



GENDER-BASED VIOLENCE

Safety Audit Toolkit

TABLE OF CONTENTS

ACRONYMS	3
1. INTRODUCTION	4
Background	4
Why a Safety Audit?	4
About the Toolkit	5
Terminology	5
PART I: A GUIDE ON THE SAFETY AUDIT PROCESS	6
Additional Resources & Guidance	10
Key References	10
PART II: SAFETY AUDIT TOOLS	12
Tools	12
DECISION TREES	15
How to use the decision tree diagrams	15
Decision tree #1 – Context/Security	16
Additional considerations	17
Additional considerations	19
PRE-AUDIT CHECKLIST	20
Additional Key Resources:	20
BRAINSTORMING TOOL	21
How to do it: Step by Step Guide	21
SAFETY AUDIT –CHECKLIST TOOL	23
Planning: Key questions to consider	23
Steps for conducting the Safety Walk	24
Steps for conducting the mapping	25
Checklist & Template: Suggested list of factors to check	26
SAFETY AUDIT – FOCUS GROUP DISCUSSION (FGD)	29
Planning: Key questions to consider	29
Selection of questions	29
Contextualize	29
Grouping	30
Facilitation	30
SAFETY AUDIT – KEY INFORMANT INTERVIEW	37
Selecting the KI	37
Conducting the KII	37
Sample questions	37
General questions for all interviewees	37
SAFETY AUDIT QUESTIONNAIRE	42
SAFETY AUDIT QUESTIONNAIRE	47
HOW TO SET UP KOBO	52
What is KoBo Toolbox?	52
Create an account	52
Clone forms	53
Deploy form	54
Managing Permissions	54
Record Validation	56

ACRONYMS

- AGD:** Age, Gender, and Diversity
- UNHCR:** United Nations High Commissioner for Refugees
- FGD:** Focus Group Discussion
- GBV:** Gender-Based Violence
- KII:** Key Informant Interview
- PSEA:** Protection from Sexual Exploitation and Abuse
- PoC:** Persons of Concern (to UNHCR)
- SEA:** Sexual Exploitation and Abuse

1. INTRODUCTION

Background

As part of the *Operational Guidance*¹ to the *UNHCR Policy on the Prevention, Risk Mitigation and Response to GBV* (2020)², UNHCR has developed the Gender-Based Violence (GBV) Safety Audit Toolkit to support the UNHCR workforce and our partners in conducting a GBV situation assessment³ for each location⁴, as part of the annual planning processes outlined in the Policy. The goal of the Safety Audit is to ensure safety against GBV for persons of concern to UNHCR during the provision of services and in their communities⁵. The tools incorporate participatory methodologies designed to identify and understand the safety concerns related to GBV risks with persons of concern to UNHCR, especially for women and girls and other persons at heightened risk, in different types of settings (urban, rural, camp/reception centres⁶). While the tool is intended to be used by various sectors, multi-function teams as well as GBV actors to inform the planning, implementation, and monitoring of their programming, special consideration needs to be taken with regards to the subject matter and a GBV specialist or qualified and experienced Protection staff⁷ should be consulted as part of the planning process. The Toolkit provides a standardized approach to Safety Audits⁸ as a key component to support the continued institutionalization of GBV prevention, risk mitigation, and response work across all operations.

Why a Safety Audit?

Everyone has a responsibility to mitigate the risk of GBV in their respective area of work based on the needs of the community. The Safety Audit provides support to identify the needs of PoC around GBV risks without seeking evidence or proof of the occurrence of GBV incidents, as it is acknowledged that GBV is happening everywhere⁹. Rather, the Safety Audit specifically aims to collect information on the perception of safety around GBV risks and to identify high-risk factors in PoC surroundings, as well as to hear their opinions on strategies to enhance safety and minimize GBV risks in their communities and on the provision of services. Safety audits can also help to foster collaboration with and within communities to address GBV risks, strengthen response, and improve recommendations.

¹ Forthcoming.

² UNHCR, Policy on the Prevention of, Risk Mitigation, and Response to Gender-Based Violence (GBV), 2020, UNHCR/HCP/2020/01, available from <https://www.unhcr.org/5fa018914/unhcr-policy-prevention-risk-mitigation-response-gender-based-violence>.

³ The purpose of a GBV assessment is to better understand the types and scope of GBV in a specific context, risk factors and gaps in services, resource and capacity. It is not to determine prevalence. See Supra note 2, pp 12 for additional information.

⁴ 'Location' here refers to areas where PoC reside and/or move through. The regularity of GBV situational assessments will be inevitably impacted by the nature of the operational and advocacy presence of UNHCR in a given country, and the capacity of national actors.

⁵ While Intimate Partner Violence is one of the common forms of GBV, likely occurring in private spaces, the Safety Audit is not recommended for data collection at the household level due to strong safety concerns for survivors.

⁶ UNICEF GBViE Help Desk, Mapping of Safety Audit Tools and Reports, 2019, available from <https://gbvguidelines.org/en/documents/safety-audits-a-how-to-guide/>.

⁷ This is inclusive of multifunctional teams. It is recommended that Protection staff will have taken the 3 levels of e-learning and have completed the GBV Training of Trainers Learning Programme. If expertise is not available within the Operation, support should be sought from the respective Bureau.

⁸ Several useful safety audit tools already exist. However, many of these tools were designed for camp-settings and/or were not designed for working with refugees/PoC or included collecting information on incidents of GBV, which is not recommended in this Safety Audit. Some of these existing tools have been adapted and/or referenced for this Safety Audit.

⁹ GBV guidelines highlight that "waiting for or seeking population-based data on the true magnitude of GBV should not be a priority in an emergency due to safety and ethical challenges in collecting such data. With this in mind, all humanitarian personnel ought to assume GBV is occurring and threatening affected populations; treat it as a serious and life-threatening problem; and take actions based on sector recommendations in these Guidelines, regardless of the presence or absence of concrete 'evidence.'" See IASC Guidelines for Integrating GBV Interventions in Humanitarian Action, 2015, pp.2., available from https://gbvguidelines.org/wp/wp-content/uploads/2015/09/2015-IASC-Gender-based-Violence-Guidelines_lo-res.pdf.

The purpose of the Safety Audit (SA) is to gather and analyse data that can be used to assess and regularly monitor GBV risk and compliance with key standards¹⁰. Its tools are designed to collect site-level information specifically as it relates to the safety and risks of GBV across different sectors. Safety audits can be used as rapid GBV assessments, during the onset of an emergency, or regularly as a monitoring tool.

The objectives of this Safety Audit are:

1. Assess and monitor the overall safety and GBV prevention, mitigation, and response programming in a given setting.
2. Identify promptly GBV risks and gaps in new or existing programming (to inform adjustments).
3. Enhance evidence-informed programming, advocacy, coordination, and partnership.

About the Toolkit

The Safety Audit Toolkit is designed to help Operations conduct an annual GBV assessment. The experience of using the Safety Audit Toolkit will be periodically evaluated and refined on an ongoing basis.

The Safety Audit is laid out in two sections, i.e.:

- Part I provides a guide on the safety audit process, taking users through the key approaches and considerations, and the steps of the Safety Audit process.
- Part II offers a selection of tools that can be used to carry out the safety audit. The tools are drawn from experience elsewhere and adapted for UNHCR and can be further adapted to match local needs and conditions.

Terminology

For purposes of the Toolkit instructions, gender-based violence (GBV) is defined as *'an umbrella term for any harmful act that is perpetrated against a person's will and that is based on socially ascribed (i.e. gender) differences between males and females. It includes acts that inflict physical, sexual, or mental harm or suffering, threats of such acts, coercion, and other deprivations of liberty. These acts can occur in public or in private.'*¹¹ The tools also reference the GBVIMS categorization of the various forms of GBV¹² and include 'sexual exploitation and abuse (SEA)' as a form of GBV¹³ for the purposes of data collection. However, the GBV terminology and definitions may need to be adapted to the local context in order for them to be better understood by PoC during data collection.

When working with persons with specific needs and/or of diverse backgrounds, the language used and preferred by them can vary in different contexts. Some guides are available in the resource section of this Toolkit. Organizations and local associations or committees that represent such persons can be a good resource for guidance on acceptable language.

The word 'safety' is used in reference to GBV as a concept that stands for a wide variety of issues that are meant to be explored from the point of view of PoC. It refers to the condition of being protected from GBV harm, caused by non-intentional failure. Thus, the Safety Audit is aimed at evaluating the environment for these related risks and reducing opportunities for GBV.

¹⁰ Inter-Agency Standing Committee's (IASC) GBV Guidelines, 2015, available from

https://gbvguidelines.org/wp/wp-content/uploads/2015/09/2015-IASC-Gender-based-Violence-Guidelines_Io-res.pdf.

¹¹ UNHCR adopts the IASC definition of GBV. See IASC, GBV Guidelines for Integrating GBV Interventions in Humanitarian Action, 2015, available from <https://gbvguidelines.org>. For more information from UNHCR, see Supra Note 2, pp 5-7.

¹² The GBVIMS categorizes the various forms of GBV into six major types: forced marriage; psychological/emotional abuse; physical assault; denial of resources; sexual assault; and rape. The six core GBV types were created for data collection and statistical analysis of GBV. For more information, see the Gender-Based Violence Information Management System (GBVIMS), available from <http://www.gbvims.com/>.

¹³ The terms 'sexual exploitation' and 'sexual abuse' are defined in the 2013 Secretary-General's Bulletin, as follows: 'The term 'sexual exploitation' means any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another. Similarly, the term 'sexual abuse' means the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.' See Special measures for protection from sexual exploitation and sexual abuse (ST/SGB/2003/13), 2013, available from <https://undocs.org/ST/SGB/2003/13>.

PART I: A GUIDE ON THE SAFETY AUDIT PROCESS

Key Approaches and Considerations

GBV is a human rights violation affecting all aspects of a person's well-being and constitutes a core component of UNHCR's protection mandate. The Safety Audit draws from the conceptual foundations outlined in the Operational Guidance on the UNHCR Policy on the Prevention, Risk Mitigation and Response to GBV (2020)¹⁴, which include the following GBV guiding principles and approaches:

- Human Rights-Based¹⁵
- Survivor-Centered¹⁶
- Child-friendly
- Age, Gender, and Diversity (AGD)¹⁷
- Community-based¹⁸
- Humanitarian principles¹⁹

Persons of concern, in particular women and girls, and groups at heightened risk²⁰, must be meaningfully consulted in a participatory process and their feedback must be reflected in all programming intended for their benefit.

Some Key Considerations: The participatory aspects of the Safety Audit tools should only be conducted where services are available and referral pathways are in place. The tools are not intended for collecting information on personal incidents of sexual and gender-based violence (GBV) and/or other types of violence. However, facilitators, interviewers, and/or enumerators should be prepared and trained to respond in case an individual wishes to disclose an incident of GBV, CP, or other security issues²¹.

As part of 'Do No Harm,' GBV survivors should not be sought out or targeted as a specific group during the Safety Audit. As with any assessment, the Safety Audit should start with a review of existing assessment data and community members should not be subjected to repeated assessments on the same issue if the information is available.

The Safety Audit Process

The Safety Audit is informed by the key approaches above and can be implemented following the list of key steps and considerations below. The complexity and scope will vary depending on the scale and context of the location(s) to be assessed.

¹⁴ [Insert link](#)

¹⁵ A rights-based approach is a conceptual framework normatively based on international human rights standards and operationally directed to promoting and protecting human rights in humanitarian programming. Four main principles underlie this framework: participation, accountability, equality, and non-discrimination.

¹⁶ The Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming, GBV AoR, 2019, available from <https://www.unfpa.org/minimum-standards>.

¹⁷ See UNHCR Policy on Age, Gender and Diversity, 2018, available from www.unhcr.org/5aa13c0c7.pdf.

¹⁸ A community-based approach is a way of working in partnership with persons of concern during all stages of UNHCR's program cycle. For further discussion on UNHCR's approaches, see Ch. 2 "The Context, concepts and guiding principles" in A Community-Based Approach in UNHCR Operations, 2008, available from <http://www.unhcr.org/47f0a6712.pdf>.

¹⁹ The four guiding humanitarian principles are humanity, neutrality, impartiality, and independence. The first three principles are endorsed in U.N.G.A. resolution 46/182 (1991), <https://undocs.org/A/RES/46/182>. The fourth key principle underlying humanitarian action was added in U.N.G.A. resolution 58/114 (2004), <https://undocs.org/A/RES/58/114>.

²⁰ Individuals who may be at heightened risk can include persons with disabilities, adolescent girls, unaccompanied children, and persons with diverse SOGI among others.

²¹ Recommended resource: Psychological first aid: Guide for field workers, 2011, available from https://www.who.int/mental_health/publications/guide_field_workers/en/.

Step 1: Determine if a GBV Safety Audit is needed/safe

Before planning the safety audit, the GBV specialist should aim to understand the context, determine whether such an audit is needed, and assess whether the context is appropriate and secure for conducting it. [Decision Tree #1 tool \(Section II\)](#) has been developed to identify and guide you through some key questions and factors for assessing your context.

- **Desk Review:** According to the UNHCR Needs Assessment Handbook, “needs assessments rely on both secondary and primary data and should always start with a desk review of available information, based on the analysis plan and in support of the analytical framework.”²² This is a good practice for any data exercise. A desk review ensures that existing data is re-used, thus avoiding duplication of primary data collection efforts, the wasting of time and resources, and unnecessary burdens on respondents. The desk review involves identifying potential sources of information for context analysis, including country of origin information, reports, and assessments from other organizations, census and population data, violence against women surveys, etc. The sources and their information are then assessed for reliability, credibility, and usability. Only those information needs that cannot be met through secondary data should be fulfilled through primary data collection. Your identified information gaps and needs, will be an important factor in determining what of the Safety Audit tool(s) will be used, as well as they will be adapted to your specific context and purpose.

Step 2: Plan the Safety Audit

This section provides an overview of the key areas to consider when planning the Safety Audit.

- **Objectives and focus:** Clearly specify the purpose of the Safety Audit in the context (e.g., decisions to inform, audience/end-users of the information) as well as the information needs for the particular Safety Audit exercise. Go over the purpose/information needs/questions with organizations involved and community leaders, if possible, and revise, as necessary.
- **Coordination/roles and responsibilities:** Clear responsibilities should be outlined as well as timelines for each step. Roles will vary by context; however, the Safety Audit should only be conducted with the technical support of a GBV specialist/qualified and experienced Protection staff. If appropriate and available, involve the GBV coordination mechanism, as well as broader protection coordination mechanisms and relevant UN agencies. Include consultation and coordination with host communities/neighbours, local authorities and NGOs when possible.

Community participation in assessments – particularly with women and girls and other persons at heightened risk of GBV- is essential and must be sought from the very beginning, including in an emergency. Consulting with women-led organizations and groups is also essential as part of any GBV assessments. Try to involve many different groups with respect to AGD and ensure their concerns can be raised, acknowledged and, if possible, addressed before starting the safety audit. As appropriate, also meet with host communities or neighbours in urban areas to involve them in the process.

- **Safety and security measures:** Include a plan to mitigate any potential risks, including a mechanism to monitor, report, and respond to issues that may arise because of the safety audit. This includes guidelines and mechanisms to be report a complaint or an incident of sexual exploitation and abuse²³ confidentially. Identify and mitigate any potential risks that conducting a safety audit, and the visibility associated with it, would create for those participating in it, such as staff, partners, PoC, other participants, and members of the communities. The [Pre-Audit Checklist \(Section II\)](#) is one of the tools available to help guide practitioners on the minimum measures to ensure the safety of all those involved in information gathering.
- **Select & adapt the data collection tool(s):** Decide which tool(s) will be used for data collection, based on purpose/information needs and feasibility/appropriateness in context. [Decision Tree \(#2\) \(Section II\)](#) is recommended at this stage to guide you in choosing a tool(s).

²² See UNHCR, Needs Assessment Handbook, 2017, pp. 43, available from <http://needsassessment.unhcr.org/>.

²³ See Interagency Standing Committee, Strategy: Protection from and response to Sexual Exploitation and Abuse and Sexual Harassment, 2018, available from <https://psea.interagencystandingcommittee.org/iasc-strategy>.

- Define the area to be audited (community centre, safe space, school, urban neighbourhood, street, a particular route travelled, etc.).
- Map diversity, identify prioritized communities/groups.
- Decide the profiles/composition for the groups that will work best for the tool(s) that will be used and the number of observations or replicates.

Tailor the tools to operational context and information needs as appropriate. The list of questions found in the tools is neither exhaustive nor rigidly prescriptive, meaning that not every question is necessary, and other questions may be added. Contextualize the tool to ensure that appropriate terminology, language, and cultural aspects are respected.

When tailoring the tool, remember that the 2018 UNHCR AGD Policy states that “at a minimum, all data collected by UNHCR will be disaggregated by age, sex, and other diversity considerations, as contextually appropriate and possible, for purposes of analysis and programming.”²⁴ Safety audits should collect AGD data, when possible and safe to do so, to enable AGD-sensitive programming.

- **Participant selection and/or groupings:** The process and considerations to select participants will vary based on the data collection tool that used. Generally, it is important to consider both PoC and hostcommunity/neighbourhood individuals when selecting participants to interview for the Safety Audit. Seek the views of diverse groups of PoC, including individuals of at-risk and vulnerable groups, as per the AGD approach.²⁵ There may be individuals with specific needs (e.g., pregnant women, single parents, persons with disabilities/reduced mobility) that require assertive outreach to ensure their participation. It is recommended that participants be grouped by the same gender and/or age groups, due to the sensitivity of the topic. For children, similar groupings are recommended based on age (and/or maturity) and/or gender, and should also take into account any special considerations (younger children, children with disabilities, and/or from socially excluded groups).
- **Secure necessary approvals:** Identify key stakeholders and policymakers and seek approval from relevant authorities informing them about the safety audit and that it will probably lead to recommendations.
- **Training and guidance:** If feasible and appropriate, carefully select and train facilitators, enumerators, note-takers, interpreters, and any other that will be involved in data collection. Training on the survivor-centered approach and GBV Guiding Principles²⁶, participatory approaches, and WHO ethical considerations for GBV data collection²⁷ and how to make confidential referrals as part of an assessment exercise is also essential. If assessing children, include training on the Best Interest of the Child Principle²⁸. Members of the assessment team also need to be trained on PSEA, be provided with a list of PSEA focal points, and sign the UNHCR Code of Conduct (or an equivalent one clearly stating zero-tolerance for SEA) and oath of confidentiality. Consider the composition of the data collection team (sex, age, language, etc.). Assess the team for supportive attitudes and values towards marginalized women and girls and GBV survivors²⁹.

Ensure that interpreters/translators are thoroughly briefed and trained together with the teams ahead of time. GBV expert or Protection Officer should review GBV terminology and definitions together with the team. These terms should be tested for appropriateness and understood in the language(s) spoken by the PoC beforehand whenever possible, as the standard practice. It is important that interpreters translate sentence by sentence, rather than summarizing what people of concern have said, and understand the confidential nature of the discussion³⁰.

²⁴ UNHCR, Policy on Age, Gender and Diversity 2018, pp.10, available from <https://www.unhcr.org/5aa13c0c7.pdf>.

²⁵ Supra note 21.

²⁶ GBV AOR, Inter-agency minimum standards for GBV in emergencies programming, 2019, available from <https://www.unfpa.org/minimum-standards>. See Standard 1 (Guiding Principles).

²⁷ WHO, Ethical and safety recommendations for researching, documenting and monitoring sexual violence in emergencies, 2007, available from https://www.who.int/gender/documents/OMS_Ethics&Safety10Aug07.pdf.

²⁸ UNHCR, Guidelines on Assessing and Determining the Best Interests of the Child, 2018, <https://www.refworld.org/pdfid/5c18d7254.pdf>.

²⁹ A survivor-centered attitude scale can be used, see the one available in the IASC, Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming, 2019, available from <https://gbvresponders.org/response/gbv-case-management/#InteragencyGender-basedViolenceCaseManagementGuidelines>.

³⁰ UNHCR, The UNHCR Tool for Participatory Assessments in Operations, 2006, pp. 32, available from <https://www.local2global.info/wp-content/uploads/UNHCR-Tool-for-Participatory-Assessment.pdf>.

- Prepare additional (human, financial, technical) resources: Depending on the tool(s) selected, here are additional actions to take when appropriate and needed.
 - Conduct a pre-audit brainstorming session (see the tool in Section II) to go over themes and clarify definitions of intended topics of discussion, e.g., sexual and gender-based violence, harassment, “What does ‘being safe’ mean?”, etc. This session can be done during outreach, as part of the FGD, or as deemed appropriate.
 - Arrange to provide other support to participants if possible, e.g., transportation, childcare, etc.
 - Decide together with the community on a safe location to hold the assessment.
 - Anticipate what participants may need during the safety audit considering that data collection may take a couple of hours.
 - If working with children or other specific populations, prepare visual aids (as appropriate) to explain consent³¹.
 - It may be useful to track and record the progress of the safety audit process itself, from start to finish. Include lessons about successes, challenges, timeline, and feedback.

Step 3: Plan the Data Collection Exercise

The data collection plan is one component of the overall SA plan. It should include the roles and responsibilities of everyone involved, the expected timeline for each phase of the assessment, and details about participants and locations to be assessed. Include plans for pre-testing/piloting to avoid doing harm.

Ensure a protocol for safe data collection and storage is established, as well as for information analysis and sharing, and dissemination of results. Information can be collected using mobile tablets with KoBo-designed forms for the tools or on paper, as feasible and appropriate in the context.

Step 4: Analyse

If the tools are used with a large number of respondents, the GBV specialist will need to establish means by which to analyse the findings. This may require using a data analysis expert and specific software for this purpose. Information gathered through the tools is analysed to generate evidence that enables early identification of protection risks and the design of more effective protection responses. In the case of the safety audit, the evidence helps to support making a decision on the design and/or implementation of effective GBV programming that is responsive to the needs of PoC in the context.

After the audit, ideally within a few days, consider holding small meetings where people can analyse the information, agree on the interpretation of the findings, and formulate appropriate recommendations³². This should not be limited to those who participated. The recommendations should reflect the views, perceptions and experiences of people who participated and be realistic in the operational context.

Step 5: Share the Findings

When information has been consolidated and analysed, and the safety audit completed, a meeting should be held to discuss follow-up and dissemination of the findings of the safety audit and associated recommendations. Decisions about dissemination should be guided by the purposes and audiences that were defined at the outset.

Share a list of priorities and recommendations with the audience/end-users that were identified at the beginning of the process. This may include UNHCR senior management, partners, stakeholders from targeted sectors, communities of concern, government/police, and decision-makers. Different products (in different formats and with different content/level of detail) may be needed for different audiences. Support the development of an action plan with targeted sectors for the implementation of the recommendations. The first audit can be used as a baseline. Consider repeating periodically to measure evolution over time.

³¹ Informed assent is the expressed willingness of the child to participate in services. See UNICEF, Guidance Note: Adolescent Participation in UNICEF Monitoring and Evaluation, 2019, available from https://www.unicef.org/pacificislands/IRC_CCSSGuide_FullGuide_lowres.pdf.

³² For more information on joint analysis, see UNHCR, Needs Assessment Handbook, 2017, found at <http://needsassessment.unhcr.org/>.

Additional Resources & Guidance

Key References

GBV AOR, Inter-agency minimum standards for GBV in emergencies programming, 2019, available from <https://www.unfpa.org/minimum-standards>.

Inter-Agency Standing Committee's (IASC) GBV Guidelines, 2015, available from https://gbvguidelines.org/wp/wp-content/uploads/2015/09/2015-IASC-Gender-based-Violence-Guidelines_lo-res.pdf.

IASC Guidelines for Integrating GBV Interventions in Humanitarian Action, 2015, available from https://gbvguidelines.org/wp/wp-content/uploads/2015/09/2015-IASC-Gender-based-Violence-Guidelines_lo-res.pdf.

IASC, Strategy: Protection from and response to Sexual Exploitation and Abuse and Sexual Harassment, 2018, available from <https://psea.interagencystandingcommittee.org/iasc-strategy>.

IRC, Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming, 2019, <https://gbvresponders.org/response/gbv-case-management/#InteragencyGender-basedViolenceCaseManagementGuidelines>.

U.N.G.A. resolution 46/182, 1991, <https://undocs.org/A/RES/46/182>.

U.N.G.A. resolution 58/114, 2004, <https://undocs.org/A/RES/58/114>.

UNHCR, Needs Assessment Handbook, 2017, available from <http://needsassessment.unhcr.org/>.

UNHCR, Policy on the Prevention of, Risk Mitigation, and Response to Gender-Based Violence (GBV), October 2020, UNHCR/HCP/2020/01, available from <https://www.unhcr.org/5fa018914/unhcr-policy-prevention-risk-mitigation-response-gender-based-violence>.

UNHCR, Policy on Age, Gender and Diversity 2018, available from <https://www.unhcr.org/5aa13c0c7.pdf>.

UNHCR Guidelines on Assessing and Determining the Best Interests of the Child, 2018, available from <https://www.refworld.org/pdfid/5c18d7254.pdf>.

UNHCR, The UNHCR Tool for Participatory Assessments in Operations, 2006 <https://www.local2global.info/wp-content/uploads/UNHCR-Tool-for-Participatory-Assessment.pdf>.

UNHCR, A Community-Based Approach in UNHCR Operations, 2008, available from <http://www.unhcr.org/47f0a6712.pdf>.

UNICEF, Guidance Note: Adolescent Participation in UNICEF Monitoring and Evaluation, 2019, available from https://www.unicef.org/pacificislands/IRC_CCSGuide_FullGuide_lowres.pdf.

WHO, Psychological first aid: Guide for field workers, 2011, available from https://www.who.int/mental_health/publications/guide_field_workers/en/
UNICEF, https://www.unicef.org/pacificislands/IRC_CCSGuide_FullGuide_lowres.pdf.

WHO, Ethical and safety recommendations for researching, documenting and monitoring sexual violence in emergencies, 2007, available from https://www.who.int/gender/documents/OMS_Ethics&Safety10Aug07.pdf.

Safety Audit Resources

This review identifies good examples in conducting safety audits to mitigate the risk of GBV in sector programming. Included is a list of Safety Audit tools and guidance.

UNICEF, GBVAOR Helpdesk, Mapping Of Safety Audit Tools And Reports, 2019, available from <https://gbvguidelines.org/wp/wp-content/uploads/2019/12/Safety-Audit-Report-GBV-AOR-Helpdesk-FINAL-20092019.pdf>.

COVID-19 Resources for GBV

The COVID-19 global pandemic has caused significant changes in the operational contexts in which humanitarian activities are conducted, including safety audits. In addition to creating new safety and security concerns, government measures and inherent health risks have limited traditional approaches to primary data collection. The resources below may be used when planning a safety audit in the context of COVID, as well as in other contexts with restricted access to PoC.

Interagency Standing Committee, Identifying & Mitigating Gender-based Violence Risks within the COVID-19 Response, 6 April 2020, <https://gbvguidelines.org/wp/wp-content/uploads/2020/04/Interagency-GBV-risk-mitigation-and-Covid-tipsheet.pdf>.

UNFPA GBV AOR, Tools and Resources for Thematic Areas, 2020, https://gbvaor.net/thematic-areas?term_node_tid_depth_1%5B121%5D=121.

Alliance for Child Protection in Humanitarian Action, Technical Note: Protection of Children during the Coronavirus Pandemic (V.2), 2020 <https://alliancecpha.org/en/COVID19>.

GBVIMS Global Team, GBVIMS releases remote GBV Case Management video and podcast series to support the COVID-19 response, 2020 <https://gbvguidelines.org/en/gbvims-releases-remote-gbv-case-management-video-and-podcast-series-to-support-the-covid-19-response/>.

* UNHCR staff can consult the [Intranet](#) for all operational guidance created in response to COVID-19.

Resources on Terminology

IOM/UNHCR, LBGTI Glossary, 2017, available from https://communities.unhcr.org/content/usergenerated/asi/cloud/attachments/sites/CommunityBasedProtection/en/areas1/jcr:content/content/primary/library/persons_with_specifi-XGuY/lgbti_persons-UI7e/unhcr_lgbti_training-dVBT/training_aides-tYbc/lgbti_glossary_sept2-zXDdu/LGBTI%20Glossary_Sept2017.pdf.

UNHCR, Need to Know Guidance: Working with Persons with Disabilities in Forced Displacement, 2019, available from <https://www.refworld.org/docid/5ce271164.html>.

UN, Convention on the Rights of Persons with Disabilities (CRPD), 2006, available from <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>.

PART II: SAFETY AUDIT TOOLS

Tools

The tools are designed to support the safety audit process and data collection methods on safety around GBV risks. The methods are commonly used in safety audits and have been adapted to UNHCR standards. Each is briefly explained below with additional instructions found in the tools. The tools should be tailored to the local context.

1. Decision trees (1 & 2)
2. Pre-audit checklist
3. Brainstorming exercise
4. Checklist tool/Observation approach
 - a. Safety walk
 - b. Mapping tool
5. Focus Group Discussion (FGD) – Question bank and template tool
6. Key Informant Interview (KIIs) – Question bank and template tool
7. Individual Questionnaire – Question bank and template tool

1. Decision trees

The Decision Trees were developed to guide operations and partners to make an informed and responsible choice about what data collection tool(s) to use, depending on their purpose, capacities, information needs and context. They provide the GBV specialist with a two-fold approach to determine (1) whether the context in which they operate is appropriate and secure for conducting a safety audit (Decision tree #1), and (2) which data collection tool(s) is/are most appropriate for meeting their information needs (Decision tree #2). The protection, security, or political context may require different methodological approaches for different population groups and/or settings, including within the same area or country Operation. When possible, using the same tools and methodologies for subsequent assessments allow you to monitor changes in your environment and adjust programming accordingly.

2. Pre-audit checklist

A set of safety and ethical recommendations has been adapted into a checklist³³ to provide the user with the minimum measures that need to be in place before the safety audit begins. This is meant to complement and add to operational guidelines and should not be viewed as an all-inclusive guide.

3. Brainstorming exercise

This tool³⁴ may be applied with different groups to introduce the topic of 'safety' before or during the safety audit. It provides a starting point to draw out what the individuals in the group perceive as their safety concerns and which they prioritize. The brainstorming session helps to draw out perceptions and situations around safety and to clarify the terminology that will be used during the assessment, which can also help with tailoring tools for data collection.

4. Checklist/observation approach

This tool provides a checklist of external factors to observe in a particular location that contribute to increasing the risk of gender-based violence. The tool can be used to complement or triangulate the information collected through Focus Group Discussions, or as a stand-alone tool. The checklist can also be used by staff directly or with PoC during the Safety Walk or Mapping exercise.

³³ Adapted from the WHO Ethical and Safety Recommendations for Researching, Documenting and Monitoring Sexual Violence in Emergencies, 2007, available from https://www.who.int/gender/documents/OMS_Ethics&Safety10Aug07.pdf.

³⁴ Adapted from *Making Cities and Urban Spaces Safe for Women and Girls: Safety Audit Participatory Toolkit*, ActionAid (2013)

<https://resourcecentre.savethechildren.net/library/making-cities-and-urban-spaces-safe-women-and-girls-safety-audit-participatory-toolkit>.

The safety audit team and/or sector lead/partner can observe the factors in the checklist while walking around the site/community. They can write down comments while they are making observations or wait until they are in a private location to jot down their notes. If appropriate and safe to do so, they may also wish to take photos of the area. The Checklist tool by the observation approach may be used when the situation is considered inappropriate or unsafe to have PoC involved.

a. Safety Walk

A group of participants, along with the Safety Audit team, partner organizations and, where appropriate and desirable, government sectors, conduct a walk through an area to identify the factors that make them, or a particular group feel safe/unsafe. The checklist can be provided to PoC to fill out while conducting the walk.

b. Mapping tool

In the mapping tool, participants are asked to draw or mark the areas where they or a particular group feel safe/unsafe. The checklist can be used as a guide of factors that participants can discuss as they draw the map. This tool may be used as a precursor or part of an FGD.

5. Focus Group Discussion (FGD) – Question bank and template tool

FGDs are organized and structured conversations with a group of individuals (between 8-10) representing a specific sub-set of the target population. This method is used to identify safety issues that may have been overlooked, in support of outreach to vulnerable groups among PoC facing heightened protection risks. To support this data collection method, a question bank and template tool with guidance are provided. The tool should be adapted for relevance to the operational context and information needs.

6. Key Informant Interview (KIIs) – Question bank and template tool

A KII is a questionnaire-based interview with a key informant. A key informant (KI) is a person who can provide information or opinions on risks of GBV regarding a particular population based on her/his position of responsibility/authority and/or with regards to their experience and knowledge of GBV. The KII method provides an opportunity to introduce the safety audit to KIs and to gain more in-depth information about the situation from their perspectives in terms of the problems and potential solutions around GBV risks for PoC to UNHCR. To support this data collection method, a question bank and template tool with guidance has been provided. The tool should be adapted for relevance to the operational context and information needs.

7. Individual Questionnaire – Question bank and template tool

The individual questionnaire method is used to understand the extent to which PoC worry about their safety and if there are any differences within the population, how it may vary due to physical and social factors (e.g., gender, age, religion, ethnicity, geographic location, etc.), and how it may be compounded by other vulnerabilities. To support this data collection method, a question bank with response options and guidance is provided. The tool should be adapted for relevance to the operational context and information needs.

DECISION TREES

How to use the decision tree diagrams

The following decision trees are developed to support operations and partners to make informed and responsible choices about the Safety Audit (SA) process, and the data collection methods and tools that best fit their purpose, needs, capacities, and context. These diagrams should be read in conjunction with the UNHCR GBV Policy (2020)¹ and the Safety Audit Toolkit.

The Safety Audit can be conducted by teams from any sector as a method for informing their programming, but due to the potentially sensitive nature of data being collected and a GBV specialist or qualified and experienced Protection staff² should be consulted as part of the planning process. The diagrams provide you with a two-fold approach to assess (a) whether the context in which you operate is appropriate and secure for conducting a safety audit (decision tree #1), and (b) which data collection tool(s) is/are most appropriate for meeting your information needs (decision tree #2). The factors defined in decision tree #1 for each setting (urban, rural, camp) have been identified as common in these settings, but not necessarily present in every setting. Urban, rural, and camp settings are highly diverse; they can blend into each other, and PoC may move between settings in their daily lives.

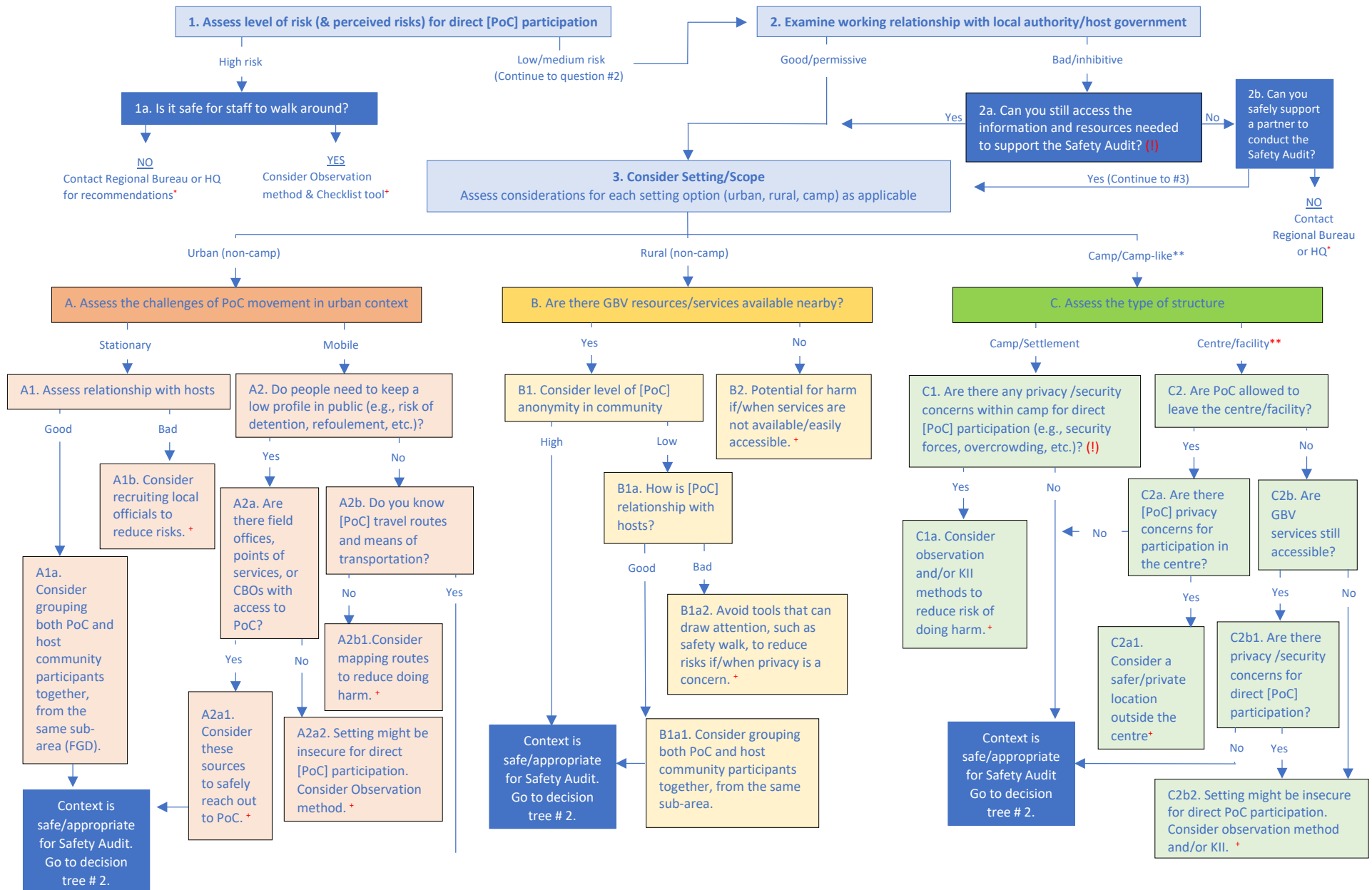
Use the decision trees as a flexible tool to guide your decision-making when planning the safety audit—recognizing that there is no single tool or method appropriate for use in all humanitarian contexts. Before planning takes place, the GBV specialist should first understand the context. The first decision tree is a diagram to guide you through some key questions on how to proceed without doing harm and to assess which factors should influence the choice of tools/methods in an individual setting, based on your response/assessment to a series of questions about local safety, physical access, availability of services, etc. Depending on your context, you may need to trace the path in the diagram for more than one setting (i.e., urban, rural, and/or camp). Once your purpose is clear and your information needs defined, then the second decision tree is designed to help you to choose or discard a specific data collection tool and method based on your information need and resources. This is only one step in the design of your system and strategy.

Remember that protection, security, or political context may require a different methodological approach for different population groups and/or settings, including within the same area or country operation. The appropriateness of the methods and tools that are used to collect data will also depend on a range of factors that are not defined here, including programmatic and/or budgetary constraints.

¹ UNHCR, Policy on the Prevention of, Risk Mitigation, and Response to Gender-Based Violence (GBV), 2020, UNHCR/HCP/2020/01, available from <https://www.unhcr.org/5fa018914/unhcr-policy-prevention-risk-mitigation-response-gender-based-violence>.

² This is inclusive of multifunctional teams. It is recommended that Protection staff will have taken the 3 levels of e-learning and have completed the GBV Training of Trainers Learning Programme. If expertise is not available within the Operation, support should be sought from the respective Bureau.

Decision tree #1 – Context/Security



Additional considerations

* If Regional Bureau/GBV focal point is unavailable, contact HQ DIP GBV Unit [hqgbv@unhcr.org].

** **Camp/Camp-like**, e.g., reception centre, shelters, detention facility, can be located in urban or rural areas, but are grouped with camps due to their design system and structural limitations. However, consider the setting outside such facilities (urban or rural) as appropriate.

1a. The safety of staff, partners, and/or volunteers should also be ensured. If needed, staff should make mental notes during the walk and wait to record the information later, once in a safe location. If appropriate, KIIs with non-PoC may also be an additional option.

2a. (!) If appropriate, organize a discussion with relevant authorities so they understand the purpose and process of the assessment and provide any necessary permits or approvals. If involving the host government to participate in the safety audit, consider that PoC might be hesitant to share concerns with the host government. Review any mandatory reporting requirements and/or information sharing with government officials. This assessment is especially important in internal displacement conflict settings in which government forces are a party to the conflict.

A1b. Involving local officials can help ease tensions and the safety audit can be used as a means of improving safety and social cohesion between hosts and PoC. Also consider the technical expertise and resources of the GBV working group, GBV sub-cluster, other GBV coordination mechanisms, etc. for assistance with the planning and implementation process

A2a1. Consider the use of KIIs for data collection and as a way to identify other sources of information (snowball approach).

A2a2. If you are unable to safely reach out to PoC directly and you do have access to any sources for KIIs, then use only the observation method.

A2b1. Mapping routes and means of transportation can provide points of contact for data collection.

B1a2. The lack of anonymity in rural areas may increase risks for PoC if/when there are tensions with the host community. If confidentiality cannot be guaranteed for participants, then consider only the observation method and/or KIIs to reduce risks.

B2. It is not recommended to include PoC when conducting KIIs if GBV services are not available/accessible in the vicinity.

C1. (!) Also consider physical movement limitations within camps, such as gender dynamics and/or cultural restrictions that may affect the movement of women and girls differently than that of men and boys. This can also refer to curfews for PoC and/or staff (restricted hours for humanitarians to access/leave camps). Some methods such as questionnaires or safety walks may exclude PoC with restricted movement and/or limited mobility if/when careful considerations are not made.

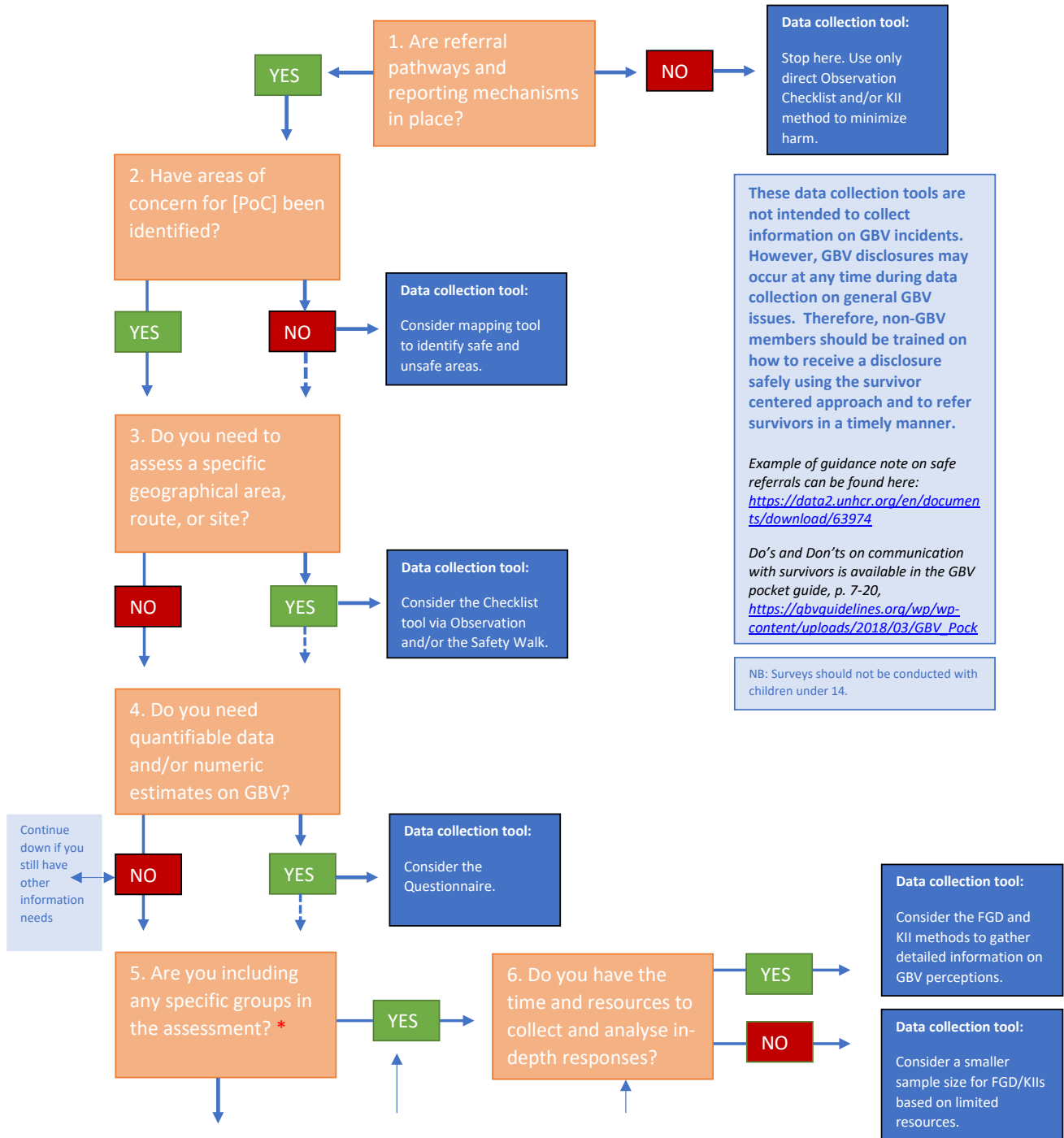
C1a. If risks cannot be minimized for a direct PoC participation, this could potentially cause harm. Consider observation and/or KII approaches to minimize harm to PoC.

C2a1. If privacy cannot be ensured inside the centre, consider finding a space outside the centre/facility to conduct interviews/group discussions with PoC.

C2b2. Consider the goal(s) of conducting a safety audit in this setting, e.g., closed/detention centre versus the risks of data collection. Explain what the team can and cannot do for PoC, in order not to create false hopes or unrealistic expectations. Additional precautions should be implemented when assessing a detention centre. For more information, see Monitoring and Immigration Detention Practical Manual (2014) at https://www.aptr.ch/content/files_res/monitoring-immigration-detention_practical-manual.pdf.

Decision tree #2 - Choosing a data collection tool, based on information needs and resources (GBV protection risks, needs and capacities)

Start at question 1 (orange box). The **solid blue arrows** indicate the need to continue down the path, while the **dotted blue arrows** suggest continuing only if more information is needed and indicate that more than 1 tool may be used. See additional considerations below.



Additional considerations

1. Basic care and support for survivors must be available locally before commencing any activity that may involve individuals disclosing information about their experiences of GBV or lead them to disclose such information (even without deliberate prompting or request).
 - **Data collection tool: Checklist via observation method** – This should be conducted by staff/partners to minimize the risk of disclosure. Conducting KIIs using the Safety Audit question bank and template tool with non-PoC may be another safe option if/when referral pathways are not in place.
2. The ‘areas of concern’ refers to specific locations, streets, etc. that are habitually frequented by PoC.
 - **Data collection tool: Mapping exercise** – This can be used as part of an FGD or as a stand-alone exercise. It can be also used together with the community to decide which areas to assess. This exercise is recommended when conducting assessments with children.
3. After the ‘areas of concern’ have been identified (whether before the Safety Audit or with the mapping tool), you may need to further assess the external factors in this specific location.
 - **Data collection tool: Observation/Safety walk**- If safe to proceed, consider a safety walk with PoC and/or stakeholders to identify issues such as infrastructure, design, access, and other factors that may make individuals feel unsafe. Additionally, you can use the observational checklist in place of or in addition to the Safety Walk.
4. Aggregate data, often useful for advocacy purposes and with donor reports, can provide e.g., numeric estimates of GBV-related variables and quantify trends.
 - **Data collection tool: Questionnaire**- This tends to provide more quantifiable data that is easier to analyse. Ensure enumerators are trained on survivor-centered approach and disclosure sensitivity and referral pathways. See Safety Audit Toolkit/specific tool for additional guidance to ensure data protection principles are applied. A GBV expert or Protection officer should be nearby for additional help.
5. * In adherence to the ‘Do No Harm’ principle, survivors of GBV should NOT be actively targeted or identified for the purposes of the safety audit as this can put survivors and staff at risk.
- a & b) Data collection for the safety audit should include the most vulnerable and hard-to-reach populations when possible. Assertive outreach is recommended, whether through partners, local leaders, and/or local officials as appropriate. Remote KII is another option.
6. Qualitative approaches refer to discussion-based methods that allow for open-ended and detailed responses and are a key component of the safety audit for capturing perceptions and insight on safety around GBV risks.
 - **Data collection tool: Focus Group Discussions and/or Key Informant Interview**- Consider using these methods for data collection when possible even if the sample size is small.

PRE-AUDIT CHECKLIST¹

When planning the safety audit, the team responsible for conducting the safety audit should ensure that the following minimum measures are in place. This is not all-inclusive, but rather meant to complement or add to operational standards and guidelines. If clarification on any point is needed, consult a GBV specialist prior to beginning data collection.

Are the potential benefits arising from the safety audit clearly outlined, and do they outweigh the potential risks of participation to respondents and/or their families and communities?

Is there a data security plan for a safe collection, storage, and sharing of data, and for the dissemination of safety audit results/findings?

Is there a functioning referral system in place that includes multi-sectoral services (health, psychosocial, legal and security) for GBV survivors?

Is there a security plan in place to ensure the safety of all those involved in the safety audit, including participants, staff, partners, communities?

Are measures in place to protect the confidentiality of individuals who provide information about gender violence?

Are questions carefully vetted to ensure (a) personal data is not collected, (b) if personal data or identifiable personal data is to be collected, that it is strictly necessary for the intended purpose?

Is a clear protocol in place to ensure that participants are informed about the purpose and process of the safety audit, how their data will be used, how consent can be given, etc.?

Are members of the safety audit team carefully selected and appropriate to the context (age, sex, religion, ethnicity, etc.)?

Have members of the safety audit team received relevant and sufficient specialized training and ongoing support?

Do members of the safety audit team know how to appropriately respond to a possible GBV disclosure?

Are there additional safeguards in place if children (i.e., those under 18 years) are the subject of the safety audit?

Are there additional safeguards in place if PWD (people with disabilities) are the subject of the safety audit?

Have feasible and appropriate mitigation and prevention measures been identified and planned to address the identified risks?

Are there guidelines and mechanisms set up to report a complaint or an incident of sexual exploitation and abuse confidentially?

Has a location for the data collection been identified which provides privacy, security, and confidentiality?

Additional Key Resources:

- WHO, Putting women first: Ethical and safety recommendations for research on domestic violence against women, 2001, available from https://www.who.int/gender-equity-rights/knowledge/who_fch_gwh_01.1/en/.
- WHO, WHO ethical recommendations for interviewing trafficked women, 2003, available from <https://www.who.int/gender-equity-rights/knowledge/9789242595499/en/>.
- UNHCR, The Heightened Risk Identification Tool, 2010, available from <https://www.unhcr.org/4aa76c279.pdf>.

¹ Adapted from the WHO Ethical and Safety Recommendations for Researching, Documenting and Monitoring Sexual Violence in Emergencies, 2007, available from https://www.who.int/gender/documents/OMS_Ethics&Safety10Aug07.pdf.

BRAINSTORMING TOOL

This is an exercise¹ that can be carried out with different groups to introduce the topic of safety and gender-based violence (GBV) before or during data collection (e.g., as part of mapping activity or FGD). It provides a starting point to draw out what the individuals in the group perceive as their safety concerns, and which issues they prioritize as problems.

The threat of GBV and associated fear can be normalized over time that it might be difficult to recall or talk about during the Safety Audit. One strategy is to ask participants to discuss different strategies PoC may adopt to reduce their own risk of becoming a target of GBV by, for example, avoiding certain areas, walking in groups, or incurring the extra costs of a taxi to get home. The brainstorming session can provide space and time before data collection to clarify any terminology² that will be used during the assessment.

Note: This exercise is neither intended nor is it appropriate for collecting information on individual security incidences or personal experiences of gender-based violence (GBV), and/or other types of violence. However, facilitators should be prepared and trained to respond in case an individual wishes to disclose an incident of GBV, or other security issues. If a participant raises a personal issue or incident that is not appropriate for an FGD setting, the facilitators must also be ready to redirect and follow-up with the participant after the FGD, in private and in a safe way.

Recommended resource for facilitators: Psychological first aid: Guide for field workers (2011), www.who.int/mental_health/publications/guide_field_workers/en/.

How to do it: Step by Step Guide

Step 1

Introduce terminology (see additional resources below) and discuss general safety issues that affect individuals within a group. What makes them feel unsafe in their environment? How does fear of violence or threat of violence (physical, emotional/psychological, or sexual) affect their day to day lives and/or those around them? Alternatively, you can initiate with a leading question, such as 'We've received more reports of [type of GBV] in [X] location last year' so we would like to find ways to make it safer for PoC. Would you be willing to share your safety concerns and how you keep safe?' It may also be useful to also discuss basic gender concepts and gender roles.

Structure the discussion around the area/space(s) that you want participants to assess for the Safety Audit: e.g., reception centres, schools, places they receive services, streets, communities, certain routes.

Step 2

Ask participants to think about [three] changes that they have made to their current routine because of fear of violence or threat of violence. If using this tool with literate individuals, ask them to write their experiences on a piece of cardboard or post-it and/or adapt to the specific needs of the PoC.

Step 3

Encourage participants to discuss the issues raised on the pieces of cardboard. How do their experiences vary? Are some groups of PoC [women, girls, men, boys, or LGBTI persons] particularly vulnerable?

Step 4

Discuss with the group whether there is anything that could be done to help ease the fear of GBV or reduce their vulnerability.

¹ Adapted from Action Aid, Making Cities and Urban Spaces Safe for Women and Girls: Safety Audit Participatory Toolkit, 2013, available from <https://resourcecentre.savethechildren.net/library/making-cities-and-urban-spaces-safe-women-and-girls-safety-audit-participatory-toolkit>.

² See the Safety Audit Toolkit Introduction, pp. 5 for notes about terminology.

Terminology Resources:

GBV AoR, Inter-Agency Minimum Standards for GBV in Emergencies Programming, 2019, available from <https://gbvaor.net/gbviems/>.

IASC, Strategy: Protection from and response to Sexual Exploitation and Abuse and Sexual Harassment, 2018, available from <https://psea.interagencystandingcommittee.org/iasc-strategy>.

IOM/UNHCR SOGIESC and Migration Training Package, 2021, available from <https://www.iom.int/2021-sogiesc-and-migration-training-package>.

UN Secretariat on use of gender-inclusive language in several languages—Arabic, Chinese, English, French, Russian, and Spanish, available from <https://www.un.org/en/gender-inclusive-language/>.

UNHCR, Guidelines Assessing and Determining the Best Interests of the Child, 2018, available from <w.refworld.org/docid/5c18d7254.html>.

UNHCR, Policy on the Prevention of, Risk Mitigation, and Response to Gender-Based Violence (GBV), October 2020, UNHCR/HCP/2020/01, available from www.unhcr.org/5fa018914/unhcr-policy-prevention-risk-mitigation-response-gender-based-violence.

SAFETY AUDIT – CHECKLIST TOOL

The checklist tool provides a list of external factors in a particular location that relate to safety and GBV risks. The tool is designed to ensure that conditions in a particular location minimize risks of GBV. It can be used to complement or triangulate information collected through Focus Group Discussions, or as a stand-alone tool. The checklist can also be used by staff directly or with POCs during the Safety Walk or Mapping exercise.

The tool is meant to be flexible, focusing on the factors which can be applied in a range of settings, facilities (e.g., WASH, Shelter), and both indoors/outdoors.

Below are three different methods for applying the checklist:

Observation approach: This approach is mainly an observational method where data is recorded based on what is physically seen by the data collector. The safety audit team and/or sector lead/partner can observe the factors in the checklist while walking around the site/community. They can jot down comments while they are making the observations or wait until they are in a secure location to make their notes. If appropriate and safe to do so, they may also wish to take photos of the area. This approach may be used when the situation is considered inappropriate or unsafe to have persons of concern (PoCs) involved. The observation method may be used as a complement to the safety walk or when the situation is considered inappropriate or unsafe to have PoCs involved.

Safety walk: A group no larger than 6-8 participants, along with the Safety Audit team, partner organizations, and possibly government stakeholders [as appropriate] conduct a walk through an area to identify the factors that make them, or a particular group, feel safe/unsafe. Depending on the number of safety walk participants, you will want to breakdown the group into small teams of 4 or less to prevent drawing unnecessary attention to the activity. The team should plan the route for the safety walk in advance, using the planning questions below to ensure that the route will include locations that will achieve the intended purpose of the safety audit. The area covered by the walk should include areas where the population, you are interested in, spend a significant amount of time or are locations that are necessary to or frequently encountered

during individuals' daily life. This should also include locations or services that are the responsibility of the agency/organization, and the areas that are passed through to access these services. If you will break the safety walk team into smaller groups, divide up the route amongst the different group. It may be useful to undertake the walk at different times of the day (e.g., before and after dark) to be able to note any difference in safety concerns due to factors related to the dark and poorly lit areas. The planned route and time of data collection should always ensure that the safety of the participants are considered and prioritized. This safety walk can be done using the checklist to help record what is observed and/or felt [see below]. The team should debrief afterward to compare notes, agree on the conclusions, and make recommendations (as necessary).

Mapping exercise: Participants are asked to draw up a map or mark the areas on a map where they or a particular group feel safe/unsafe. The facilitator can then go over the list of factors on the checklist for participants to recall and discuss. This tool may be used as a precursor or part of an FGD, particularly if unsafe areas have not been identified, or to gather issues for discussion. For locations where maps are not a commonly used tool, the discussion can be used to develop a visual representation of the surrounding areas, in terms of safety. This visual representation can be focused more on locations, activities, and routes, and concerned less with the accuracy of the location. This information can later be triangulated with a map after the group session.

Planning: Key questions to consider

- What is the purpose/questions?
- For the Safety Walk, will it be safe for POCs to walk through an area?
 - Depending on the security situation in the assessed location there might be safety concerns or challenges for a woman or group of women to go on a walk.
 - Consider the time that the walk is planned for? Will it be safe for participants at that time?
- Who should participate?
 - Remember to consider AGD, as per the 2018 UNHCR AGD Policy, notably the

importance of giving a voice to all members of a community, with particular attention to at-risk groups such as minorities, people with disabilities, and people with diverse sexual orientations and gender identities, as well as under-represented groups such as adolescents, youth and older people [page 10].

- Let the purpose guide your decisions about who to include.
- How many groups/sessions are needed to gather a cross-section of views and generate a comprehensive and accurate understanding of the issues?
- How long should each session/walk last?
 - Remember the value of POCs' time.
 - If walking, proceed at a pace that accommodates participants with physical impairments or mobility issues.
 - Plan for a break time if the audit extends beyond 2 hours (for groups sitting, walking, or standing for extended periods). Offer light refreshments or at least water.
- What setting(s)/locations have been identified as safe locations to host the mapping session?
 - Ensure toilets are available for participants near the location that will not compromise the privacy or safety of the individual or the group due to visibility and access by outside parties while safety audit is ongoing.
- When should the safety walk/mapping session take place? (Remember that POCs may have to travel to reach the location, and that travel should take place during daytime when it is safe to do so, or arrangements made to minimize risks).
 - It is recommended to conduct the safety walk at different times, to capture the reality of the individuals interaction with the context. This could include:
 - Time of the day, especially for assessing outdoor areas. Doing the walk during both hours when it is light and dark, can help you identify issues that might be time related, such as lighting assessment. (When planning, it is important to consider the safety of participants, this should always be prioritized over the data collection.)
 - A week day versus the weekend may also be considered. Discuss the time and day that are most appropriate to the situation/ area being assessed\
 - Time of year or seasons may also play a role in safety).
- How should participants be contacted to attend the walk/session?
- Will participants be compensated in any way, e.g., with travel vouchers, bottles of water, etc.?

Steps for conducting the Safety Walk¹

Step 1) Identify the size and number of areas for assessment (one location versus an entire camp/ community).

Step 2) Identify participants that regularly use the route and/or facilities that are going to be assessed.

Step 3) Brief the team on the purpose of the activity, the route, and/or locations they will be visiting. Provide a map and/or instructions on how the walk will proceed (starting/ending points and times). Ensure contact information and emergency numbers are on hand for each team.

Step 4) Each team should have a leader or facilitator who will lead the process. Also, assign someone to take notes or give each participant their own checklist/notepad.

Step 5) As a group, follow the route identified and ask participants to stop and comment, or write down their thoughts (using the checklist for guidance).

Step 6) If appropriate, take photos of the area. This may be helpful for reporting, providing context to others and for monitoring changes.

Step 7) Immediately after the walk, hold a short meeting to debrief with the team, compare notes, agree on the conclusions, and make recommendations (as necessary).

Some discussion points may include:

- What participants observed during the walk;
- Key safety concerns identified;
- Possible solutions to the problem; and
- Next steps. For example, how will the results be shared? What actions will be taken to follow-up?

¹ Adapted from UNICEF GBViE Assessment Resource Pack and Tools

Steps for conducting the mapping

Step 1) Ask participants to draw a map of the area you wish to audit. You may provide a map of the area you have identified and wish the participants to discuss. Alternatively, for groups where maps might not be a familiar concept, you can ask questions in step 3, and the facilitator can visualize these locations on a flip chart, to create a visualization of safety in different locations, and factors influencing this.

Step 2) Go over the checklist with participants and definitions of 'safety' and GBV terminology with the group (if needed).

Step 3) Ask the group to mark on the map the areas in which they, or a particular group, feel safe/unsafe and why (use checklist). You may use different colour markers to highlight safe vs. unsafe areas. The group may also discuss the times of day or year when they may feel safer/less safe.

See below for a checklist of external factors to observe in a particular location and a sample form template for observations/comments.

Checklist & Template: Suggested list of factors to check

* Note: Not every item on the checklist may apply to the location audited.

Mark the box with Y if the answer is YES and X if the answer is NO. A blank box means the item could not be observed or is not applicable.

Type of activity:

Name of area:

Type of location:

(e.g., city, streets, neighbourhood, shelter, reception centre, etc.)

of participants:

Profile of group participants (if applicable):

(e.g., women, older men, mothers, children, PWD, trans persons, etc.):

Date:

Day and time of activity:

Weather:

- **Lighting²** (indoor and/or outdoor areas)
 1. Is there sufficient lighting [insert area of observation]?
 2. If the area is used at night, is there sufficient lighting on the paths?
 3. Is there sufficient lighting on the streets?
 4. Is there sufficient lighting in public/shared bathroom facilities?
 5. Is there sufficient lighting at bus stops/terminals/train platforms, etc. and the surrounding area?
- **Walkways/movement³**
 6. Are there pedestrian walkways?
 7. Are walkways sufficiently wide to allow people to walk past easily without brushing?
 8. Can people carrying heavy loads easily use the sidewalks?
 9. Is gender-segregated transportation available?
 10. [Observe any pedestrian tunnels/bridges] Are there any streets/vendors/etc. that women or particular groups seem to be avoiding (i.e., crossing the street to move away from a particular area or not going into a place)?
 11. Are there any visible risks in/out of the area (e.g., checkpoints, bars, etc.)?
- **Sightlines/bushes**
 12. Are there clear sightlines to the streets and buildings? [Check for any tall bushes or shrubs that may obstruct sightlines.]
 13. Are there good sightlines in tunnels/bridges?
 14. Are there hiding places?
 15. Would the installation of a ramp, for example, improve sightlines?
 16. Are there escape routes in the event of danger?
 17. Are there places nearby where to get help?
- **General maintenance**
 18. Is the area looked after?
 19. Are there graffiti or run-down buildings?
 20. Are there greenery/parks in the area?
 21. Are the parks well maintained?

² See How Night-Time Street Lighting Affects Refugee Communities (UNHCR, 2017).

³ USAID (2015) Building Safer World: Toolkit for Integrating GBV Prevention and Response into USAID Energy and Infrastructure Projects.

- **Locks/privacy**
 22. Are shared/public bathrooms fitted with working locks?
 23. Are there places for mothers to nurse?
 24. Are people easily watched as they moved around the area?
 25. Can survivor-centered services be accessed discreetly (e.g., reporting a GBV incident to the police, entrance to a clinic for STIs, etc.)? *[Duplicate a separate question for each different service]*
 26. Are bathroom and/or shower doors functional?
- **Overcrowded/Isolated**
 27. Is the area busy?
 28. Is the area isolated or secluded,(as in there are few people around)?
 29. Is it easy to be seen and/or be heard?
- **Diversity of people**
 30. Is the space occupied by a diversity of people (I.e., people from different ages, gender, backgrounds)?
 31. Is there a balance between women and men in the area?
 32. Do women walk alone?
 33. Do women walk in groups?
 34. Are there children with families in the area?
 35. If yes: are they generally in a good mood/do they seem comfortable in the environment?
- **Clear signage**
 36. Is there clear signage so that people know where they are and where they are heading?
 37. Is there signage to call for help/emergencies?
- **Presence of police⁴ /**
 38. Is there a visible security presence in the area (e.g., police, security guards, or other law enforcement)?
 - a) If yes: Are they armed?
 - b) If yes: Do they appear friendly or threatening?
 - c) If yes: Do people in the area seem to be approaching them?
 39. Are there emergency phones to call for help?
 - a) If no: How likely is it that these would be added?
- **Amenities**
 40. Are there benches for people to rest?
 41. Can people bike in the area?
 42. What is the likelihood that such amenities and others would be added to improve safety?

** Note: Not every item on the checklist may apply to the location audited.*

Observations/Comments: In addition to the marking on the checklist, add below any additional comment or observation on each topic.

Lighting

Walkways/movement

⁴ See Mentoring Police Officers to end SGBV tolerance and complicity
http://refugeelawproject.org/files/others/Mentoring_police_officers_to_end_sgbv_tolerance_and_complicity.pdf.

Sightlines/bushes

General maintenance

Locks/Privacy

Overcrowded/Isolated

Diversity of people

Clear signage

Presence of police/law enforcement

Amenities

Other comments/observations:

SAFETY AUDIT – FOCUS GROUP DISCUSSION (FGD)

The general purpose of the FGD is to obtain greater insights and understanding, among persons of concern to UNHCR (PoC), of their perception of safety around GBV risks and identify risk factors in their surroundings, as well as to gauge their opinions on strategies towards enhancing safety and minimizing GBV risks in their communities, including through the provision of services. FGDs may also be used to support outreach to particular groups of PoC with specific needs or those that face heightened protection risks, to help identify safety issues that may have been overlooked.

FGDs can be by staff/practitioners as a way to debrief after mapping or observational exercises or as a standalone method to gather information on new developments. These discussions should highlight the diversity of the experiences of PoC and may help the team to identify additional issues.

Planning: Key questions to consider

- What is the purpose of the Focus Group Discussion? Which questions need to be answered?
- What issues are best explored through FGD? Are FGDs the most appropriate way to explore these issues, i.e., to collect information on these issues? Which other data collection methods might be more appropriate or feasible in the context?
- Who should participate in FGDs?
 - Remember to consider AGD, as per the 2018 *UNHCR AGD Policy*, notably the importance of giving a voice to all members of a community, with particular attention to at-risk groups such as minorities, people with disabilities, and people with diverse sexual orientations and gender identities, as well as under-represented groups such as adolescents, youth and older people [page 10]
 - Let the purpose guide your decisions as to who to include.
- How many FGDs are needed to gather a cross section of views and generate a comprehensive and accurate understanding of the issues?
- How long should each FGD last? (Remember the value of PoC' time. A maximum duration of [1h to 1h30] is usually recommended,

although this may be less for specific groups such as children or the elderly.)

- What setting(s)/location(s) have been identified as safe locations to conduct the FGDs?
- When should the FGD take place? (Remember that PoC may have to travel to the location, and that travel should take place during daytime when it is safe to do so).
- How should participants be contacted to attend the FGDs?
- Will participants be compensated in any way (e.g., with travel vouchers, bottles of water, etc.)?
- What participatory tools (e.g., brainstorming session, safety mapping, etc.) will be used to facilitate discussion?

Selection of questions

The question bank below serves as a guide to assist in filling in any gaps in information regarding safety around GBV risks. They are indicative, not mandatory. Select only the questions deemed necessary to your purpose and appropriate to your context, taking into consideration the time allotment of the session in order for participants to be able to answer all of the questions selected. Also, the questionnaire is not an exhaustive list and additional questions may be included. As always, you should never ask any question that you do not have the ability or intention to use, or that may cause harm to PoC or participants in your context [see below].

Contextualize

It is important that the guidance and questions are reviewed and contextualized for relevance to your purpose and appropriateness in your operational context. Ensure that appropriate terminology, language and cultural dimensions are reflected and respected in the design of the approach. Facilitators should assess the relevance of the questions and determine the level of sensitivity of asking these questions on an individual level, or in consideration of a larger community or PoC subgroup (e.g., women and girls, younger/older refugees or LGBTI persons). Participants need not be asked to speak about their own personal experience, but rather about certain issues regarding safety and answer questions on behalf of their peers (i.e., to serve as informants).

Grouping

Bring together a group of individuals (between 8–10) with similar interests/profiles to explore PoC safety issues. Grouping considerations should ensure an AGD approach¹ and other special needs (e.g., pregnant women, single parent) to understand a diversity of views/experiences and pinpoint the gaps in services from various perspectives. It is recommended that participants be grouped by the same gender in view of the sensitive nature of the topic and the comfort level of speaking in groups with one's own gender – and often, age groups. For children, similar groupings are recommended based on age (and/or maturity) and/or gender and should also take into account any special considerations (younger children, children with disabilities and/or from socially excluded groups). Relevant grouping considerations can include:

- Sex
- Gender identity
- Age group/maturity level
- Level of education (no schooling, primary, secondary, university degree, postgraduate)
- Employment status (unemployed, part-time employment, full-time employment, retired)
- Civil status (partnered, married, divorced/separated, widowed, single)
- Parenthood status (if the person has children or not)
- Health status
- Disability status
- Religion or level of religiosity
- Length of time since arrival to the area/city/country

Decisions about groupings should be informed by a protection assessment to identify the risks of convening groups of persons with specific characteristics. If the risks are too high or if mitigation measures are deemed inadequate or unfeasible, other grouping options should be selected.

Facilitation

Facilitators should be sufficiently prepared to effectively conduct the FGDs. The preparation includes completing specialized training on GBV and child protection, including survivor-centered approach, receiving disclosures and safe referrals, child's best interest principle, and the age, gender, and diversity (AGD) approach. The role of the facilitators is to guide the discussion, ask the participants for

feedback to the specific questions (outlined below), and to record their responses. Divide the roles between the facilitators most appropriately i.e., to ask the questions, to take note of the responses, to keep time, to monitor the FGD for any protection or security issues. Facilitators must be able to actively listen to responses and give appropriate feedback to questions that may arise during discussions about a topic (i.e., what should I do if I want to report a GBV or CP incident? How do we know that information is kept in confidence? Etc.).

Tips for challenging harmful attitudes² – Facilitators should be prepared to identify (within themselves and others) and respond to harmful attitudes that arise during discussion. Examples³ of harmful attitudes and beliefs are:

- 1) Victim blaming: Stating or implying that the victim is at fault for the violence that s/he experienced – *“If a woman is walking alone, it is her fault if she is raped”*.
- 2) Denial: Asserting that something is not true or not a problem – *“That is not an issue”, “I do not know where she got the bruises on her face, she must have fallen”, “There is no problem here – nothing happened”*

It is important as a facilitator not to reinforce negative or harmful statements by letting them go unchallenged. Addressing these moments allows facilitators to model accountability and provides participants with opportunities to learn and change. It is also an opportunity for the purpose of data collection and learning, as negative attitudes can act as barriers to accessing services and improving safety.

After a harmful attitude, belief or behaviour occurs, one positive approach is to have the facilitator clarify the statement or comment and then redirect it back to the other participants to get their opinions. If no alternative opinions are offered by participants, the facilitator should provide one to express how the viewpoint is harmful to women, girls, men, and boys. Support the participant in connecting the view to the purpose of the discussion and the goal of improving safety in the community.

Note that it is very unlikely that the participant will openly change his/her opinion during the discussion. The facilitator should not lecture or shame someone for expressing their views, though it will be necessary to address the harmfulness of GBV. It may also be useful to provide or discuss additional opportunities in the future to learn more about GBV (through an NGO, trainings, safe spaces, etc.).

¹ At a minimum, all data collected by UNHCR will be disaggregated by age and sex and by other diversity considerations, as contextually appropriate and possible, for purposes of analysis and programming.

² Adapted from International Rescue Committee, *Engaging Men Through Accountable Practice Resource Package*, 2013, <http://gbvresponders.org/prevention/emap-tools-resources/>.

³ For additional examples of Common Resistance Reactions, see IRC, *GBV Emergency Preparedness & Response Training – Facilitator Guide*, (2006), <https://gbvresponders.org/wp-content/uploads/2018/04/GBV-Emergency-Preparedness-and-Response-Facilitator-Guide.pdf> (Annex 13).

For additional guidance, refer to these documents:

1. UNHCR, The UNHCR Tool for Participatory Assessments in Operations, 2006, available at www.unhcr.org/450e91c14.pdf.
2. UNHCR, Listen and Listen Participatory Assessment with Children and Adolescents, 2012, available at www.unhcr.org/protection/children/50f6d1259/listen-learn-participatory-assessment-children-adolescents.html.
3. World Health Organization, WHO Ethical and safety recommendations for researching, documenting and monitoring sexual violence in emergencies, 2007, available at www.who.int/gender/documents/OMS_Ethics&Safety10Aug07.pdf.
4. UNHCR/WRC/GRYC, Toolkit For Consulting With Youth, 2015, available at www.unhcr.org/59f986967.
5. UNHCR, UNHCR POLICY ON AGE, GENDER AND DIVERSITY, 2018, available at www.unhcr.org/protection/women/4e7757449/unhcr-age-gender-and-diversity-policy.html.
6. UNHCR, Policy on the Prevention of, Risk Mitigation, and Response to Gender-Based Violence (GBV), 2020, UNHCR/HCP/2020/01, available at www.unhcr.org/5fa018914/unhcr-policy-prevention-risk-mitigation-response-gender-based-violence.
7. UNHCR, Operational Guidance on Accountability to Affected People (AAP), 2020, UNHCR/OG/2020/02, available at www.unhcr.org/aap-operational-guidance.html.
8. Inter-Agency Standing Committee, IASC Plan of Action and Core Principles of Codes of Conduct on Protection from Sexual Abuse and Exploitation in Humanitarian Crisis, 2002, available at <https://interagencystandingcommittee.org/focal-points/documents-public/iasc-plan-action-and-core-principles-codes-conduct-protection-sexual>.

Note: FGDs are not appropriate for collecting information on individual security incidences or personal experiences of gender-based violence (GBV), and/or other types of violence. However, facilitators and interviewers should be prepared and trained to respond in case an individual wishes to disclose an incident of GBV, CP, or other security issues. If a participant raises a personal issue or incident that is not appropriate for an FGD setting, the facilitators must also be ready to redirect and follow-up with him/her after the FGD, in private and in a safe way. Recommended resource for facilitators: Psychological first aid: Guide for field workers (2011). www.who.int/mental_health/publications/guide_field_workers/en/.

Below is a list of possible topics and questions to include in a FGD and a sample FGD template for note-taking.

Outline (Topics for the FGD):

- A. Introductions
- B. General
- C. Perceptions of safety
- D. GBV
- E. Access to services
- F. Strategies
- G. Closing

A. Introductions

Introduce facilitator(s) and the person that will be taking notes, state their roles and organization(s). Suggested text (to be adapted to your purpose and context):

The purpose of today's conversation is to discuss your views and concerns on safety and security issues around risks of sexual violence that affect [PoC group] and to hear your opinions on ways to improve safety in the community.

This discussion will be confidential, which means that your comments and contributions will remain anonymous. We will be taking notes, but we will not record your comments in a way that will identify you or connect you to anything you share today. We will only share what was said in this discussion in a general way. A record of your participation which might identify you will be kept confidential and will be deleted upon completion of this activity [*or analysis depending on your SOPs*]. We ask that all of you keep everything confidential, too. Please do not tell others what was discussed today, not even people who are participating in other groups. This way, we can keep the information and all of us safe. If someone asks what you were doing here today, you can answer in a general way that you were speaking about the health problems of [PoC group].

In this discussion, we are not asking for specific stories; **please do not use any names**. If you wish to talk about a specific issue or personal situation, please do so outside the context of this discussion. We will be providing you with [a contact list] [during/after] the discussion.

Participation in this discussion is completely **voluntary** and you do not have to answer any questions that you do not wish to answer. You may leave at any time.

Finally, there will be **no direct benefits**, such as (list examples if needed), related to the time we spend together today. We very much appreciate your time to help us better understand the situation and plan

for the response [or other purpose]. Our main goal/intention is to listen and learn.

B. General

1. How long have you been living in this area?
2. What does the term 'safety' mean to you?
3. Have you ever received any information on gender-based violence? (*facilitator can include GBV examples and make sure to explain GBV so all participants understand the scope of the conversation*).

C. Perceptions of safety

Public spaces/transport

4. In general, how safe do you think the area is for [PoC group/ at-risk population group]?
5. Are there areas where there is a visible presence of individuals within this group?
6. Do you feel it is safe for individuals from this group to express their [gender identity, nationality, etc.] in public?
7. Are there places where they feel safe?
8. What factors make them feel safe in these places?
9. How do individuals within this group move in/out of this area? (e.g., walking, public/private transport)
10. Is safety a concern while traveling to/from this area?
11. Is distance/cost a factor in ensuring your safety?
12. Do you feel that individuals within this group can safely and comfortably walk alone in this area/city?
13. What are the main types of violence and insecurity that might affect their ability to move about safely in public spaces? *Would the time of the day/year affect this?*
14. Do individuals from this group feel safe using public transportation? What about while waiting at bus stops/terminals?
15. Are there places where they might feel particularly unsafe? *Why are these places unsafe?*
16. Are there any precautions that individuals within in this group will take when they go out? *For example, do they carry something for protection, dress differently, or avoid certain areas/people?*
17. Do you feel that an increased presence of police or law enforcement officers in the area would make individuals within this group feel safer? Why or why not?

Residential/neighbourhood

18. In general, do individuals within this group feel safe in their homes/shelters/where they live?
19. What about in the neighbourhood?
20. Are there safe and inclusive spaces (e.g., religious centres, community centres, parks, etc.) where they can go spend time?
21. Do they seem to belong to any social or community groups (e.g., gender/support/ online groups)?
22. Are there any factors within their home/living situation that you feel would make them feel unsafe (e.g., living with strangers, not enough food, IPV)?

23. Is there interaction with the host community?
24. Do you think they feel safe among host community?
25. If they were to feel threatened or uncomfortable at home/in their neighbourhood, do you think they would do something or tell somebody?
26. Would they feel like they have someone to talk to about these concerns if they wanted to (e.g., family, friends, service provider)?

Reception centre (if applicable)

27. Do you feel that this centre is comfortable and safe for individuals within this group?
28. What about safety when using the shared facilities (bathrooms, dining areas, etc.)?
29. Do you feel that there is privacy for individuals within this group in this centre? (*Check factors such as locks on doors, enough lighting, etc.*)
30. Are there any places they may avoid in or around this centre? Why do they avoid these places?
31. Do you feel there are spaces/activities for individuals within this group to safely connect and spend the time here?
32. Has someone ever warned you or others about anything here that may be unsafe? What was the warning about?
33. In general, do you think that individuals within this group feel comfortable approaching the staff here?
34. Do they know where to file a complaint or provide feedback regarding the facilities and/or staff at the centre?
35. Would you change anything about this centre to help them feel safer or more comfortable?

Children (if applicable) – *These questions can be framed generally for children/youth to answer regarding their peers. It is recommended to pair these questions with the mapping exercise when interviewing children. The questions can also be adapted to ask parents/caregivers about their children.*

36. Do you feel the views and opinions of children are listened to and valued by the adults in their lives (parents/caregivers, family members, educators, etc.)?
37. Are there places where children like to spend time during the day/night?
38. Are there places children avoid or are not allowed to go during the day/night? (*These can be mapped on the map*) Why are these places avoided?
39. Do children go online? What do they do online for? How do they feel when they go online?
40. Are there activities or programmes for children? Where/when do these activities take place? How do these activities make children feel?
41. Do you think school is important for girls? For boys?
42. What do parents/caregivers and/or the community think about school?
43. How do children get to/from school? (*alone/ in group/with parents, walking, bus, etc.*) Check

school hours if it is dark when children travel/from school.

44. Do you feel children can express themselves at school?
45. Do they feel supported by their teachers and peers?
46. Do you think they face challenges in school?
47. Are there any individuals or groups of children that the teachers, staff, or headmaster give greater preference to? For example, are some children listened to more than others? If so, what seems to be the reason(s) for this?
48. Are there any areas at school that children do not like to go to (e.g., clinic, bathrooms, locker rooms, streets outside school, etc.)? Why are these areas not liked?
49. How do children generally feel at school? If someone did not feel comfortable at school, could they tell someone (teacher, staff, etc.)? Would they tell their parents/caregivers?
50. Do you know what bullying is? [Explain]. Does it occur here? How does bullying make you feel? If someone tried to scare, touch, or hurt someone else, what do you think can be done to help that child? Who could they turn to for help?

D. GBV

51. What do you feel are the main GBV risks for an individual [PoC group/at-risk population group]? [Provide examples so participants know what GBV risks are]
52. Are you aware of where to go to get GBV services (health, legal, MHPSS)?
53. Are you aware of where to go/who to contact for GBV emergency services (e.g., PEP, emergency contraception, safe house)?
54. Are these services available 24 hours in your area?
55. Do you know if emergency transportation for a survivor is also available?
56. Are you aware of where to go for information/services on sexual and reproductive health?
57. Do you know if these places offer free contraceptives/condoms?
58. Do these places provide information on sexually transmitted diseases, including HIV/AIDS?
59. Are there any safety concerns or issues of stigma or discrimination around getting information on HIV/AIDS?
60. Is the community aware of these services?
61. Are these services available to all (e.g., person with diverse sexual orientation and gender identity)?
62. Do you feel these services are safe and confidential for [PoC group/at-risk pop group] to use?
63. Do you think there are barriers for the community that would prevent someone from accessing these services? Why? How?
64. If there was an incident involving sexual assault or rape, do you think a survivor would be likely to report it to the police or other authorities? Why/why not? Would they be likely to tell someone

- else (community leader, friend, family, etc.)?
65. Do you feel the services that are available in this area meet the needs of the [PoC group/at risk]? Why or why not?

D.1. Access to resources/services

66. What about other services or basic resources (*can provide examples, water, food, clothes, NFI distribution, general health services*): Are you aware of any other safety concerns or difficulty accessing any of these services? Are there any services that an individual from this [PoC group/at-risk group] would avoid? Which ones? Why?

Employment/Livelihoods

67. How do individuals from [this group] find work?
68. What type of jobs or livelihoods opportunities are available to them?
69. How would they access these jobs or opportunities?
70. Do you feel that individuals from this group have equal access to employment/livelihoods opportunities in this area?
71. Do you feel there are safe options for work available to them? (a 'safe option' is an option that _____)
72. Do you feel they face risks of GBV when trying to find a job or at their place of work?
73. Would they be likely to tell someone or report these concerns? Why/why not?

D.2. Strategies

74. In your opinion, what is the best way to raise awareness about GBV issues in the community and/or to individuals within this group?
75. Which GBV issues should be addressed in awareness raising efforts?
76. What could be done to improve the feeling of safety for individuals within this group in this area?
77. What do you think should be done to prevent/put an end to gender-based violence in this area?

D.3. Closing

The following questions can be asked to wrap-up the discussion:

78. What did you think about the subjects we have discussed?
79. Do you think that we covered issues that are important to the community?
80. Do you think that we covered issues that are important to [PoC group/at-risk group]?

Close the interview: Thanks again for your time. If anyone would like to speak with me in private, I will stay here after we end.

[Also explain how you will assess/share the findings with the community and/or with the FGD participants directly.]

Sample FGD note taking template

FGD reference #: [redacted]

Names of Facilitators & Organization(s): [redacted]

Location of FGD: [redacted]

Date of FGD: [redacted]

Time/Duration of FGD: [redacted]

Group profile: [redacted]

Area being assessed: [redacted]

Number of participants (include age and sex and other AGD disaggregation as relevant):
[redacted]

Consent/Assent Obtained

Select 1-2 key questions from each of the themes above, or alternatively select only 1-2 key themes to focus on as deemed appropriate for this session of the FGD. A total of 8-10 key questions, in addition to general questions at the beginning and on closing should take about 1-1.5 hour. It is recommended to take detailed notes during the session, rather than summaries or interpretations, so that they can later be systematized and analysed.

Introduction:

Notes/observations:

[redacted]

Key Q1:

[redacted]

A1:

[redacted]

Key Q2:

[redacted]

A2:

[redacted]

Key Q3:



A3:



Key Q4:



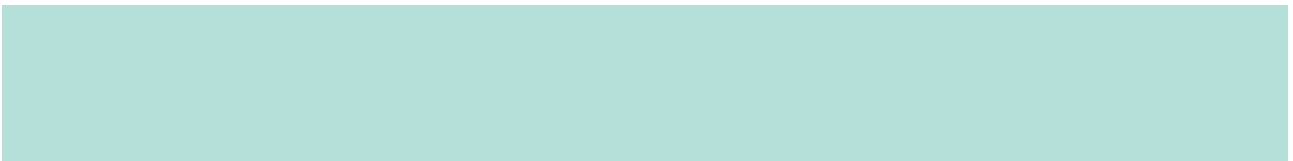
A4:



Key Q5:



A5:



Key Q6:



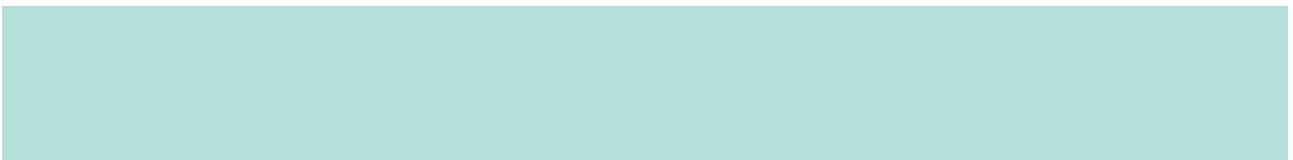
A6:



Key Q7:



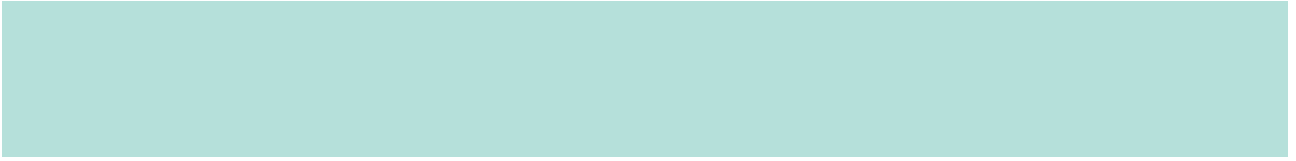
A7:



Key Q8:



A8:



Key Q9:



A9:



Key Q10:



A10:



Closing Questions/Observations:



SAFETY AUDIT – KEY INFORMANT INTERVIEW

KII is a questionnaire-based interview with a key informant. A key informant (KI) is a person who can provide information or opinions on GBV in respect of a particular population based on her/his position of responsibility/authority and/or with regards to their experience and knowledge on GBV. The KII provides an opportunity to introduce the safety audit to key informants and to gain more in-depth knowledge about the situation from their perspectives in terms of the problems and potential solutions around GBV risks for persons of concern to UNHCR (PoC) and host communities (as appropriate).

Selecting the KI

The first step is to decide which individuals it would be useful to meet and interview and who is best placed to undertake the interview. The interviews will usually be one-to-one and can be conducted with service providers, sector coordinators, PoC, community leaders, experts, and government officials. Due consideration must be made for the representativity of the KIs (e.g., in terms of gender, roles and positions in the community), as well as issues related to bias and reliability.

Conducting the KII

Provide an introduction and obtain informed consent

- Interviewers introduce themselves. The interviewer should maintain a professional demeanour and appropriate tone throughout.
- Explain the purpose of the interview (i.e., type of information you are seeking and the purpose it will be used for; also indicate if the information will be shared and with who).
- Manage expectations about the action that will follow, e.g., clarify whether there are any sources of funding to address the issues that arise during the interview or the overall findings.
- Clarify that you are not collecting information on the number of GBV incidents or on specific incidents.

Obtain consent for participating in the KII and ask participants if they have any questions about the interview process (should consent be obtained). Additional consent is also necessary if a participant is to be quoted/cited as a key informant (e.g., reports, publication, etc.).

Sample questions

The questions below are provided as guidance and can be used as a basis for key informant interviews. Additional questions/responses can also be taken from the FGD/survey and added to the KII questionnaire as appropriate. It is not necessary to ask all the questions listed. These should be selected based on prioritized information needs. There may also be additional questions that might be relevant to the specific person that you are interviewing or your contextual information needs. In all cases, you should never ask more questions than you have the ability or intention to use, in order to avoid creating unnecessary burdens on interviewees or causing potential harm.

General questions for all interviewees

Some general questions on the safety of PoC in a particular setting can be asked at the start of all interviews to generate an understanding of the key issues. Such general questions may include:

1. How do you define 'safety'?
2. How do you think GBV risks impact safety?
3. In general, how safe do you think the area/city is for refugees? For [at-risk population group]?
4. What factors make it safe/unsafe for them?
5. Are there specific areas where they feel unsafe or uncomfortable, or that they avoid?
6. What impact does this have on [this group]?
7. Are you aware of any safety concerns around GBV risks among individuals of [this group]?
8. What are the main GBV risks for [this group]?
9. How did you hear about GBV risks and concerns (e.g., directly from PoC, complaint box, word of mouth, etc.)?
10. How do you see your role/the organization's role in the safety of [this group]?
11. How are you involved in promoting safety for [this group]?
12. What do you see as the main challenges to improving safety around GBV risks for [this group] in [this area]?

In addition to general questions, other questions about **GBV services** may be asked. *These questions aim to ensure that all key allies and duty bearers are aware of how to access GBV services in the area and to gain their perspectives on the relevance of these services for PoC.*

13. Do you know where to go to get GBV services (health, legal, MHPSS)?
14. Do you know where to go/who to contact for GBV emergency services (e.g., PEP, emergency contraception, safe house)?
15. Are these GBV emergency services available 24 hours?
16. Do you know if emergency transportation for a survivor is available?
17. Do you know where to go for information/services on sexual and reproductive health?
18. Do you know if these places offer free contraceptives/condoms?
19. Do they provide information on sexually transmitted diseases, including HIV/AIDS?
20. Are there any safety concerns or issues of stigma or discrimination around getting information on STDs/STIs?
21. Is the community aware of these services (specify based on context)?
22. Are these services (specify based on context) available to all (e.g., person with diverse sexual orientation and gender identity)?
23. Do you feel these services (specify based on context) are safe and confidential for [refugees] to use?
24. What are the barriers that would prevent someone from accessing these services? If there was an incident involving sexual assault or rape, do you think a survivor would likely report it to the police/authorities? Why/why not? Would they tell someone else (community leader, friend, family, etc.)?
25. What is your role (or your organization's role) in sharing information on GBV services with PoC?
26. What else could be done to ensure information on GBV services is made available to the community and accessible to all (e.g., using formats and channels that are adapted to different literacy levels, disability status, etc.)?
27. Do you feel the GBV services that are available [in this area] meet the needs of the community? Why or why not?

Sample KII form template

Name of Interviewer:

Name of Interviewer's organization:

Name of Interviewee:

Organization of Interviewee:

Position of Interviewee:

Date of interview:

Location of interview:

Consent for participation in interview obtained

Consent to be mentioned/quoted in reports/publication (if applicable)

Select from the questions above and/or from the FGD question bank. The interviewer may also add questions relevant to the specific role of the person being interviewed. Although there is room for 10 questions and answers, your specific interview form may be shorter or longer, depending on your purpose.

Note that although the template is built to accommodate narrative text, you are encouraged to systematize the answers to standard categories in order to facilitate analysis. For example, most of the questions above can be answered with pre-set answer options.

Introduction:

Notes/observations:

Key Q1:

A1:

Key Q2:

A2:

Key Q3:



A3:



Key Q4:



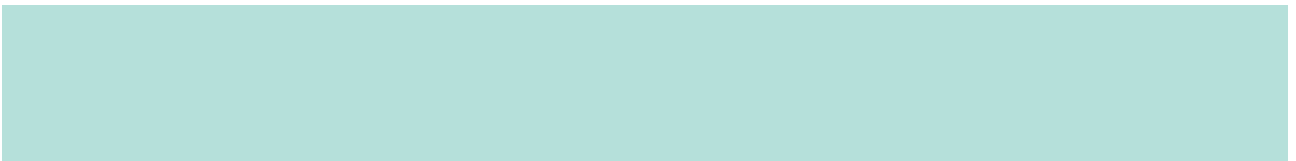
A4:



Key Q5:



A5:



Key Q6:



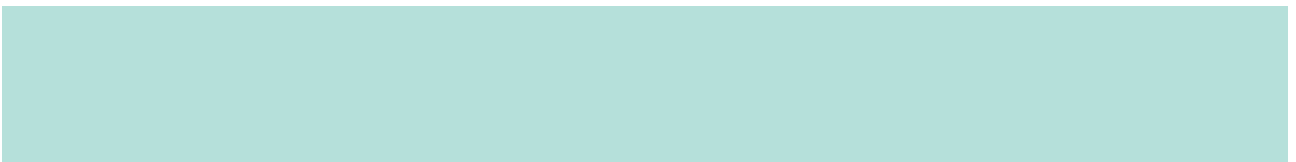
A6:



Key Q7:



A7:



Key Q8:



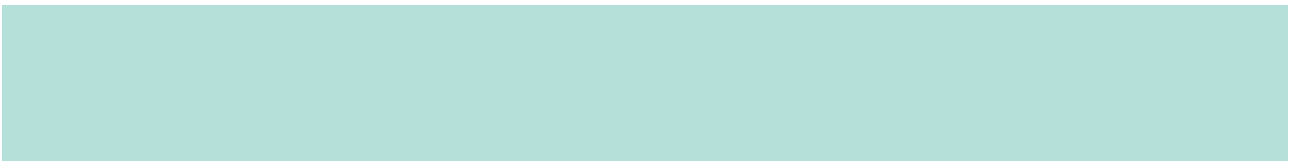
A8:



Key Q9:



A9:



Key Q10:

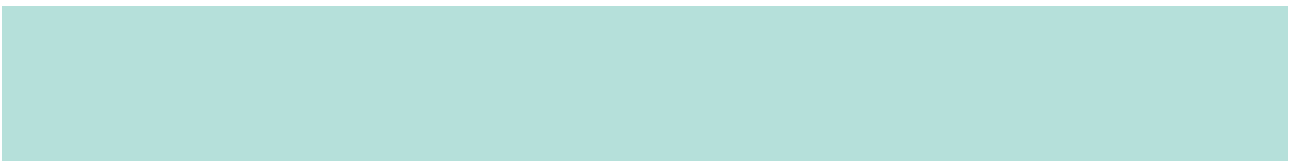


A10:



Closing remarks

Notes/observations:



SAFETY AUDIT QUESTIONNAIRE

The aim behind the following questions is to understand how persons of concern to UNHCR (PoC) feel about their safety; determine if there are any differences between PoC and the general population; understand how differences may be due to physical and social factors; and determine how their situation may be compounded with other personal risks/vulnerabilities.

The Safety Audit questionnaire below includes a question bank and possible response options. They are indicative, not mandatory. They should be adjusted for different locations: streets/neighbourhoods, PoC community, reception centres, or other areas with PoCs. Ensuring a safe space to conduct the questionnaire should be the priority.

Review the questions and response options and reword or delete them as appropriate to your context, your purpose, and your prioritized information needs. Standard menus should be used to capture responses when possible. The available options below are aligned with proGres v4 Registration Module Alignment Guidance¹ or local SOPs whenever possible. Answer options 'don't know' and 'no-reply' should be included in all questions for data quality.

When developing your questionnaire, remember:

- To identify and assess the protection risks associated with asking a given question in your context. The safety and well-being of respondents must be the over-riding priority, so you do not ask questions that are sensitive or can cause harm, e.g., by re-traumatizing a survivor or revealing information that should be kept confidential in a case management context.
- To never collect information about GBV unless services are available (via a referral pathway).
- To never collect more information than you have the ability or intention to use.
- To comply with the UNHCR Data Protection Policy when collecting and processing personal data. If the questionnaire involves processing particularly sensitive personal data, the Data Protection Impact Assessment may need to be conducted before conducting the questionnaire. Country Operation's Data Protection Focal Point and Data Controller should be consulted [DPP 4.5, DPG 8.2.5].

- As part of compliance with UNHCR DPP, ensure that participants to the questionnaire are aware of their rights as a data subject (rights to be informed, to access, correct, object, and delete) [DPP 3]

The questionnaire can be repeated periodically to track trends. However, this should never be done more frequently than is needed for a useful purpose and always take into consideration potential questionnaire fatigue as well as potential harm to and burden caused to respondents. You can use the questionnaire with the other safety audit tools to gain additional insight on any of the questions or to triangulate the findings.

The questionnaire is intended to be implemented by a GBV specialist² at the individual level (i.e., with individual respondents speaking on their behalf/about their own perceptions) in a secure and confidential environment. The enumerator (data collector) should be trained in protection (and ideally psychological first aid) and able to implement the referral pathway.

If the questionnaire is used with a large number of respondents, the GBV specialist will need to establish a means by which to analyse the findings. This may involve using a data analysis expert and a specific software for this purpose.

¹ UNHCR, Registration Module ProGres v4 Alignment Guidance, April 2018, found on UNHCR Intranet.

² This is inclusive of multifunctional teams and/or staff with responsibility and/or review over GBV assessments.

* A sample template of the questionnaire in KoBo will be forthcoming. Remember to first determine whether the use of mobile data collection tools is a safe option in your context before conducting the questionnaire with KoBo.

Name of auditor: [redacted]

Location where interview was conducted: [redacted]

Date of audit: [redacted]

Time of audit: [redacted]

Introduce the questionnaire enumerator, state her/his role and organization. Suggested text (to be adapted to your purpose and context):

The purpose of today's questionnaire is to capture your views and concerns on public safety and security issues that affect [PoC group] in this [area] and to gauge your opinions on ways to improve safety in the community. By safety, I mean safe from being harassed, assaulted, or attacked because of your gender (because she is a woman or because he is a man).

This questionnaire will be conducted anonymously, meaning your identity will not be disclosed. We will ask for some personal information, but we will not record your answers in a way that will connect them to your name.

In this questionnaire, we are not asking for specific stories; **please do not mention any names**. If you wish to talk about a specific issue or personal situation, please do so outside the context of this questionnaire. We will be providing you with [a contact list [redacted]] [during/after] the questionnaire.

Participation in this discussion is completely on a **voluntary basis** and you do not have to answer any questions that you do not wish to answer. You may leave at any time without any negative consequences.

Finally, **no direct benefits** (list examples if needed) will be derived from the time we spend together today. We very much appreciate your time to help us to better understand the situation and plan for the response [or another purpose]. Our main goal/intention is to listen and learn.

[Consent] Do you feel you can answer questions on [PoC group]'s safety in this area? It should take [time] minutes.

Personal data: These fields pertain to personal data that may help you understand how personal factors influence an individual's perceptions of safety. Use these fields only if appropriate and within the scope of the assessment and if it is safe to do so in your context. PoC names should not be recorded.

1. Year of birth or age (may be estimated) [Dropdown – age range]
2. Sex- Available options: *Female, Male, Other, or Unknown*³. [Dropdown]
3. Do you identify with any of the following (please select as applicable): *Lesbian, Gay, Bisexual, Transgender, Intersex*⁴, *Not listed above* [redacted], or No.
4. Country of origin (refer to local SOPs)
5. Name of area of residence (refer to local SOPs)
6. Education level (years of education completed, refer to local SOPs)
7. Civil status – Select from: *Common Law Marriage, Divorced, Engaged, Married, Single, Separated, Unknown, Widowed*⁵.
8. Place of Birth – Country where the individual was born (refer to local SOPs)
9. Ethnicity of the individual (refer to local SOPs)
10. Religion of the individual (refer to local SOPs)
11. How important would you say religion is to you? – Select from: *Very important, somewhat important, not too important, not at all important*
12. Do you have any chronic illnesses or disability? *Yes, No, unknown/unsure.*
 - If YES, specify [redacted]
13. Are you the Head of the household? *Yes, No, unknown/unsure.*

³ Aligned with UNHCR, Registration Module ProGres v4 Alignment Guidance, April 2018, found on UNHCR Intranet.

⁴ For L, G, B, T, I definitions see UNHCR webpage,

<https://emergency.unhcr.org/entry/43701/lesbian-gay-bisexual-transgender-and-intersex-lgbti-persons>.

⁵ Aligned with UNHCR, Registration Module ProGres v4 Alignment Guidance, April 2018, found on UNHCR Intranet.

14. Do you have children? *Yes, No, unknown/unsure.*
15. Are you currently working (earning wages)? *Yes, No, unknown/unsure.*
16. Do you care for any children? *Yes, No, unknown/unsure.*
17. How long have you lived in this area (city, camp, etc.)? *#years/#months, not applicable (e.g., in transit)*
18. Why are you in this area today? Example options: *work, leisure, errand, etc.*
19. How often do you visit this area within the *last month* (adjust time as appropriate)? Example options: *Very often, quite often, sometimes, rarely*
20. How did you commute here today (mode of transport)? Example options: *bus, train, walking, taxi, private car, etc.*
21. Did you travel here alone? *Yes, No*
22. Do you plan to return home the same way? (If at night, PoC may pay for a taxi, go home with someone, or choose a different route?)

For the questions below, we would like to ask you about your perception of safety (privacy and comfort) in public/shared spaces in this [area/city] and on access to services and resources provided by UNHCR. Please base your reply on your experience in the past [x] months, in this specific area. Repeat the definition of 'safety' if needed.

23. How often do you worry about your safety when you go out in public spaces?
- *Never, rarely, sometimes, all the time, only at certain times of the day or in certain places, don't know, no reply*
24. In general, which of these factors affect your safety, in your view? (Select all that apply)
- Gender
 - Religion
 - Race/ethnicity
 - Being a refugee/asylum-seeker/IDP/returnee/migrant
 - Sexual identity/orientation
 - Other (specify), none
 - Don't know
 - No reply
25. In general, which of the following personal safety risks concern you most? (Select only one)
- Sexual harassment (verbal hassling/comments, staring/leering)
 - Stalking
 - Sexual assault or rape
 - Other (specify)
 - None, I have no concerns about my safety
 - Don't know
 - No reply
26. Which precautions do you take to avoid acts of sexual harassment or violence in public places? (Select all that apply)
- Avoid going out at night
 - Avoid going to certain places
 - Opt for different routes
 - Carry an item for protection (e.g., xxx)
 - Avoid going out alone
 - Other (please specify)
 - No, I don't take any precautions
 - Don't know
 - No reply

Employment and livelihood

27. Do you feel that there are safe employment opportunities available to you? [Yes, No, Not applicable (I am not looking for employment opportunities), Don't know, no reply]
28. Do you feel safe at work? [Yes, No, Not Applicable (I am not currently working), Don't know, no reply]
29. Do you feel safe getting to and from work? [Yes, No, Not applicable (I am not currently working), Don't know, no reply]
30. Have you ever turned down employment opportunities due to concerns for your safety in the workplace [in the past x months]? [yes, no, don't know, no reply]
31. Do you feel issues of sexual harassment or exploitation while at work is a concern for [PoC]? [yes, no, don't know, no reply]
- **Define if needed:** *Sexual harassment is any unwelcome conduct of a sexual nature that is offending or humiliating. Sexual exploitation is an abuse of power to obtain any favour (including sexual favour) in exchange for help.*
32. Do you know where [PoC] could go for help if they faced sexual harassment or exploitation in their workplace? [yes, no, don't know, no reply]

Transportation safety

33. In general, do you feel safe when using public transport (buses, trains, etc.) alone? [Yes, No, Not applicable (I don't use public transport), Don't know, no reply,
34. In general, do you feel safe waiting at bus stops/terminals alone? [Yes, No, Not applicable (I don't use the bus), Don't know, no reply]
35. Do you use public transport alone after dark/at night? [Yes, no, not applicable (I don't use public transport), don't know, no reply
- a) If no, what is your main reason for not using public transport alone after dark/at night?
- No need – alternatives available, such as own car,
 - Do not feel safe – lack of lighting, bad neighbourhood, etc.
 - no public transport available during this time (after dark/at night)
 - Other: Please specify
 - Don't know
 - No reply
- b) If yes, do you feel safe when using public transport alone after dark/at night?

Public areas – can be adapted for the area around reception centres/shelters, markets, etc.

36. Do you feel safe walking alone in this area in daytime? At night/after dark?
37. What personal safety risks concern you most when you are in this area in daytime? At night/after dark?
38. Do you feel safe traveling to/from this area?
39. Do you feel the area is well maintained (e.g., in terms of [redacted])?
40. Do you feel safe using public amenities in this area? (bathrooms, etc.)
41. Would you feel safe expressing your gender identity openly in this area?
42. Do you feel safer when you see police⁶ or other law enforcement authorities in the area?
43. Would you feel safe approaching a police officer or other law enforcement officer to help you in an emergency in this area?
44. Do you feel confident in the police's ability (or the ability of other law enforcement officers) to respond to you in an emergency in this area?
45. Which of the following factors contribute to you feeling unsafe in this area? (select as applicable)
- Poor lighting
 - Lack of traffic signals
 - Too many people (crowding)
 - Too few people (the area feels isolated or secluded)
 - Presence of alcohol and/or drugs
 - Unpaved roads
 - Abandoned or disused buildings

- Construction sites or materials (e.g., scaffolding)
 - Graffiti
 - Other: Please specify
 - None
 - Don't know
 - No reply
46. Which of the following precautions do you take out of concern for your safety when in this area?
- Avoid certain parts of the area or streets
 - Avoid being alone
 - Avoid this area at night
 - Avoid crowded areas
 - Avoid secluded areas
 - Avoid wearing certain clothes
 - Carry items to protect myself (e.g., [redacted])
 - No, I don't take any precautions
 - Other: Please specify
 - Don't know
 - No reply

Community/residential area: This section addresses safety concerns in POC neighbourhood/area of residence if that area is different than the area that is being audited. Add this section if applicable to your information needs.

For the section below, I would like to ask you questions regarding your perception of safety in the area/neighbourhood where you live. I will not ask you about your household or home situation, but resources are available if you need to discuss any specific issues after the questionnaire.

Thinking now to your area of residence (neighbourhood):

47. What is the name of the area/neighbourhood where you live? [dropdown menu]
48. Do you feel safe to walk alone around your neighbourhood in daytime? During night/after dark?⁷
49. Do you feel you belong in your community/neighbourhood in daytime? During night/after dark?
50. Do you feel you can safely leave your home to go out alone in daytime? During night/after dark?
51. Do you feel that you have access to safe and inclusive spaces near where you live (e.g., religious centres, community centres, parks, etc.)?
52. Do you feel you have access to peer/community support groups?
53. Do you feel you can safely access emergency services from where you live, such as [provide examples of local GBV emergency service]?
54. Do you feel you can safely access basic services provided by UNHCR from where you live, such as [provide examples of local services for GBV]?

⁶ ????????????

⁷ This question is aligned with the indicator set out in the RBM framework for GBV. Link forthcoming.

55. Do you feel that members of the community would intervene if they saw someone being sexually harassed or assaulted?

Access to resources/services

56. Do you know where to go for information and services on sexual and reproductive health?

57. Would you feel safe accessing such information and services?

58. Do you feel you could access the information and service without facing any stigma and/or discrimination, e.g., due to [redacted]?

59. [For women and girls] Do you know where to access menstrual hygiene material?

60. [For women and girls] Would you feel safe getting menstrual hygiene material?

61. [For women and girls] Do you feel you can access menstrual hygiene material without facing any stigma and/or discrimination, e.g., due to [redacted]?

62. Do you know where to access contraceptives, such as condoms?

63. Would you feel safe getting contraceptives?

64. Do you feel you can access contraceptives without facing any stigma and/or discrimination?

65. Do you know where to access [specify a basic resource or service e.g., water, food, NFI, health]?

66. Do you feel you can safely access [specify a basic resource or service e.g., water, food, NFI, health]?

67. Do you feel you can access [specify a basic resource or service e.g., water, food, NFI, health] without facing any stigma and/or discrimination?

68. Do you know where to access a safe space for people of your gender and age? [A safe space is an environment where you can feel physically and emotionally safe].

GBV

69. Do you know what is gender-based violence (GBV)?

- If NO, explain to the respondent what GBV is so the respondent can then answer the subsequent questions in an informed way. Example: "Gender-based violence refers to harmful acts directed against a person because of their gender and without their consent. Forms of GBV include sexual violence, sexual abuse, sexual harassment, early or forced marriage, denial of resources, etc."

70. Have you ever taken part in a discussion on GBV in this area?

71. Do you feel that GBV is a common concern for people of your gender and/or age in this area?

72. Do you feel it is safe to openly discuss GBV issues in this area?

73. Do you feel people of your gender and/or age have an equal say in the decisions that are taken in their marriage/relationship/family?

74. Which actions do you think would be likely for a survivor coping with an experience of GBV?

- Join a support group
- Talk to friends
- Talk to family
- Seek advice from legal professionals or traditional justice mechanisms
- Seek advice/counselling/assistance from religious organizations
- Seek advice/counselling/assistance from community organizations
- Seek mental health counselling
- Seek medical assistance
- Try to forget about the experience
- Other: Specify
- Don't know
- No reply

75. What actions do you think would be UNLIKELY for a survivor coping with an experience of GBV to choose? (previous options)

76. Do you know where a person could report a sexual assault case?

If YES, where? [redacted]

[or add drop down list of possible options]

77. Do you feel it would be safe for a survivor to report her/his case at this location? [Yes, Maybe, No, Don't know, no reply]

78. Do you feel it is likely that a survivor would report an incident of sexual assault? [Yes, Maybe, No, Don't know, no reply]

79. Do you think a survivor's confidentiality would be protected while reporting an incident of sexual assault? [Yes, Maybe, No, Don't know, no reply]

80. Do you know of any local services or programmes to assist GBV survivors?⁸

81. Do you think a survivor could safely access local GBV services?

82. Do you feel the laws in this country help protect you against sexual assault/rape?

⁸ This question is aligned with the indicator set out in the RBM framework for GBV. Link forthcoming.

SAFETY AUDIT QUESTIONNAIRE

** A sample template of the questionnaire in KoBo will be available. Remember to first determine whether the use of mobile data collection tools is a safe option in your context before conducting the questionnaire with KoBo.*

Name of auditor:

Location where interview was conducted:

Date of audit:

Time of audit:

Introduce the questionnaire enumerator, state her/his role and organization. Suggested text (to be adapted to your purpose and context):

The purpose of today's questionnaire is to capture your views and concerns on public safety and security issues that affect [PoC group] in this [area] and to gauge your opinions on ways to improve safety in the community. By safety, I mean safe from being harassed, assaulted, or attacked because of your gender (because she is a woman or because he is a man).

This questionnaire will be conducted anonymously, meaning your identity will not be disclosed. We will ask for some personal information, but we will not record your answers in a way that will connect them to your name.

In this questionnaire, we are not asking for specific stories; **please do not mention any names**. If you wish to talk about a specific issue or personal situation, please do so outside the context of this questionnaire. We will be providing you with [a contact list] [during/after] the questionnaire.

Participation in this discussion is completely on a **voluntary basis** and you do not have to answer any questions that you do not wish to answer. You may leave at any time without any negative consequences.

Finally, **no direct benefits** (list examples if needed) will be derived from the time we spend together today. We very much appreciate your time to help us to better understand the situation and plan for the response [or another purpose]. Our main goal/intention is to listen and learn.

[Consent] Do you feel you can answer questions on [PoC group]'s safety in this area? It should take [time] minutes.

Personal data: *These fields pertain to personal data that may help you understand how personal factors influence an individual's perceptions of safety. Use these fields only if appropriate and within the scope of the assessment and if it is safe to do so in your context. PoC names should not be recorded.*

1. Year of birth or age (may be estimated) [Dropdown – age range]
2. Sex- Available options: *Female, Male, Other, or Unknown*¹. [Dropdown]
3. Do you identify with any of the following (please select as applicable): *Lesbian, Gay, Bisexual, Transgender, Intersex*², *Not listed above* , or No.
4. Country of origin (refer to local SOPs)
5. Name of area of residence (refer to local SOPs)
6. Education level (years of education completed, refer to local SOPs)
7. Civil status – Select from: *Common Law Marriage, Divorced, Engaged, Married, Single, Separated, Unknown, Widowed*³.
8. Place of Birth – Country where the individual was born (refer to local SOPs)

¹ Aligned with UNHCR, Registration Module ProGres v4 Alignment Guidance, April 2018, found on UNHCR Intranet.

² For L,G, B, T, I definitions see UNHCR webpage,

<https://emergency.unhcr.org/entry/43701/lesbian-gay-bisexual-transgender-and-intersex-lgbti-persons>.

³ Aligned with UNHCR, Registration Module ProGres v4 Alignment Guidance, April 2018, found on UNHCR Intranet.

9. Ethnicity of the individual (refer to local SOPs)
10. Religion of the individual (refer to local SOPs)
11. How important would you say religion is to you? – Select from: *Very important, somewhat important, not too important, not at all important*
12. Do you have any chronic illnesses or disability? *Yes, No, unknown/unsure.*
 - If YES, specify
13. Are you the Head of the household? *Yes, No, unknown/unsure.*
14. Do you have children? *Yes, No, unknown/unsure.*
15. Are you currently working (earning wages)? *Yes, No, unknown/unsure.*
16. Do you care for any children? *Yes, No, unknown/unsure.*
17. How long have you lived in this area (city, camp, etc.)? *#years/#months, not applicable (e.g., in transit)*
18. Why are you in this area today? Example options: *work, leisure, errand, etc.*
19. How often do you visit this area within the *last month* (adjust time as appropriate)? Example options: *Very often, quite often, sometimes, rarely*
20. How did you commute here today (mode of transport)? Example options: *bus, train, walking, taxi, private car, etc.*
21. Did you travel here alone? *Yes, No*
22. Do you plan to return home the same way? (If at night, PoC may pay for a taxi, go home with someone, or choose a different route?)

For the questions below, we would like to ask you about your perception of safety (privacy and comfort) in public/shared spaces in this [area/city] and on access to services and resources provided by UNHCR. Please base your reply on your experience in the past [x] months, in this specific area. Repeat the definition of 'safety' if needed.

23. How often do you worry about your safety when you go out in public spaces?
 - *Never, rarely, sometimes, all the time, only at certain times of the day or in certain places, don't know, no reply*
24. In general, which of these factors affect your safety, in your view? (Select all that apply)
 - Gender
 - Religion
 - Race/ethnicity
 - Being a refugee/asylum-seeker/IDP/returnee/migrant
 - Sexual identity/orientation
 - Other (specify), none
 - Don't know
 - No reply
25. In general, which of the following personal safety risks concern you most? (Select only one)
 - Sexual harassment (verbal hassling/comments, staring/leering)
 - Stalking
 - Sexual assault or rape
 - Other (specify)
 - None, I have no concerns about my safety
 - Don't know
 - No reply
26. Which precautions do you take to avoid acts of sexual harassment or violence in public places? (Select all that apply)
 - Avoid going out at night
 - Avoid going to certain places
 - Opt for different routes
 - Carry an item for protection (e.g., xxx)
 - Avoid going out alone
 - Other (please specify)
 - No, I don't take any precautions
 - Don't know
 - No reply

Employment and livelihood

27. Do you feel that there are safe employment opportunities available to you? [Yes, No, Not applicable (I am not looking for employment opportunities), Don't know, no reply]
28. Do you feel safe at work? [Yes, No, Not Applicable [I am not currently working], Don't know, no reply]

29. Do you feel safe getting to and from work? [Yes, No, Not applicable [I am not currently working], Don't know, no reply]
30. Have you ever turned down employment opportunities due to concerns for your safety in the workplace [in the past x months]? [yes, no, don't know, no reply]
31. Do you feel issues of sexual harassment or exploitation while at work is a concern for [PoC]? [yes, no, don't know, no reply]
- **Define if needed:** *Sexual harassment is any unwelcome conduct of a sexual nature that is offending or humiliating. Sexual exploitation is an abuse of power to obtain any favour (including sexual favour) in exchange for help.*
32. Do you know where [PoC] could go for help if they faced sexual harassment or exploitation in their workplace? [yes, no, don't know, no reply]

Transportation safety

33. In general, do you feel safe when using public transport (buses, trains, etc.) alone? [Yes, No, Not applicable (I don't use public transport), Don't know, no reply,
34. In general, do you feel safe waiting at bus stops/terminals alone? [Yes, No, Not applicable (I don't use the bus), Don't know, no reply]
35. Do you use public transport alone after dark/at night? [Yes, no, not applicable (I don't use public transport), don't know, no reply]
- a) If no, what is your main reason for not using public transport alone after dark/at night?
- *No need – alternatives available, such as own car,*
 - *Do not feel safe – lack of lighting, bad neighbourhood, etc.*
 - *no public transport available during this time (after dark/at night)*
 - *Other: Please specify*
 - *Don't know*
 - *No reply*
- b) If yes, do you feel safe when using public transport alone after dark/at night?

Public areas – *can be adapted for the area around reception centres/shelters, markets, etc.*

36. Do you feel safe walking alone in this area in daytime? At night/after dark?
37. What personal safety risks concern you most when you are in this area in daytime? At night/after dark?
38. Do you feel safe traveling to/from this area?
39. Do you feel the area is well maintained (e.g., in terms of [redacted])?
40. Do you feel safe using public amenities in this area? (bathrooms, etc.)
41. Would you feel safe expressing your gender identity openly in this area?
42. Do you feel safer when you see police⁴ or other law enforcement authorities in the area?
43. Would you feel safe approaching a police officer or other law enforcement officer to help you in an emergency in this area?
44. Do you feel confident in the police's ability (or the ability of other law enforcement officers) to respond to you in an emergency in this area?
45. Which of the following factors contribute to you feeling unsafe in this area? (select as applicable)
- Poor lighting
 - Lack of traffic signals
 - Too many people (crowding)
 - Too few people (the area feels isolated or secluded)
 - Presence of alcohol and/or drugs
 - Unpaved roads
 - Abandoned or disused buildings
 - Construction sites or materials (e.g., scaffolding)
 - Graffiti
 - Other: Please specify
 - None
 - Don't know
 - No reply
46. Which of the following precautions do you take out of concern for your safety when in this area?
- Avoid certain parts of the area or streets
 - Avoid being alone

⁵ ?????????

- Avoid this area at night
- Avoid crowded areas
- Avoid secluded areas
- Avoid wearing certain clothes
- Carry items to protect myself (e.g., [redacted])
- No, I don't take any precautions
- Other: Please specify
- Don't know
- No reply

Community/residential area: *This section addresses safety concerns in POC neighbourhood/area of residence if that area is different than the area that is being audited. Add this section if applicable to your information needs.*

For the section below, I would like to ask you questions regarding your perception of safety in the area/ neighbourhood where you live. I will not ask you about your household or home situation, but resources are available if you need to discuss any specific issues after the questionnaire.

Thinking now to your area of residence (neighbourhood):

47. What is the name of the area/neighbourhood where you live? [dropdown menu]
48. Do you feel safe to walk alone around your neighbourhood in daytime? During night/after dark?⁵
49. Do you feel you belong in your community/neighbourhood in daytime? During night/after dark?
50. Do you feel you can safely leave your home to go out alone in daytime? During night/after dark?
51. Do you feel that you have access to safe and inclusive spaces near where you live (e.g., religious centres, community centres, parks, etc.)?
52. Do you feel you have access to peer/community support groups?
53. Do you feel you can safely access emergency services from where you live, such as [provide examples of local GBV emergency service]?
54. Do you feel you can safely access basic services provided by UNHCR from where you live, such as [provide examples of local services for GBV]?
55. Do you feel that members of the community would intervene if they saw someone being sexually harassed or assaulted?

Access to resources/services

56. Do you know where to go for information and services on sexual and reproductive health?
57. Would you feel safe accessing such information and services?
58. Do you feel you could access the information and service without facing any stigma and/or discrimination, e.g., due to [redacted]?
59. [For women and girls] Do you know where to access menstrual hygiene material?
60. [For women and girls] Would you feel safe getting menstrual hygiene material?
61. [For women and girls] Do you feel you can access menstrual hygiene material without facing any stigma and/or discrimination, e.g., due to [redacted]?
62. Do you know where to access contraceptives, such as condoms?
63. Would you feel safe getting contraceptives?
64. Do you feel you can access contraceptives without facing any stigma and/or discrimination?
65. Do you know where to access [specify a basic resource or service e.g., water, food, NFI, health]?
66. Do you feel you can safely access [specify a basic resource or service e.g., water, food, NFI, health]?
67. Do you feel you can access [specify a basic resource or service e.g., water, food, NFI, health] without facing any stigma and/or discrimination?
68. Do you know where to access a safe space for people of your gender and age? [A safe space is an environment where you can feel physically and emotionally safe].

GBV

69. Do you know what is gender-based violence (GBV)?
 - If NO, explain to the respondent what GBV is so the respondent can then answer the subsequent questions in an informed way. Example: "Gender-based violence refers to harmful acts directed against a person because of their gender and without their consent. Forms of GBV include sexual violence, sexual abuse, sexual harassment, early or forced marriage, denial of resources, etc."
70. Have you ever taken part in a discussion on GBV in this area?

⁵ This question is aligned with the indicator set out in the RBM framework for GBV. Link forthcoming.

71. Do you feel that GBV is a common concern for people of your gender and/or age in this area?
72. Do you feel it is safe to openly discuss GBV issues in this area?
73. Do you feel people of your gender and/or age have an equal say in the decisions that are taken in their marriage/relationship/family?
74. Which actions do you think would be likely for a survivor coping with an experience of GBV?
- Join a support group
 - Talk to friends
 - Talk to family
 - Seek advice from legal professionals or traditional justice mechanisms
 - Seek advice/counselling/assistance from religious organizations
 - Seek advice/counselling/assistance from community organizations
 - Seek mental health counselling
 - Seek medical assistance
 - Try to forget about the experience
 - Other: Specify
 - Don't know
 - No reply
75. What actions do you think would be UNLIKELY for a survivor coping with an experience of GBV to choose? (previous options)
76. Do you know where a person could report a sexual assault case?
If YES, where? [or add drop down list of possible options]
77. Do you feel it would be safe for a survivor to report her/his case at this location? [Yes, Maybe, No, Don't know, no reply]
78. Do you feel it is likely that a survivor would report an incident of sexual assault? [Yes, Maybe, No, Don't know, no reply]
79. Do you think a survivor's confidentiality would be protected while reporting an incident of sexual assault? [Yes, Maybe, No, Don't know, no reply]
80. Do you know of any local services or programmes to assist GBV survivors?⁶
81. Do you think a survivor could safely access local GBV services?
82. Do you feel the laws in this country help protect you against sexual assault/rape?

⁶ This question is aligned with the indicator set out in the RBM framework for GBV. Link forthcoming.

HOW TO SET UP KOBO

What is KoBo Toolbox?

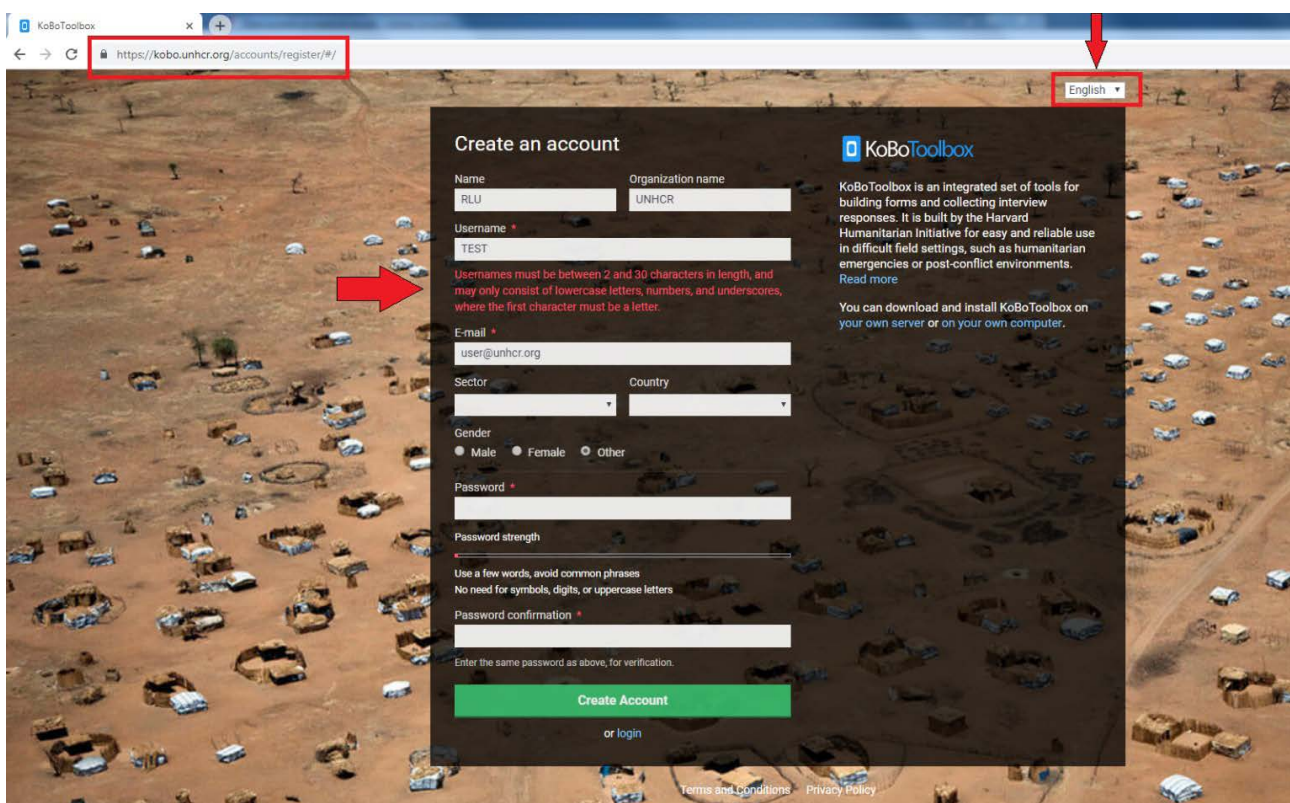


KoBoToolbox is an integrated set of tools for building forms and collecting interview responses. It is built by the Harvard Humanitarian Initiative for easy and reliable use in difficult field settings, such as humanitarian emergencies or post-conflict environments. This will allow the user to collect, sync, and aggregate data for easy access.

Create an account

1. Click on the following to [Register an account](#) (Ensure the account is created at kobo.unhcr to ensure data is hosted and supported by UNHCR servers)
 - The language for the sign in page can be changed.
 - Pick a username*: **Usernames must be between 2 and 30 characters in length, and may only consist of lowercase letters, numbers, and underscores, where the first character must be a letter.**

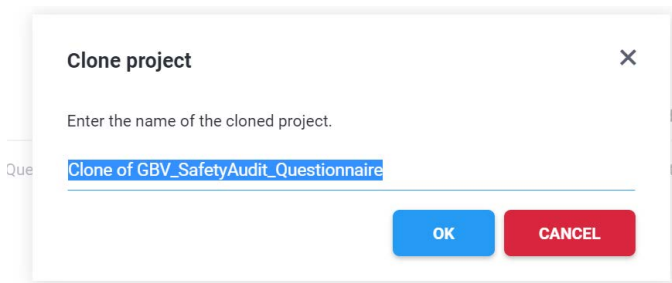
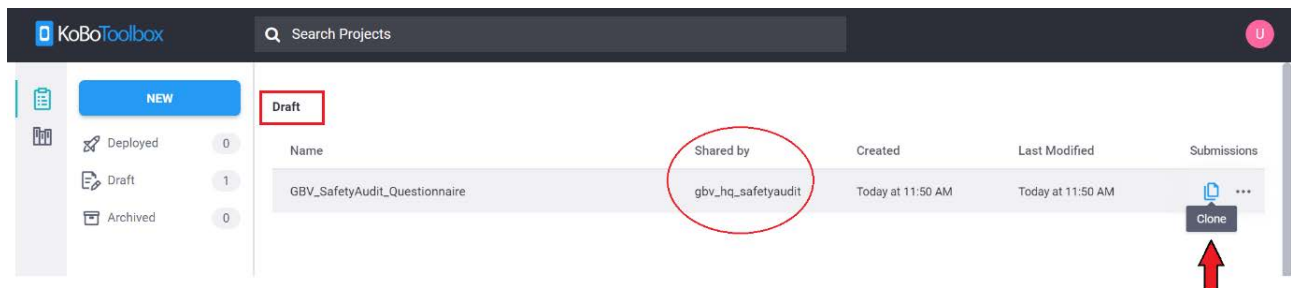
* This may also be a group username, e.g. 'safetyauditgroup', if ownership of the account will be shared among several individuals.



2. Once you click on Create Account, an email will be sent to [Activate your KoBoToolbox Account](#). Please visit the indicated url in the email to finish activation of your new account.
3. Share username with team as needed.

Clone forms

1. GBV_HQ will share the form(s) with you (view access only), which will appear as a Draft under your Projects (green clipboard icon on left hand side).
2. You will need to clone the shared draft form to save a copy and be able to edit the form.
3. In your Draft folder, under Projects, near the right far side (under Submission heading) hover until you see the Clone icon appear and click on it. A box will pop up for you to enter a name for the cloned project and then hit OK to save.



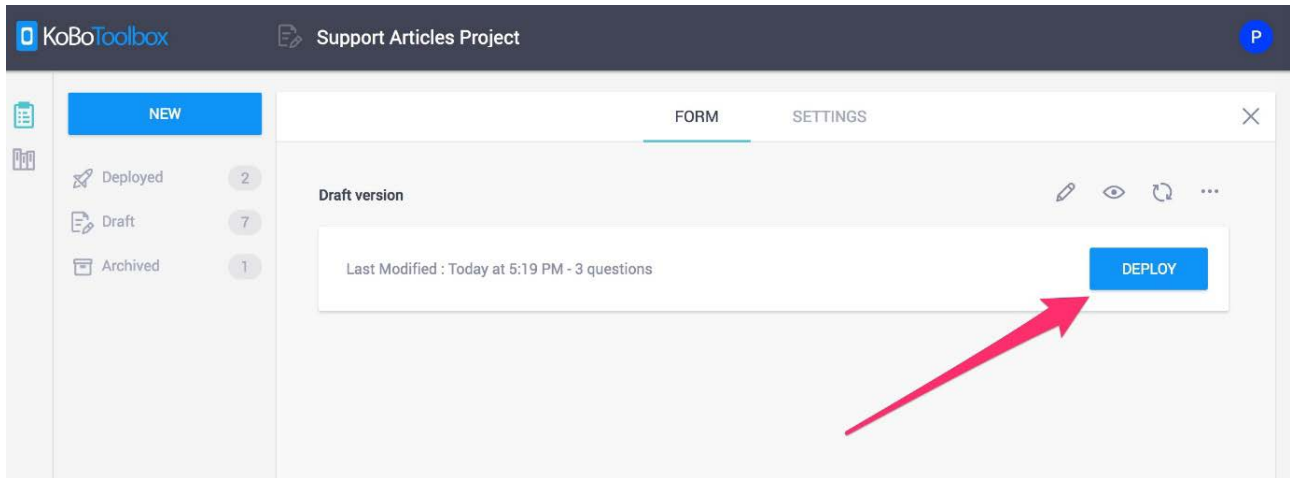
4. Once you hit OK, the cloned project will appear as another Draft item. Click on the pencil icon to Edit the form.
5. You may wish to edit the list of questions, options, and/or make other changes. Make sure to click on Save after any changes. Click on either the x (next to Save button) or icon in top left-hand corner to return to the landing page.

Note: GBV_HQ will maintain a copy of all of forms which you can re-request should for any reason your copy of the form becomes damaged. However, the copy of the standard form shared by GBV_HQ will remain in your drafts folder, which you can also re-clone as many times as needed.



Deploy form

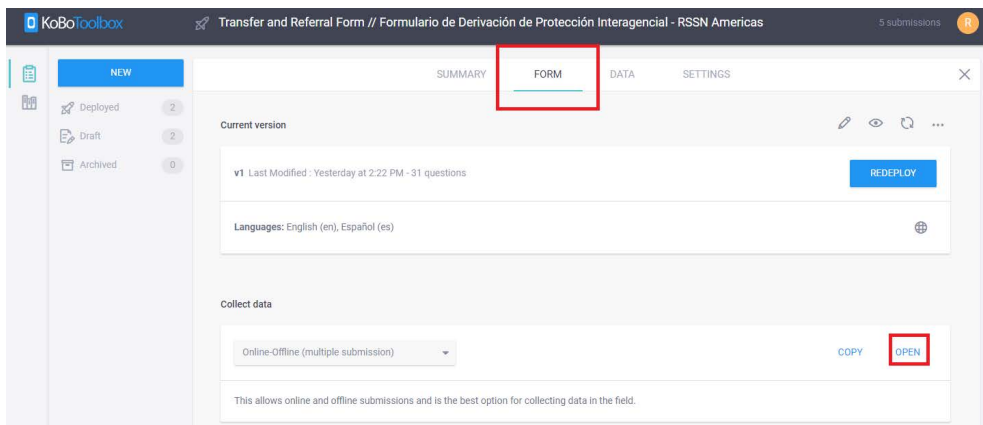
Once all changes have been made, click the Deploy button. Your form will be live and data collection can begin.



Find your form under deployed folder and click on Open. This will take you to the form online (Forms can be accessed by anyone who knows the respective URL). To send the URL by email just click Copy and paste it into an email*.

Note: You will be prompted to redeploy your form when you have made changes to your form that are not yet public (URL will remain the same).

* To start collecting data using the cloned web forms from your owner account, all colleagues will need to be using the respective URL linked to your account's projects. The project owner will be able to view and edit all submissions.

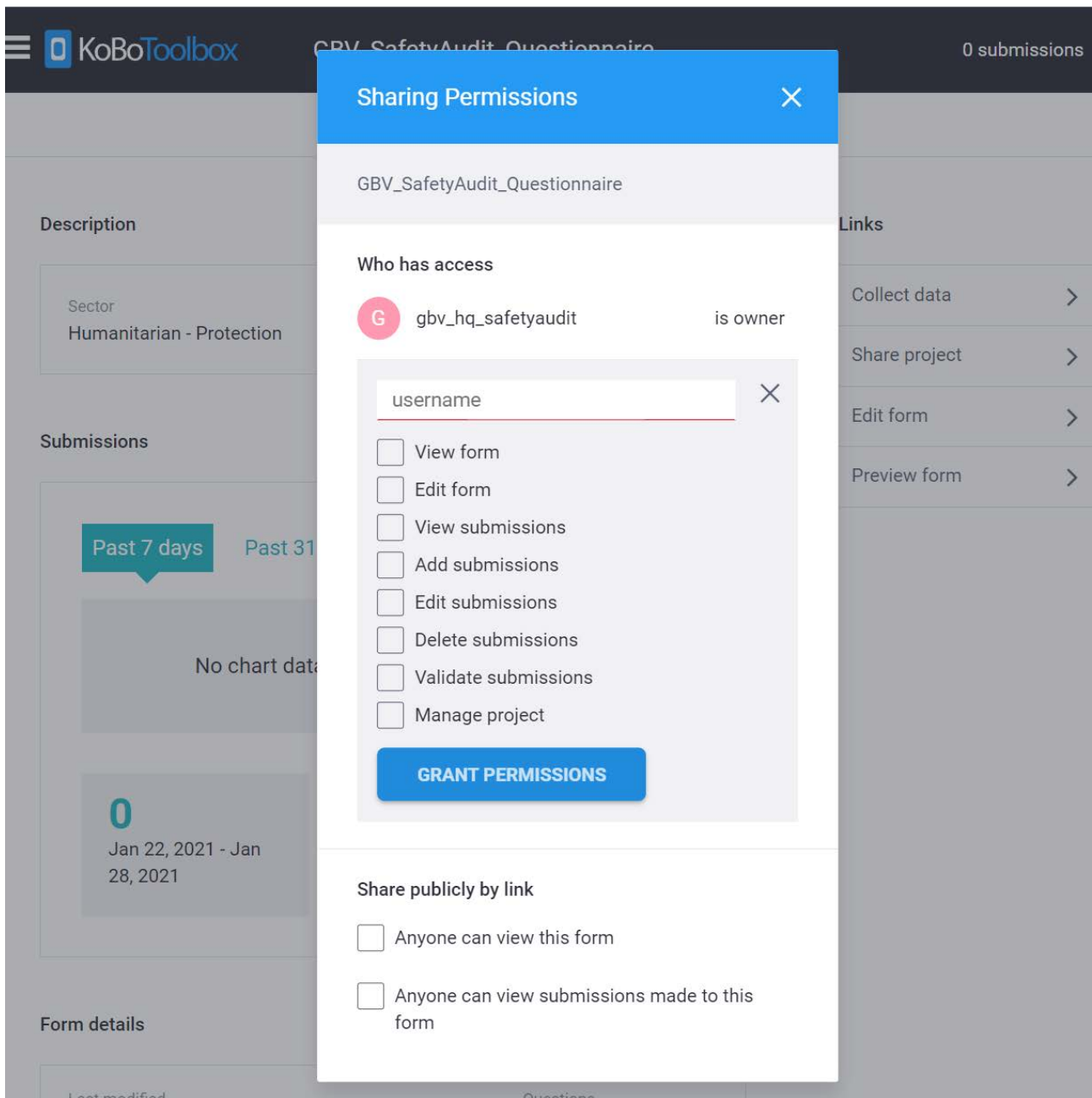


Managing Permissions

KoBoToolbox allows giving different permission options to a data collection project. While most projects may only use a single user to manage, access, and enter data for a given project, sometimes more complex scenarios require different levels of access.

Setting Project-specific user permissions

To control Project permissions go to the Sharing tab in the Settings box in your data collection project, enter the username of the user who should get new permissions, check the permission type(s), then click Grant Permissions.



To add multiple types of permissions to a user, you'll need reenter the username and select the permission type and click Invite for each one.

To copy a team and their associated permissions from another project, click on the link at the bottom of the page. Clicking the link will overwrite any existing settings already defined in the current project.

Note:

By default KoBoToolbox only requires a username and password for accessing data and managing your projects. Forms can be accessed by anyone who knows the respective URL. To require users to log in to access your forms go to Settings inside your online account and tick 'Require authentication to see forms and submit data'. (Note: Not recommended as currently this can currently can only be set globally for all the projects in your account)

Record Validation

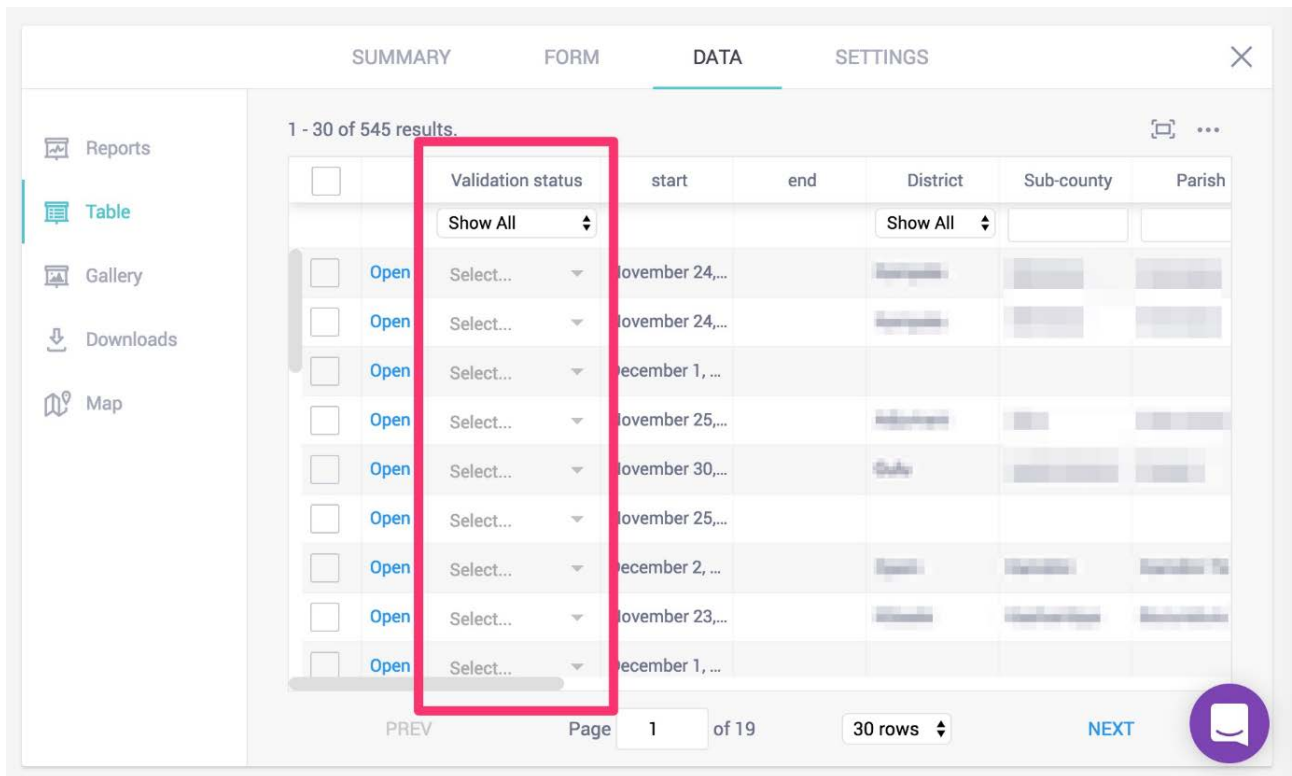
<http://support.kobotoolbox.org/managing-projects/record-validation>

A Project owner can now give a “Can Validate” permission to other users*. Users with this permission can view a record, edit it if necessary, and assign a status to the record in question. Assigning a status to a particular record/submission raises data collection standards for teams with more than one enumerator.

* At the time of writing, a user must be given permission to both ‘edit submissions’ and ‘validate submissions’ in order for the validation function to work properly.

What are the statuses that you can assign to a record?

Open ‘Table’ view under your project’s ‘Data’ section.



The validation status labels available include:

- On Hold: Record is under review.
- Approved: The data within this record is accurate.
- Not approved: The data within this record is not accurate and or the request is no longer valid. The form will be deleted and the data will not be counted.

Users can filter the table view based on the validation status or any other select-one question. For example, you can use these filters to view the submissions associated with a particular enumerator, in Country X. It is possible to use more than one filter at a time.

Note:

When selecting/updating a validation label, you may need to hit ‘refresh’ (F5) to see the change reflected.