

EBOLA RECOVERY IN SIERRA LEONE

TACKLING THE RISE IN SEXUAL AND GENDER BASED VIOLENCE AND TEENAGE PREGNANCY DURING THE EBOLA CRISIS



Empowered lives.
Resilient nations.

Over 18 months, the project will help tackle the increase in sexual and gender based violence (SGBV) and teenage pregnancy during the Ebola crisis. It will help victims gain access to key services, like medical and judicial support, that were cut back during the crisis, especially for women and girls living on the fringes of society.

Expected results:

- **62 Family Support Units (FSUs) are strengthened;** capacity development and logistical support will ensure 62 FSUs are supported nationwide.
- **Victims of SGBV are empowered through access to basic services, including police investigations, court sittings and medical services;** 3,000 victims to be reached, 3,000 cases charged and to be 70% dealt with by the courts within one month after the complaint is made.
- **Full resumption of SGBV Saturday courts in Freetown, Kenema, Bo and Makeni to address the huge case backlog¹ by at least 70%.**
- **Support given to adolescent girls to access sexual and reproductive health information and services, with a specific focus on first-time young mothers.** More than 20,000 adolescent girls to be reached nationwide.

The Project will be led by UNDP, in partnership with UNFPA, UNICEF, the Ministry of Social Welfare, Gender and Children's Affairs, the Ministry of Health, the Sierra Leone Police, the Dfid supported Access to Justice and Security Programme, the International Rescue Committee² and a number of local NGOs.

Why it matters:

An assessment of case numbers and available services in 2014,³ managed by UNDP and partners, uncovered a increase in SGBV and in teenage pregnancy in the East of Sierra Leone during the Ebola crisis.⁴

Stress and strain on households, restrictions on movement⁵, reduced access to basic services and the closure of schools made young girls more vulnerable to abuse during the crisis.

The spike in teenage pregnancy is both a result of sexual offences against girls, but also consensual sexual relationships and a severe lack of sexual and reproductive knowledge and services, aggravated by the Ebola crisis.

Before the Ebola outbreak, gender based violence was commonplace in Sierra Leone. Over half of women in the country have admitted to having endured some form of abuse in their lifetimes. Violence against women is

¹ UNDP monitoring exercises have revealed that the SGBV courts have not been sitting since August

² The IRC set up the Rainbo Centres in Sierra Leone – one stop shops for survivors of SGBV

³ The assessment was carried out end of 2014/beginning 2015.

⁴ Official figures show a slight decrease but interviews with CSOs, communities and other stakeholders at local level suggest an increase. Some communities reported that the increase in teenage pregnancy was up to 65% but this is based on qualitative information.

⁵ Focus Group Discussions revealed changes in behaviour for men and women during the crisis. One change was that men spend more time at home due to restrictions on movement, closure of businesses and sources of entertainment and also economic factors. Restrictions on movement also restrict access to services and contribute to economic hardships which impact on SGBV levels.

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rooted in deep-set cultural norms and traditions that uphold gender-based discrimination and the inferior status of women.

Over the past decade, several strides have been made to prevent SGBV, empower victims to claim their rights and punish perpetrators. However, since July 2014, resources for key institutions and organizations working to address and prevent SGBV have been redirected towards the fight against Ebola.

Family Support Units (FSUs) are the body of the Sierra Leone Police mandated to investigate and refer cases of SGBV and offences related to juveniles. In an assessment of FSU capacity carried out by a local NGO, the Centre for Rule of Law and Accountability, it was uncovered that FSUs receive just over \$200USD per quarter from the Government budget to cover all operations and running costs.⁶ FSUs are currently understaffed, with only 20 social workers for the whole country and on average seven officers per station, when there should ideally be 20 per station. FSUs suffer from a lack of operational support and training of personnel is inconsistent as officers are frequently moved around within the Sierra Leone Police.

A quick injection of resources is needed for key service providers to support SGBV victims and young mothers. At the same time, a higher budget allocation and support from the Government to key service providers is needed over the long-term.

Civil society organizations will also be supported to ensure that survivors of SGBV and vulnerable women and girls in general, have the knowledge and the financial assistance to seek out relevant services. This intervention complements and is complemented by related UNDP initiatives to prevent SGBV through empowering women and also to restore the justice system post-Ebola.

Project activities:

The Project will run from June 2015 to December 2016 and will cover all 14 districts. The Project is in line with Pillar 8 of the Government's Agenda for Prosperity and complements the National Ebola Recovery Strategy.

1. Strengthening depleted and downgraded services

Logistical and capacity support will be provided to 62 FSUs to help them fulfil their mandate in responding to SGBV. A policing specialist on SGBV will be employed to work with the FSU at national level to build capacity in relation to investigations, detection of crimes and data harmonization. The FSU will also be engaged in community outreach to raise awareness amongst men, women and community leaders on gender equality, laws promoting women's rights and SGBV issues. This will not only help to prevent SGBV but will also contribute to building good relations between communities and the SLP at local level. SGBV survivors will be supported to access services through Family Support Units and will be given access to legal assistance through local civil society organisations.

The judiciary will be supported to resume the SGBV Saturday Courts – a mechanism established in 2011 to reduce the backlog of SGBV cases while ensuring protection of victims and witnesses. Extra support will also be provided to build the capacity of personnel. Oversight of the SGBV court functioning and personnel will be provided through court monitoring by trained CSOs under UNDP's Rule of Law and Access to Justice Programme.

Women's groups and associations at community level, many of which ceased functioning during the crisis,⁷ will be supported to re-form. These groups are not only often the first port of call for survivors of

⁶ This does not include salaries but it is not even sufficient to cover phone credit for FSU officers.

⁷ It was found that in the East many of these groups were discontinued due to restrictions imposed by the crisis and this was also cited by FGD participants as one of the reasons for the perceived increase in SGBV and also mediation rather than pursuing legal justice.

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SGBV but are also instrumental in helping to empower women at the local level through provision of community loans, advice and morale support.

A comprehensive study to better understand motivations, values and behaviours of populations at-risk and perpetrators of SGBV will be carried out through CSO partners in order to inform more innovative ways of behaviour change and SGBV prevention.

2. Finally, 3,000 victims of SGBV will be supported, through civil society partners, to access medical treatment and services. Responding to the increase in teenage pregnancy during the outbreak and the negative impacts of the crisis on access to Sexual and Reproduction Health services.

Platforms and spaces for vulnerable girls (approximately 10,000) in communities are set up and maintained to promote sexual and reproductive health and girls' education. Older adolescent girls will be engaged as mentors to promote sexual and reproductive health and to encourage girls to stay at school. A specific support group for first-time young mothers (with a focus on newborn care, psychosocial care, nutrition and returning to education) will be established. These support groups and mentorships are particularly important in the wake of Government policy preventing pregnant girls from attending school or sitting exams.

The Project will also help provide adolescent and youth-friendly services to adolescent girls through the rehabilitation of existing Public Health Units and training 2,000 health workers on adolescents and youth-friendly services. Community Outreach activities will also take place, to provide information and counseling on sexual and reproductive health and other adolescent health matter, reaching 15,000 girls nationwide. Targeted postnatal care for first-time young mothers including family planning services will be introduced and role models/mentors will be employed as volunteers at community level.

Budget:

Overall Budget: 2 million USD. Component 1: 1.2million USD. Component 2 above: 800,000 USD

Why UNDP?

UNDP has supported the justice sector in Sierra Leone, with a particular focus on access to justice for women, since the end of the civil in 2002.

UNDP brings a strong national and global pool of expertise and has built up solid working relationships with key state and non-state justice sector actors in the country. UNDP has been instrumental in some of the key achievements in the sector in recent years, including support to Family Support Units, the establishment of SGBV Saturday Courts, the production of Case Management Guidelines and Standard Operating Procedures for SGBV cases, and the passing of new legislation that upholds the rights of marginalised groups.

UNDP has a strong network of local civil society partners already working with communities on the ground on SGBV and women's rights issues. This Project would respond directly to research carried by UNDP and its partners in the field that has uncovered increases in SGBV and teenage pregnancy and the reduction of access to related services in the Eastern region.