



The Lake Chad Basin Crisis has exposed both displaced and host communities to major protection risks, with women and girls especially vulnerable, resulting in high rates of gender-based violence (GBV) and extremely limited access to reproductive health and GBV prevention and response services. Long standing social norms and cultural traditions promote patterns of gender inequality and violence against women and girls. The patterns and persistence of GBV are interwoven into coping strategies of communities in the sub-region. Conflict-related sexual violence – including but not limited to the abduction of women and girls, forced marriage and labor - has created especially acute needs in hard to reach areas. Moreover, the survivors face acute social stigmatization upon their return, as they are often suspected of being sympathizers of extremist groups. The occurrence and impact of GBV has been exacerbated and amplified by the five year protection crisis which has displaced more than 2.6 million people who have fled their homes in search of safety and protection, and has left over 10 million people in need of humanitarian assistance ([Lake Chad Crisis HRP 2018](#)).

A number of donor States and humanitarian actors working in the countries of the Lake Chad Basin are also partners in the global Call to Action on Protection from GBV in Emergencies. Working with governments and civil society organizations, Call to Action partners should leverage their global commitment to collective action and accountability to significantly strengthen their response to GBV in the Lake Chad region. This includes strong support for the Call to Action 2018–2019 Road Map for northeast Nigeria.

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The following are examples of needs for protection from GBV in the Lake Chad context

Cameroon

In Cameroon, the second most-affected country in the Lake Chad Crisis, women and girls continue to be exposed to GBV. Access to the affected population remains difficult; humanitarian actors had to temporarily suspend operations in early June following an armed raid in Far North region ([Cameroon HNO 2018](#); [OCHA 19/06/2018](#)). Armed groups continue to use women and children as suicide bombers across the Lake Chad basin. Survivors of abductions who return to their communities are severely stigmatized, and funding for protection, livelihoods assistance and reintegration support for survivors is limited.

Chad

Over 2,270 cases of GBV were reported in 2017. Though some survivors receive psychosocial support, medical and legal assistance remains limited. Survivors in remote areas lack access to health care – and life-saving medical assistance - due to gaps in coverage of services and underfunded mobile clinics. Impunity and a weak legal system hamper access to justice ([OCHA 05/03/2018](#)). The number of GBV cases is expected to be much higher as survivors may not come forward out of fear and stigmatization, referral pathways remain inadequate, and due to other aspects that hinder survivors from reporting cases. Multi sectoral assessments undertaken in 2018 illustrate this, as women and girls in 20 displacement sites in Ngouboua, Lac region, listed forced and early marriage as well as intimate partner violence among their main protection concerns ([OCHA 07/02/2018](#)).

Niger

The conflict has heightened the vulnerability of women and girls, who already faced the world's highest rates of child, early and forced marriage, and low rates of formal education. Repeated attacks by Boko Haram as well as military operations continue to hamper the provision of humanitarian assistance ([UNHCR 31/07/2018](#); [OCHA 11/06/2018](#)). The situation has further exacerbated vulnerability, especially among children who are exposed to the risks of abuse, violence and exploitation.

Nigeria

An estimated 2.9 million people in the northeast need protection from GBV. Women and adolescent girls are at risk of sexual violence when collecting firewood, which not only endangers their physical and mental health; it also limits their freedom of movement and access to livelihoods. Sexual violence also occurs at home, on the way to school, but also during humanitarian assistance activities (e.g. distributions) ([CARE 31/01/2018](#); [31/01/2018a](#); [Nigeria HNO 2018](#)). Women and girls returning from Boko Haram often face a large number of integration challenges, from the need for long-term health and psychological

support to the stigmatization and rejection of having been abducted and forced to live with armed groups or from returning pregnant or with children born of rape.

GBV Prevention and Response Priorities in the Lake Chad Basin:

1. **Responding** to conflict-related sexual violence
2. **Preventing** sexual exploitation and abuse of women and girls in displacement and in host communities
3. **Breaking** the cycle of domestic violence
4. **Supporting** and sensitizing communities to identify alternatives for and strengthen mechanisms to prevent and respond to child, early and forced marriage
5. **Strengthening** access to justice and services for GBV survivors
6. **Reducing** gender inequality and empower women and girls, including through improving access to education, health, political participation, and economic control
7. **Engaging** men as active partners on accountability to women and girls and their empowerment

Critical lifesaving interventions to reduce the risks of GBV faced by women and girls are a vital, yet underfunded, component of the humanitarian response. In addition to the health and psychosocial impact of GBV on survivors, stigmatization also contributes to a breakdown in community cohesion and reduces community protection capacity. Unless addressed, the scars left by GBV will hinder the resilience and eventual recovery of communities emerging from humanitarian crises. Conversely, this will negatively impact the enhanced capacity to better cope with conflict and reducing the exposure of women, girls, boys and men to violence.

Recommendations to governments, donors and response actors

- 1 **Implement a cohesive approach to addressing GBV across the humanitarian, development, peace nexus:** The GBV situation in the Lake Chad Basin must be analyzed in terms of prevention, mitigation and response at community level in order to produce a joined-up, effective response. Medical services, case management and psychosocial support, safety and security, mental health, access to justice and coordination need to be connected across the response.
- 2 **Strengthen priorities and needs identification by the community and GBV actors:** Inclusiveness and direct participation of affected women and girls and communities need to be promoted in humanitarian assessments and response. All humanitarian actors should ensure the voices of women and girls are heard and that they are included in assessments and analyses. Based on the identified needs, GBV actors can more effectively target interventions for GBV prevention, response, and mitigation, and build response around community-based protection, local groups, and grassroots organizations.
- 3 **Promote accountability through strengthened coordination and participation of the community:** It is essential to elevate women's voices and participation in the humanitarian system, community decision-making and formal governance structures in order to build a sustainable and locally-owned GBV response in the sub-regions. During 2018, strides have been made between communities and GBV actors to increase access to reproductive health in crises, and to enhance systems for the prevention of GBV through mitigating risk factors and strengthening community protection strategies.
- 4 **Mainstream gender equality and GBV prevention and response:** All humanitarian partners are responsible for mainstreaming gender equality and GBV in all aspects of humanitarian interventions. Gender and GBV analysis and prevention remains inadequate across the sectors and geographical areas. Investment is required from all humanitarian partners and donors, not just protection-mandated agencies, to address GBV. Standardized approaches to gender equality and GBV prevention, mitigation and response across the Lake Chad Basin will furthermore improve outcomes for resilience/recovery programming for people living in crisis-affected areas in the future. In addition to increasing direct GBV services for survivors, capacity building for

all relevant stakeholders, including national and local authorities, security forces, displaced and host communities requires further strengthening.

5

Improve response monitoring:

The limited presence of GBV actors to meet the needs of the affected population can be strengthened by improved indicators and response monitoring, in addition to partnering with local GBV actors and accessing multi-year funding to deliver comprehensive GBV response services. Comprehensive data analysis is needed to inform advocacy, planning, implementation, monitoring, learning and evaluation of GBV interventions in order to expand successful approaches.

6

Strengthen prevention of sexual exploitation and abuse across the response:

Maintaining the civilian and humanitarian character of displacement sites and areas of population in need of lifesaving assistance is critical to ensuring access to protection and humanitarian assistance and to prevent incidents of sexual exploitation and abuse. Humanitarian access negotiations, civil-military coordination, and rapid response planning should be gender-responsive and consider GBV risks. In order to reach women and girls with life-saving protection and health response, humanitarian actors must be allowed to reach people in need of assistance in hard to reach areas.

Funding shortfall across the GBV response

Of the \$1.6 billion requested by humanitarian organizations in 2018 to provide lifesaving assistance and help communities rebuild their lives and livelihoods, only \$164,480,910 (10%) of the regional humanitarian response plan was for protection activities. The actual funding situation is even more dire: less than 4% of the funding required to prevent, mitigate and respond to GBV in the Lake Chad Basin has so far been received in 2018 ([Lake Chad Crisis HRP 2018](#)).

● ● ● ● The GBV AoR constitutes a focus area within the Global Protection Cluster. It is the global level forum for coordination and collaboration under the cluster approach on GBV prevention and response in humanitarian settings. The AoR has 20 core member organizations. UNFPA is the lead agency.