can be strategically significant when there is a need to engage with camp leadership structures, police, and men and boys. When hiring, it is also important to consider who the community/women trust. Annex V offers an example of staffing structure and description of roles.

In Turkey, an important lesson learned was to provide incentives for volunteer staff. Incentives need not be financial, but could be in the form of trainings and/or material goods.

Arrangements should be made for necessary training and capacity-building of the staff so that they are able to safely, effectively, and ethically perform their duties. A comprehensive capacity-building programme with provisions for coaching, mentoring, and regular supervision should be developed to achieve this objective.

In Syria and Iraq, women have preferred that social workers come from their community but live in a different camp or a town outside of the camp as they felt that this made the services more confidential.

In another camp in Iraq, however, the social worker came from the same community, lived in the camp, and had established a high level of trust with women in the community.



The following guidelines can additionally prove helpful:

- Staff and volunteers should be carefully selected and trained on basics of GBV, communication skills, referral pathways, and ways to organize group activities; it is advisable to remember that case managers and response officers will need much more in-depth training and constant supervision;
- It would be advisable to implement a system of engaging 'activity specialists' who visit the safe space for their specific activity only, and general supervisors who stay throughout the day;
- Weekly follow-up visits should be arranged by experienced workers to observe the situation and activities, help animators and community members to reflect on what is or is not working, and advise on how to strengthen activities and handle challenges;
- It is critical to recognize that some workers may themselves have been affected by the emergency, and will benefit from group discussions;
- More experienced WGSS workers should be brought in to mentor less experienced ones;
- A manager should be appointed for supervision and support;
- Resources such as books and training manuals that enable ongoing learning should be built up; and
- All staff should be trained and should sign a code of conduct including one on the Prevention of Sexual Exploitation and Abuse (PSEA)²².

Jihad is a social worker at the Suweileh facility. "I am deeply moved by the stories of these women. It's not easy for them but I've seen a lot of change in women who visit the centre. When they first came here, many couldn't sleep, had problems at home, and some even lost their temper with children. Being able to access a support network, and information lifts a weight off their shoulders as they know they are not alone."

A Syrian refugee woman in Jordan



III. Activities and Services²³

All activities and service should be finalized in consultation with women and girls so that they are responsive to their needs, and are context and age appropriate. The safe space should be a fun place for women and girls. Services should ideally reflect the range of needs, experiences, ages, and comfort levels of people accessing the safe space, as well as organizational expertise and capacity.

While the level of specialization of services provided, and variety will depend on availability of resources and the expertise of each organization, it would be advisable to implement activities and services progressively, starting with basic activities and moving on to more advanced ones.

Guidance may be obtained by studying the different types of activities and services discussed below. These activities should be adapted to the interests of women and girls, and the capacity of the intervention. While many women and girls safe spaces offer specialised survivor support, this is only recommended if there is sufficient expertise. Diversity should also be considered; women and girls with disabilities should be integrated in all activities.

a. Support to GBV survivors

Having a clear referral pathway articulating services specific to the needs of both adult and child survivors can prove extremely beneficial. All WGSS staff should be familiar with the referral pathway, and their respective roles within it. Depending on the specific services available at the safe space, clients may be referred to the following (if they choose): Case worker (for case management services); health provider (for medical care and post-rape treatment, if available); a lawyer or legal association (for legal recourse); and police (for safety).

In Lebanon, a formal life skills training package developed by the American University in Beirut is offered.



b. Psychosocial and Recreational Activities

In Iraq, women have been sewing winter clothes for women and new borns with material provided by UNFPA. These clothes were then bought by UNFPA to include in the winterized dignity kits.

In Lebanon and Jordan, centers have purchased toys for children to play with while their mothers participate in activities.

All activities, be they formal support groups or recreational, should be customized according to the specific needs of women and girls. Activities can include the following:

- **Age-appropriate support group sessions** around a 'center-piece,' which can include coffee/tea sessions, sewing activities, and henna application. Appropriate and desirable 'center-pieces' should be identified during group-based consultations with women and girls in the targeted communities. Such activities require the leadership of professional psychosocial staff;
- **Recreational activities** led by women and girls in the community, with resources procured by the organization. Sewing, make-up, hair dressing, computer literacy, language, crochet, painting, drawing, theater performances are all examples of activities carried out in the Syrian crisis region;
- **Formal vocational trainings** in classes that begin and end in cycles. If possible, certificates should be awarded to participants upon completion of the training;
- **Life skills training**, both formal and informal. The training should be customized and age appropriate;
- **Livelihood activities.** These activities should be carefully developed. It should be known that if the income-generating activities are not based on careful market analysis, they will not generate income. Yet, they can still be an important psychosocial support for women and girls;
- **Day care services**, when possible, to increase access to centers for women with young children. These services can be provided by either volunteer or incentive-based staff working at the safe space. At minimum, toys can be an offer for children to play with.

Age Segmenting and Intergenerational Cooperation: *The needs and interests of a 17 year-old girl will be different from those of a 45 year-old woman. Separate activities adapted for women, young women, and adolescent girls should be planned. However, safe spaces also offer an opportunity for women and girls of different ages to collaborate. Along with peer-to-peer support, role models of different ages can serve as mentors.*

c. Information and awareness-raising

It is always useful to arrange information and awareness-raising sessions with women and girls. The safe space can collaborate with other sectors to provide information on a range of issues such as water and sanitation or nutrition, provided the integrity of the center as a space designed for women and girls is not compromised. Different ways can be considered for information-sharing. In fact, it is not always the best strategy to organize formal awareness-raising sessions; often times, activities too can serve as an entry point for providing information. Topics can include information on available services and how to access them; risk identification and reduction strategies; sexual and reproductive health; women's rights; infant and young child feeding practices; positive coping strategies; life skills; and hygiene promotion.

d. Prevention and outreach activities

Prevention and outreach activities can be arranged, both within and outside the safe space. When arranging such activities, it is important to emphasize working with women and girls, and with the community as a whole, to promote a safer environment, and to encourage community ownership of GBV prevention and risk reduction.

Prevention activities can include:

- Regular **safety audits** to assess security risks for women and girls, and to identify opportunities with other sectors to mitigate those risks. Safety audits should be coordinated through the GBV coordination mechanisms. Findings from safety audits should be shared with other relevant sectors, such as Shelter, CCCM, and WASH, and with camp managers/leaders so that they can ensure that the location and any programmatic approaches being implemented therein, are safe for women and girls. The involvement of women and girls from within the community to conduct **safety mapping** is strongly recommended. Such an activity can support women and girls in identifying high-risk locations throughout their communities, and working together to minimize those risks.
- **Safety groups**, such as water collection group or school accompaniment group. Such groups can empower communities to ensure a safer environment for women and girls. Women and girls need to be meaningfully engaged in the creation and utilization of these groups.
- **Outreach activities.** These activities offer opportunities to access women and girls whose movement may be restricted in some way. Building upon existing women groups and support networks within the communities is crucial for enhancing the effectiveness of outreach activities. These initiatives can include:
 - › Home visits (through volunteer outreach team) and home-based tea/coffee sessions to inform community members about activities and services. In this context, it is essential for the outreach teams to be fully aware of issues of privacy and confidentiality, and of the referral system;

Activities and Services

- › Engagement with community structures, religious and community leaders. Such outreach work should include working with men and boys in the community to prevent GBV and to empower women and girls;
- › Development of more informal safe spaces around the main physical safe space. These can take the form of women groups that meet regularly, and are supported to carry out activities outside of the main center.

Equipment:

The safe space should be equipped with necessary furniture and materials to ensure women and girls can comfortably and effectively participate in all activities. The following supplies and equipment may be procured, depending on budget availability:

- Lockable cabinet(s);
- Chairs and a table each for the private and the activity rooms;
- IEC material including posters, charts, and visual aids for any information sessions;
- Special items for women and girls with disabilities, whenever possible;
- Emergency stand, fire extinguisher or blankets in case of emergency;
- Toys and books for children.

“I want to learn new skills but I’d also like to contribute here,” says Yasmeen in Kfar Seer, Nabatieh, Lebanon. Yasmeen is expecting another child but is more concerned about her family’s finances. The centre offers her more than just training to improve her chances of finding a job once she’s had her baby. She has found a place of refuge and a support network. “I try to come to the center as this is the only time I get to myself. I talk to other women and forget my worries for a while. Since I didn’t have any baby clothes, my friends at the center gave me clothes and blankets they didn’t need any more. It’s a great relief to have such supportive friends.”

A Syrian refugee woman in Lebanon



IV. Monitoring and evaluation

The safe space needs to be monitored on an ongoing basis to track its development, identify gaps, and ensure quality activities and referrals. Monitoring the safety of the space is also an important consideration in the Syrian context.

Some important points to consider are:

- Availability of a monitoring and evaluation plan;
- Training of selected workers and staff on effective monitoring of programme activities;
- Monitoring of the participation of women and girls for each kind of activity;
- Use of client feedback surveys;
- Monitoring, via agency staff, the quality of the activities, workers' skill levels and attitudes, and adequacy of supplies and logistics supports;
- Use of participatory methods of monitoring and evaluation that engage women and girls and invite views of community members; and
- Arranging for inter-agency collaborative evaluations, when possible, to improve coordination and yield conclusions that apply more widely²⁴.

"There is a lot of discrimination against us refugee women," said Aida, nurse/salon owner from Ghouta, a center in Al Marj, Lebanon. Aida started attending art and drama therapy classes at the women's centre. "The programme has helped me regain the confidence to start my own business and to stand up for myself." She is also working as a UNFPA outreach volunteer, identifying women who could benefit from the medical, psychosocial and vocational services at the center. "I'm happy to be able to help other Syrian women."

A Syrian refugee woman in Lebanon



V. Phase-out

A phase-out or transition plan that links with broader recovery planning should be developed in close consultation with the community and other stakeholders. Using a bottom-up approach will support ownership and transition of the WGSS to the community and/or the local organization. It is important to ensure that the community is aware, from the outset, that a phase-out period and/or handover will take place, and to share information about when the phase-out or transition will occur, the moment it is known.

The following guidelines should be considered during the phase-out:

- Transitioning of the WGSS into community resources such as community centers;
- Inclusion of budgetary considerations in planning the phase-out;
- Empowerment of women and girls, along with communities, to make key decisions about the transition of the WGSS, whenever possible;
- Engagement of women and girls in implementing the strategy;
- Planning enough time for the handover between international and national partners; providing opportunities for capacity development of the staff of the safe space and/or local organization (both institutional and technical training); and
- Adaptation of plans on the basis of the changing context²⁵.

Malika, aged 23, is from Raqqa and lives in Amman. She doesn't feel as isolated ever since she started visiting the clinic in Suweileh. The comprehensive approach of the clinic has encouraged her to get advice on family planning too. "My husband and I discuss having another baby as he wants a girl but I think we shouldn't. Not here..However, I now feel more confident discussing the topic with him because I am aware of all available services and options."

A Syrian refugee woman in Jordan



6. Examples from the region



In Syria, UNFPA works with partners to establish safe spaces in reproductive health clinics. Such integration allows greater access for a larger number of women. For example, women can come to the safe space without having to say they are going to a women-specific space, and they can easily access health (including reproductive health) services at the same time. This comprehensive approach not only allows for a more confidential and less stigmatizing system but also addresses the **security concerns** in Syria that restrict movement.



In Lebanon, UNFPA works through Listening and Counseling Centers that were part of the local pre-crisis Lebanese system, thereby ensuring **sustainability** by building the capacity of and strengthening the national systems. These centers have also enhanced their services; for example, they offer activities for children while the mothers participate in their own sessions.



In Iraq, UNFPA has established safe spaces within existing community cultural centers in urban settings as these centers are already known to and trusted by the communities. Specific hours and days have been allocated to women-only activities. In the camps, specific safe spaces have been established with a focus on **outreach**, which has increased attendance.



In Jordan, UNFPA's supported safe spaces are **closely linked with Sexual and Reproductive Health services**. They are either present in the same physical space or are carried out by the same partners to facilitate referral. Further, the approach of the safe spaces in Jordan, whether in camps or communities, is very comprehensive and includes case management and psychosocial support for survivors of GBV, as well as legal services in some cases.





In Turkey, UNFPA established a women safe space in close collaboration with the camp's women committee²⁶. The aim of the space was to empower women to break out of their social isolation. The space became **a place for women to share their issues**, socialize, and take part in informal awareness-raising. Being linked to the women committee provided an opportunity for them to solve any camp-related problems with the camp management.

Annexes



Annex I: Do's and Don'ts: a checklist for establishing women and girls safe spaces

 DO	 DON'T
Ensure women and girls are involved at each stage of the project cycle, and that they lead the establishment and running of the space	Impose a ready-made model without considering women and girls
Coordinate with the government and other agencies that implement GBV programmes, as well as the GBV coordination mechanism	Ignore linking up the WGSS with other services
Adopt a multi-sectorial approach within the center through a referral system	Isolate the WGSS so that it is only able to provide a certain kind of service or activity
Engage communities, parents, husbands, and community leaders in key decisions	Restrict the scope of the WGSS to being a facility sans community engagement
Make the WGSS accessible and inclusive for women and girls; keep diversity as a key consideration, and include meeting the needs of persons with disabilities	Assume that because the WGSS is open to all, therefore it is accessible and inclusive
Ensure that all staff and volunteers understand and adhere to an appropriate code of conduct	Make the WGSS workers sign a code of conduct, regardless of whether they understand or care about it
Ensure that the timing and nature of activities are compatible with the daily routines of women and girls	Predefine the timing and types of activities without consulting women and girls
Ensure that the location is safe and accessible	Assume that any location will work
Ensure that activities are women-lead	Treat women as benefices
Ensure that all staff is supported and supervised, and benefits from continual capacity-building	Assume they are able to do their job
Ensure that mechanisms are in place to monitor activities through participation of women and girls (ie: client feedback, staff supervision)	Rely solely on having a complaints box for feedback
Plan for phase-out in advance, and allow for sufficient time	Halt all activities once funds run out

Annex II: Assessment questions

Topic	Questions	To whom
Safety and Security	<ul style="list-style-type: none"> ▪ What are the main physical and psychosocial threats to women and girls? How do they vary for diverse groups, e.g., by age, religion, ethnicity, sexual orientation, disability, etc.? ▪ Did women and girls have a place to meet before the crisis? Where did they meet? What did that look like? If not, what would they like it to look like? ▪ Would a WGSS help to prevent or diminish these threats, or could it increase them (e.g., are there risks to women and girls in accessing the WGSS)? ▪ Would a WGSS strengthen the existing support systems, or would it duplicate existing activities and systems? ▪ What is the acceptance of families and communities for this type of intervention? ▪ How does the community view the establishment of a WGSS? Is it likely to develop a spirit of ownership in developing a WGSS? ▪ Who are the key people in the community or camp who support women and girls? Who do women and girls go to when they need help or advice? ▪ Who are the key people in the community or camp to involve when setting up a WGSS? ▪ Which women and girls are highly vulnerable and may need additional support to participate in WGSS activities? ▪ Have appropriate steps been taken to set up complaints and feedback mechanisms through the use of women committees, complaints boxes, etc., to ensure downward accountability to beneficiaries? ▪ How many safe spaces are needed in the location/community in question? How many women and girls are likely to access them?²⁷ 	Women, girls men and boys
Location	<ul style="list-style-type: none"> ▪ What places are considered acceptable for women and girls to go to? Under what conditions? ▪ Must they be accompanied to these places? If so, by whom? ▪ Are there specific purposes attached to their going to places (e.g., shopping, running errands for the family, taking siblings or other family members to a health clinic)? ▪ Are there restrictions on the time of the day when a girl may go to certain places? ▪ Who within the family decides whether, when, and where women and girls may go? ▪ How do girls move around the community (e.g., by foot or bus)? ▪ Are girls subjected to harassment, teasing, or verbal abuse while traveling?²⁸ ▪ Does the place have accessible clean water and child- and gender-friendly toilets or latrines? ▪ Is the site accessible for girls and women with disabilities? What routes to they have to take to get there? ▪ How will the site change over seasons and the calendar year? Does it have particular owners at particular times of the year? ▪ Is it close to or far from any police or military installation? ▪ Is it close to other services such as a health center or a hospital? Are there any child-friendly services nearby? Is there a child-friendly space? ▪ Is it near places where when and boys usually gather (e.g., a football field or a sports court)?²⁹ <p><i>More guidance on safety and community mapping can be found at www.gbvresponders.org</i></p>	GBV coordination mechanisms, partners, women, girls, men and boys.

Topic	Questions								To whom	
Time and Commitment	Activity³⁰		Midnight to sunrise	Sunrise to mid-morning	Mid-morning to noon	Noon to mid-afternoon	Mid-afternoon to sunset	Sunset to late evening	Late evening to midnight	Women and girls
	School-related activities									
	In school									
	In transit from/ to school									
	Doing homework									
	Personal care									
	House chores									
	Child care									
	Domestic duties outside									
	Employment									
	Socialization									
	Sleep and rest									
Activities and Services	<ul style="list-style-type: none"> • How do you like to spend your time? • What would you like to learn? • Is there any particular kind of information you are interested in? • Are you interested in physical activities? • Would you like to participate in a formal class? About what? How long? • Do you like crafts? What kind? • What type of activities did you do back home? • What kind of support services do you think you or women and girls in your community need? 									Women and girls

Annex III: Women and girls safe spaces versus other spaces

Safe spaces versus safe houses and shelters³¹

Women and girls safe spaces, as defined above, fulfill a very different objective than safe houses or shelters. Safe shelters are places that provide immediate security, temporary refuge, and support to survivors escaping violent or abusive situations. They constitute a formal response service as part of GBV case management. This service is, through the referral process, made available to women and girl survivors of violence who are in imminent danger. Safe shelters are professionally staffed and accredited. Admission is contingent on specific criteria and strict standard operating procedures of confidentiality. Safe shelters deliver specialized services and provide beneficiaries with personal security.

Safe spaces versus women safe spaces in reception areas³²

Women and girls-only safe spaces in reception areas of refugee camps differ from safe spaces. The former are a first entry point into the refugee camp. The primary objective of such areas is to minimize the risks for women and girls undergoing the processes of being assigned shelters, receiving initial assistance packages, and entering the camp. These areas can also be used to provide information regarding the services available to women and girls, and ensure connection to other services when specific vulnerabilities are identified.

Safe spaces and child-friendly spaces³³

Child-Friendly Spaces (CFSs) are widely used in emergency situations as a first response to the needs of girls and boys, and as a forum for working with affected communities. They are established in response to children's immediate rights to protection, psychosocial well-being, and non-formal education. This response is carried out through activities directed at caring for and protecting children, such as the setting up of support groups, peer activities, life skills workshops, and more. CFSs typically cater to children i.e., boys and girls under 18 years of age. In some contexts, however, they may also engage and benefit young people aged above 18 years.

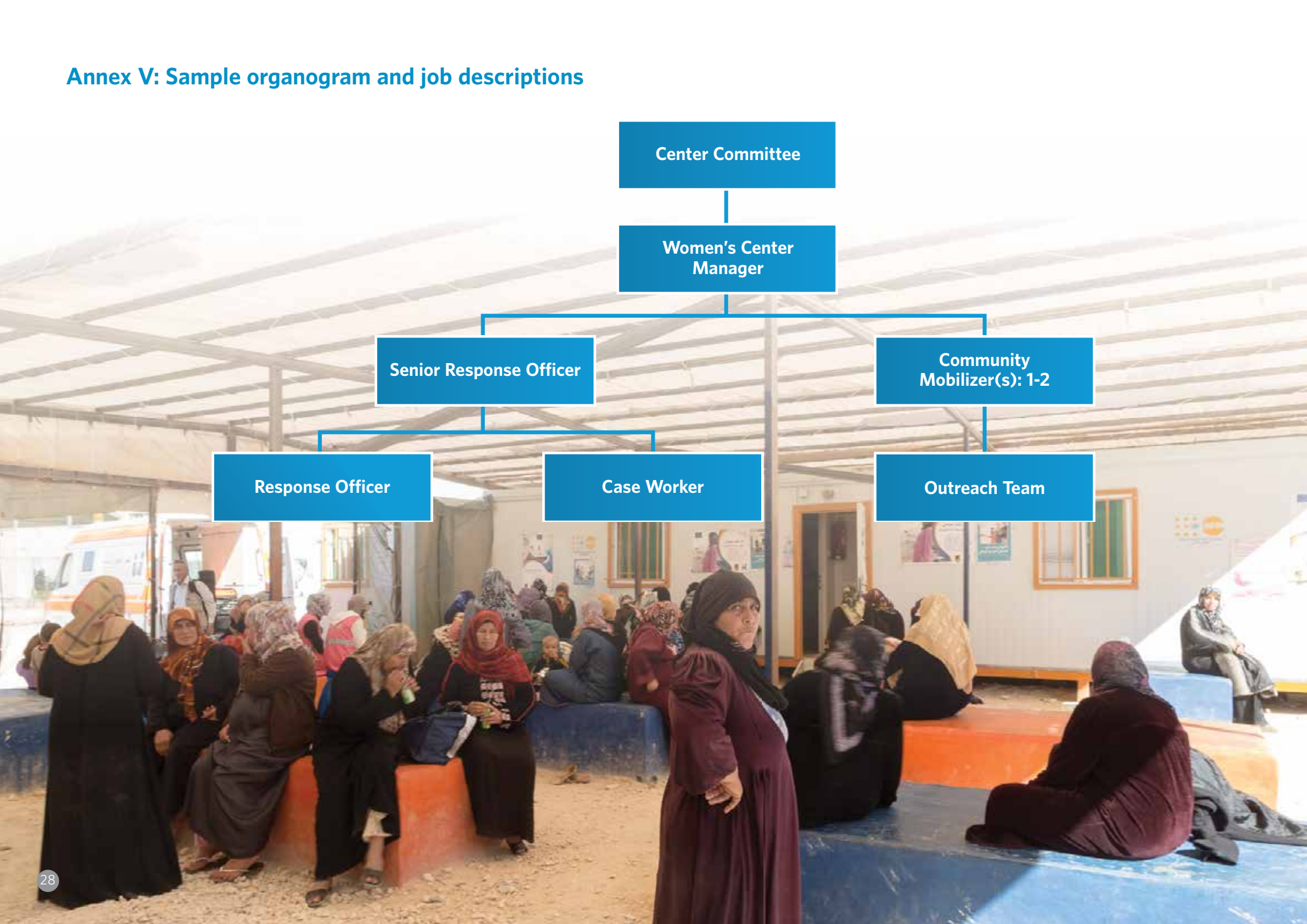
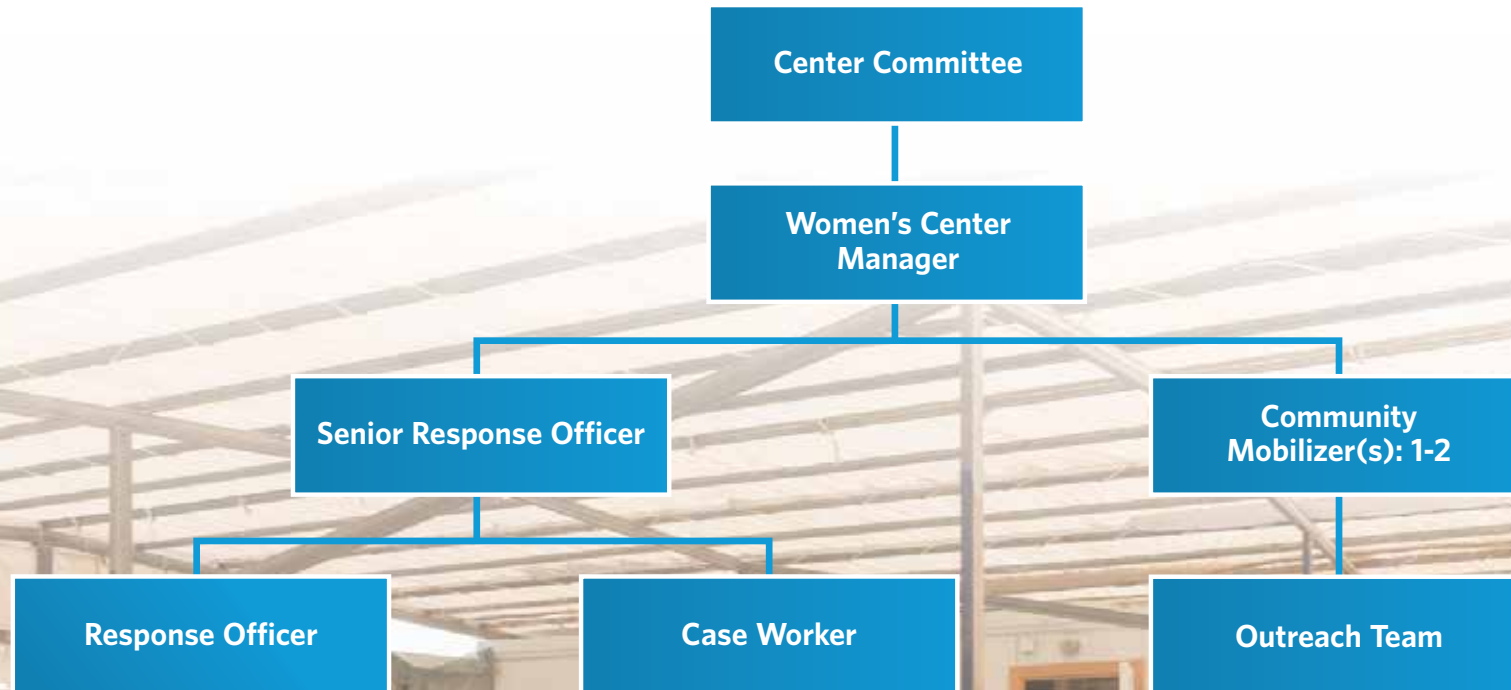
Safe spaces for women and girls and CFSs do, however, share some common elements. At times, they may also cater to similar populations. This is particularly true with regard to adolescent girls. In this respect, it should be appreciated that the purposes of CFSs and those of safe spaces do not overlap, but are seen to be complementary. In the Jordanian context, safe spaces for women and girls typically house very specialized response services for SGBV survivors, while CFSs are less specific and provide referrals to specialized protection services.



Annex IV: Possible locations³⁴

Location	Pros	Cons
New structure	<ul style="list-style-type: none"> • Can be chosen with the consent of women and girls • Space can be shaped and organized • New systems can be implemented 	<ul style="list-style-type: none"> • May be less sustainable • Require more resources to set up • May take time for the community and women to get to know it and trust
Community centers	<ul style="list-style-type: none"> • Formalize access of women and girls 	<ul style="list-style-type: none"> • Could be uninspiring • May not be set up for girls • May not be appropriately located (near a football field or an area traditionally only frequented by men and boys) • May need community negotiation to make women and girl-only times
Mosques and churches	<ul style="list-style-type: none"> • Respected place for women and girls to meet 	<ul style="list-style-type: none"> • May reinforce traditional gender norms
Open-air spaces	<ul style="list-style-type: none"> • Available • Free • Girl groups are very visible 	<ul style="list-style-type: none"> • May require back-up for bad weather • Doesn't ensure access to community entitlements and therefore could reinforce girls exclusion • Girl groups are very visible
Homes of respected community members	<ul style="list-style-type: none"> • Respected places for girls to meet 	<ul style="list-style-type: none"> • May reinforce traditional gender norms • May be restrictive for certain community members

Annex V: Sample organogram and job descriptions



A possible combination of staff and their roles is outlined below. All staff should understand the code of conduct and sign it.

Center manager

- Provide overall supervision of and support to staff;
- Represent the WGSS;
- Liaise with Project Coordinator and/or Assistant Project Coordinator;
- Consolidate monthly reports;
- Monitor activities in the WGSS; and
- Coordinate with other relevant sectors, as needed.

Case manager(s)/Social worker(s)/Psychologist

- Case management services;
- Referral to any other service (health, specialized PSS, legal, etc.), when requested by survivor;
- Provision of one-on-one counseling services (by technically trained staff);
- Accompaniment to support services, police, or family as requested by survivor;
- Safety planning services; and
- Participation in outreach services.

Response officer(s)/Psychosocial worker(s)

- Emotional support groups and activities;
- Peer support groups;
- Life skills;
- Refer clients to case workers, as relevant; and
- Participate in outreach services.

Prevention officer/community mobilizer

- Conduct safety audits; follow-up with other relevant sectors;
- Conduct safety mapping with women and girls;
- Support volunteer outreach team;
- Hold GBV information and awareness sessions through activities; and
- Establish and support community-based safety groups, as needed.

A peer-based outreach team (volunteer or incentive-based workers)

- Decide the size of the outreach team according to the size and geographical scope of the community. The outreach team should be of mix gender and age (younger adolescent and older adolescent girls, and adult women). Since the outreach team is volunteer-based, its responsibilities should not conflict with any other home-or income-based responsibilities;
- Conduct home-based information sessions/activities for those who cannot come to the center;
- Raise awareness among women and girls in the community about the WGSS and its available services and activities;
- Link staff with women and girls in the communities; and
- Build relationships with other community groups.

Activity volunteer or child minder

- Guide recreational activities; and
- Organize activities for children

Center Upkeep/Support Staff

- 24-hour guards; and
- 1-2 cleaners to support with coffee/tea sessions or other large events³⁵



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UNFPA believes that every Syrian woman and girl has the right to have access to affordable reproductive health care and be effectively protected from gender-based violence. UNFPA and partners are scaling up efforts to empower and improve the lives of Syrian women and youths and impacted communities in host countries, including by advocating for human rights and gender equality, to better cope with and recover from the crisis.

UNFPA: Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled.





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