GBV in Emergencies (GBViE) is one of the six priority areas of the Life Free From Violence (LFFV) Outcome. Our current work to advance CARE's GBViE agenda can be divided roughly into four main focus areas:



Mainstreaming GBViE Risk Mitigation

The Global Coordinator of the 2015 Inter Agency Standing Committee (IASC) Guidelines for Integrating GBV Interventions in Humanitarian Action (the GBV Guidelines) is on secondment from UNICEF to CARE since June 2018. In the spirit of inter-agency collaboration, this means that CARE's GBViE team can draw on the Coordinator's years of experience and expertise to develop the necessary framework / guidance on GBViE risk mitigation for CARE.

In December 2018, with support from CARE USA, the Coordinator facilitated a workshop on the GBV Guidelines in Tbilisi, Georgia in which approximately 15 CARE colleagues participated, including five members each from the Rapid Response and CARE USA's Humanitarian Team.





Integrating GBViE Objectives and Activities

The GiE team is also advancing work to support the **integration of GBV** prevention and response objectives, activities and resources into core technical areas such as water, sanitation and hygiene (WASH), Shelter & Settlements, Sexual and Reproductive Health in Emergencies (SRH-E) and Food Security, Nutrition and Livelihoods (FSN&L). The Sector Leads for the core sectors are working with the GiE team to make progress in this area, including in the development of the Minimum Commitments. In addition, in December 2018 in Amman, the SRH-E team and the GiE Coordinator (Operations) explored the integration of SRH-E and GBViE programming and, as a result, the two teams – SRH-E and GiE – will pursue a series of work-streams to advance this effort.





Stand-Alone GBV Programming

A good example of CARE's standalone GBViE prevention and response programming includes the establishment and management of the 'Safe Spaces for Women and Girls (SSWGs)' including Cox's Bazar in Bangladesh. A consultant was deployed to Cox's Bazar in late October to examine the quality and impact of CARE's SSWGs in other contexts. It is envisaged that a key outcome of this and other work will be the first draft of general guidance for CARE teams establishing and managing SSWGs.





Representation, Advocacy & Influence

CARE's portfolio and reputation for implementing solid GBV response, prevention and mitigation work are increasing. This is evident from the increasing number of invitations that CARE has received to join technical working groups and panels on various aspects of the issues on GBV response, prevention and mitigation including:

a. CARE LISA is co-chair of the NGO Working Group on the Call to Action

- a. CARE USA is co-chair of the NGO Working Group on the Call to Action on Protection from GBV in Emergencies
- b. CARE USA is co-chair of the GBV Area of Responsibility's Policy & Advocacy Reference Group
 c. CARE UK is co-chair of the GBV Area of Responsibility's Task Team on
- GBV and Localisation

 d. CARE International was invited by the Equality Institute-New York to join
- UNICEF, IRC and the University of Denver on an Advisory Group for a study to determine the level of investment by major donors into addressing violence against women and girls (VAWG)

 e. CARE USA and CARE International have been invited to join a number
- of UN Agencies and NGOs on 'The Real Time Accountability Partnership' (RTAP) Steering Committee. The RTAP seeks to translate humanitarian commitments into concrete actions that lead to results, including improved funding, better coordination and effective programming. Members of the Steering Committee work together to translate high-level commitments on GBV into

action at the field level and to promote system-wide accountability for GBV prevention and response in emergencies. Recently, a decision has been made to connect the RTAP and the Call to Action more closely and to make RTAP the official in-country implementation framework for the Call to Action.





