

TRIPLE JEOPARDY: Protecting At-Risk Refugee Survivors of Sexual and Gender-Based Violence

INCLUSIVE SGBV PREVENTION – REFUGEES WITH DISABILITIES

1. AIM

This module aims to familiarize participants with the key principles involved in inclusive SGBV prevention, including the need to build on the existing strengths of refugees with disabilities.

2. USE

This module may be used as part of a two-day training (see *Model Agendas*).

TIME	METHODOLOGY	MATERIALS
1 hour	PowerPoint Brainstorming Discussion Group work	Flip chart Markers Inclusive SGBV Prevention – Refugees with Disabilities PowerPoint Projector Power Walk handout Communicating with PWD Handout

3. GENERAL BACKGROUND

SGBV prevention and risk mitigation refers to actions that stop SGBV from happening and/or reduce the risk that someone might be exposed to SGBV.

- There are a range of factors that increase the vulnerability of refugees with disabilities to SGBV, and a range of factors that are protective for SGBV.
- Despite refugees with disabilities facing added risks to SGBV, they are often excluded from SGBV prevention activities, including community awareness raising, sexual and reproductive health education and economic empowerment activities, which have been demonstrated to empower individuals and reduce their risk to SGBV.
- Refugees with disabilities are excluded from these activities due to attitudinal, physical, communication and structural barriers in society.

Helpful **definitions** for this and other modules include:

- **Inclusive SGBV Prevention:** A collaborative effort by all community and agency stakeholders, including traditionally marginalized groups, to end SGBV. Inclusive SGBV prevention requires that all members of the community are able to access and participate in SGBV activities.
- **Twin-Track Approach to SGBV Prevention and Response:** An approach used to ensure SGBV prevention and response is inclusive of all members of the community, including refugees with disabilities. This approach includes (1) targeted actions that empower refugees with disabilities and (2) mainstreaming actions that ensure refugees with disabilities are included in all other SGBV activities and initiatives (most commonly by removing barriers to access and participation).
- **Community-Based Approach to SGBV Prevention and Response:** Strategies, programs and services provided by a wide range of stakeholders in the community to mitigate risks of SGBV and help survivors address the medical, psychosocial, economic, legal and other consequences of SGBV.

Resources

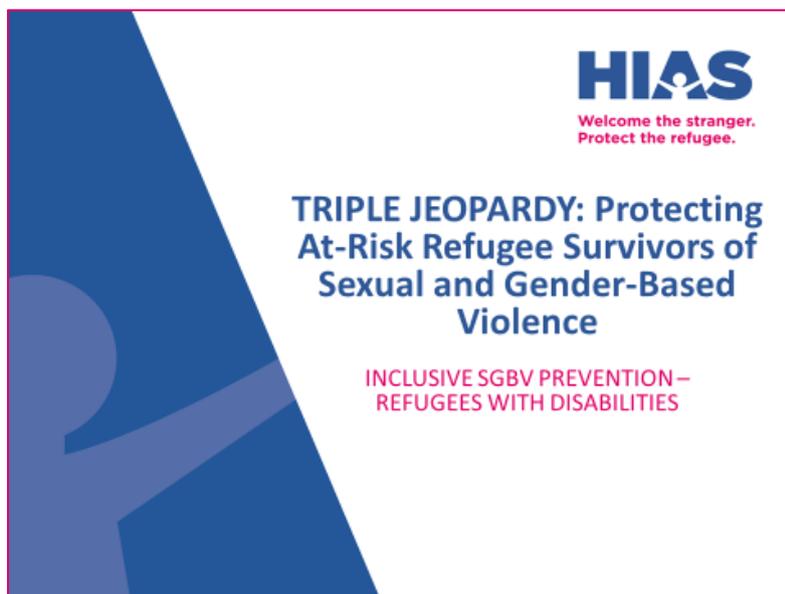
Triple Jeopardy Report, pp. 22-26.

Inter-Agency Standing Committee (2015) [Guidelines for Integrating Gender Based Violence Intervention in Humanitarian Action](#). Women's Refugee Commission (2015) [I See That It Is Possible: Building Capacity for Disability Inclusion in Gender-Based Violence Programming in Humanitarian Settings](#).

4. SLIDES

This section provides you background and resources for each PowerPoint slide in the module. It also gives you instructions to facilitate group discussions and exercises.

SLIDE 1: COVER



SLIDE 2: OBJECTIVES

Objectives

By the end of the session, participants will be able to

1. Identify and address barriers to refugees with disabilities participating in SGBV prevention
2. Introduce the Twin-Track Approach

TRIPLE JEOPARDY TRAINING | HIAS 2

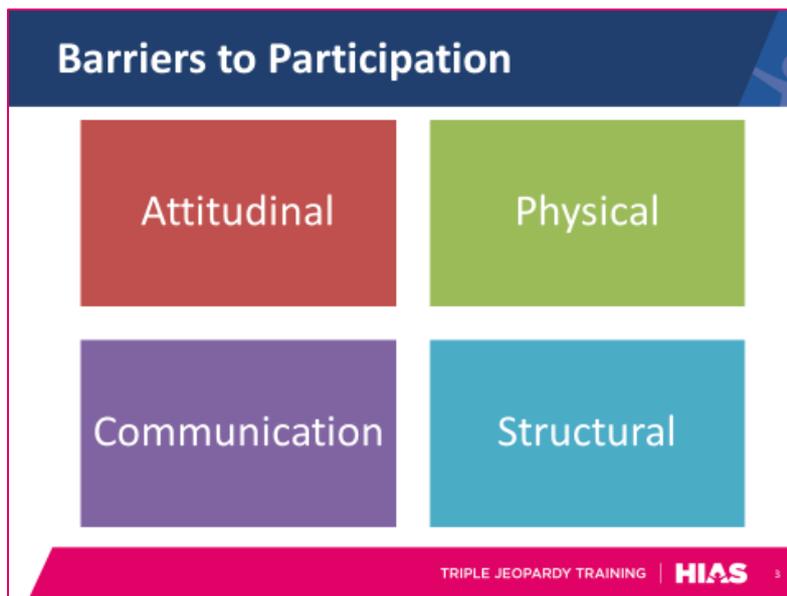
Background

- Review the objectives with participants.
- Explain that the module will focus on the meaning of “inclusive SGBV prevention.”
- To accomplish this, discussion will focus on the identifying and addressing barriers to access and participation in SGBV prevention activities and programs, including introducing the “twin-track” approach to SGBV prevention.
- These points will be re-visited in the last module focused on action planning.

Resources

Inter-Agency Standing Committee (2015) [Guidelines for Integrating Gender Based Violence Intervention in Humanitarian Action](#).

SLIDE 3: BARRIERS TO PARTICIPATION



Background

- There are four key barriers faced by refugee survivors of SGBV who live with disabilities wishing to engage in prevention programs: attitudinal, physical, communication and structural.

Resources

Triple Jeopardy Report

SLIDE 4: ATTITUDINAL BARRIERS

Attitudinal Barriers

- Viewed as unable to fulfill gender roles
- Intersectionality of disability, gender and refugee status (among other factors)
- Lack of awareness about the daily reality of PWD
- Taboos around sex and disability – often viewed as “asexual”
- Fear and stigmatization
- Assumptions about (in)capacity
- “Over-protection” – keeping people with disabilities separate from others

TRIPLE JEOPARDY TRAINING | HIAS 4

Background

Attitudinal barriers are created by society and are reinforced by community members, family and even staff in SGBV programs.

- People with disabilities are often viewed as unable to fulfill gender roles (e.g., women to cook and clean; men to conduct work outside the home). This affects their ability to find a spouse or partner, and their rights to raise a family. People with disabilities are often seen as “asexual,” and community, family members and staff may incorrectly assume they are not sexually active, overlooking them for sexual and reproductive health education programs.
- Discrimination on the basis of disability and gender can result in reduced economic opportunities, as well as exclusion from community committees that are running SGBV activities. This marginalization relating to disability intersects with discrimination related to gender and legal status. These multiple levels of exclusion are referred to as “intersectionality.”
- Community members, families and even staff running programs in the community may incorrectly assume that people with intellectual disabilities can’t learn new things, and so exclude them from opportunities to acquire protective knowledge and information about SGBV.
- Stigma and marginalization lead people with disabilities to be “invisible,” with little societal understanding of their lived realities, and how important SGBV prevention is to them.
- Staff running SGBV programs will often focus on the disability-related needs of people with disabilities, referring them to other actors, and failing to address the SGBV risks they face as women, men, girls and boys.
- Lastly, fear and stigmatization leads many people still follow a charitable model when working with people with disabilities, prioritizing separate and “special” programs and activities, and taking actions which will “keep them safe” from others. Research shows that this in fact increases their isolation and risk of violence.

Resources

Triple Jeopardy Report

Women’s Refugee Commission (2015) [I See That It Is Possible: Building Capacity for Disability Inclusion in Gender-Based Violence Programming in Humanitarian Settings.](#)

SLIDE 5: PHYSICAL BARRIERS

Physical Barriers

- Physical barriers in the environment
 - Stairs, lack of rails and ramps, uneven roads and paths, inaccessible toilet facilities
 - Lack of accessible and affordable transportation
- Lack of outreach by community members or service providers to refugees with disabilities

TRIPLE JEOPARDY TRAINING | HIAS 5

Background

Physical barriers include all physical obstacles in the environment, which reduce access and participation in SGBV prevention activities.

- Buildings, offices, clinics, neighborhoods, refugee camp squares or empty lots, among others, may not be accessible to people with difficulty moving or who use mobility aids and devices, such as wheelchairs. Please note – this also includes toilet facilities!
- People with disabilities may not be able to find suitable transportation and/or may have to pay more for it.
- When service providers are located far away from refugee-populated areas, rely on walk-in services and fail to engage in outreach activities, refugees with disabilities will be unable to participate in SGBV prevention activities.

Resources

Triple Jeopardy Report

Women's Refugee Commission (2015) [I See That It Is Possible: Building Capacity for Disability Inclusion in Gender-Based Violence Programming in Humanitarian Settings.](#)

Communication Barriers

- Using only one format to communicate information and messages
- Lack of awareness about respectful language
- Lack of training of key interlocutors on communication with people with disabilities
- Minimal spaces and few opportunities for consultation and dialogue
- Lack of translators for refugees with disabilities (including sign language)

TRIPLE JEOPARDY TRAINING | HIAS 6

Background

- Communications provided by service providers in written, spoken or visual formats may not be understood by people with vision, hearing, intellectual impairments and others. This is also true for refugees who are not literate in the language spoken in the country of asylum.
- Lack of awareness leaves many service providers and other stakeholders using degrading terms when referring to people with disabilities, leading to further marginalization and rejection.
- Refugees with disabilities' opportunities to express their views and contribute to SGBV prevention planning are limited.

Resources

Triple Jeopardy Report

Women's Refugee Commission (2015) [I See That It Is Possible: Gender-Based Violence Disability Toolkit. Tool #6: Guidance on Communicating with People with Disabilities.](#) Women's Refugee Commission (2015) [I See That It Is Possible: Gender-Based Violence Disability Toolkit. Tool #7: Accessible Information, Education and Communication \(IEC\) Materials.](#)

Structural Barriers

- Invisibility of people with disabilities = lack of data, lack of funding, lack of inclusive programming
- Programs encourage dependence rather than empowerment or community-based SGBV prevention
- Financial barriers prevent refugees with disabilities and caregivers from attending prevention programs

TRIPLE JEOPARDY TRAINING | HIAS 7

Background

- There is lack of support by service providers, government and international agencies for emerging leadership of refugees with disabilities.
- Service providers tend to manage SGBV prevention as well, leaving refugees with disabilities out, encouraging a charitable approach rather than empowered community-based leadership in SGBV prevention.
- Outreach by service providers engaging refugees with disabilities is limited. Refugees with disabilities are often invited to participate separately in sensitization or consultation exercises, further excluding them from integration within local leadership structures which may be more active in SGBV prevention planning or implementation.

Resources

Triple Jeopardy Report

Exercise: Power Walk

Group Activity

- Identify factors which increase and decrease this person's risk of SGBV
- What barriers do they face in accessing programs and/or opportunities that might reduce their risk of SGBV?

TRIPLE JEOPARDY TRAINING | HIAS 8

Materials

Power Walk handout

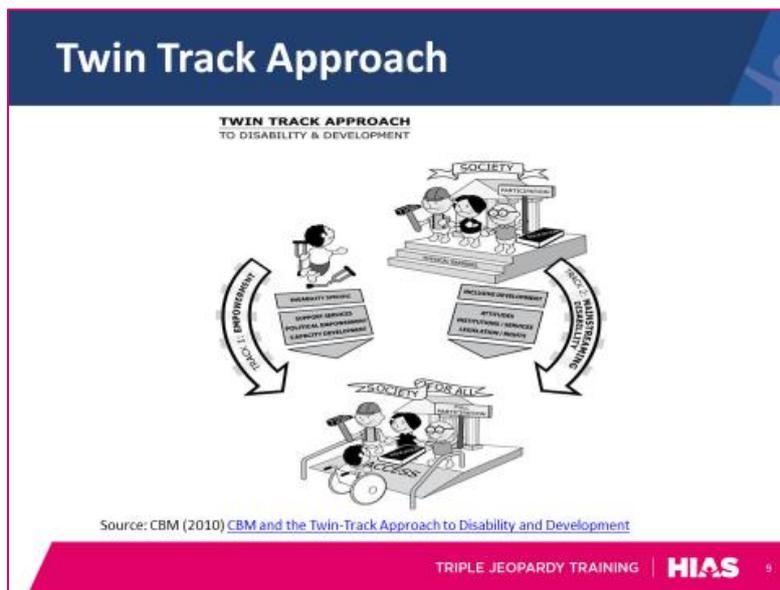
Group Activity (30 minutes)

- Explain that there are many factors that increase and decrease risk to SGBV. These factors happen throughout our lives and vary according to every individual.
- Ask two participants to role play in front of the group, one as Hodan and the other as Josephine, two refugee girls with disabilities.
- Ask one participant each to read information #1 on both Hodan and Josephine aloud.
- Read information #1 on Josephine aloud to present Josephine.
- Before moving on to the next information ask the volunteers playing Hodan and Josephine to step to forward if they feel they've gained an asset or stumbled upon a new barrier.
- Ask each volunteer to move accordingly while you are reading the new pieces of information.
- Write up the barriers on the flip chart.
- Open the floor for questions and comments at the end of the power walk.

Resources

Women's Refugee Commission (2015) [I See That It Is Possible: Gender-Based Violence Disability Toolkit. Tool #4: A Training Module for GBV Practitioners in Humanitarian Settings.](#)

SLIDE 9: TWIN-TRACK APPROACH



Materials

Flip chart and markers

Background

- We can use a Twin-Track Approach to address barriers, ensuring that people with disabilities have the same access as others to SGBV prevention activities.
- Track 1 uses targeted actions to empower and mitigate barriers facing refugees with disabilities. Track 2 uses mainstreaming to ensure refugees with disabilities are included in services for all.

Resources

CBM (2010) [CBM and the Twin-Track Approach to Disability and Development](#).

Track 1: Targeted Actions

- Targeted actions enable and empower people with disabilities, their families and caregivers (e.g., increasing their access to support services, healthcare, education, livelihood and social activities)
- They also include political empowerment activities, such as mobilizing refugees with disabilities into representative groups

TRIPLE JEOPARDY TRAINING | HIAS 10

Background

- Review the more detailed definition of targeted actions on the slide.
- Targeted actions are those that enable and empower people with disabilities, their families and caregivers (e.g., increasing their access to support services, healthcare, education, livelihood and social activities).
- They also include political empowerment activities, such as mobilizing refugees with disabilities into representative groups.
- Explain to participants that “targeted actions” are developed by service providers in close collaboration with refugees with disabilities, their families and caregivers, and should be done concurrently with mainstreaming (Track 2), so that people with disabilities are included in the same SGBV activities as others.
- An example would be the formation of representative group of people with disabilities, who will help to raise awareness about training and awareness raising on SGBV.
- Stress the importance of family members and caregivers in implementing targeted actions to include refugees with disabilities in SGBV prevention and response.

Resources

CBM (2010) [CBM and the Twin-Track Approach to Disability and Development](#).

Track 2: Mainstreaming Actions

- Modifying SGBV programs serving all people to be accessible to people with disabilities
- Ensuring people with disabilities participate at all stages of programming
 - Design, implementation, evaluation
- Working to remove attitudinal, communication, physical and structural barriers within SGBV programs and activities

TRIPLE JEOPARDY TRAINING | HIAS 11

Background

- Review the detailed definition of mainstreaming actions on the slide.
- Mainstreaming ensures that all SGBV programs are accessible and inclusive of refugees with disabilities. This includes addressing the attitudinal, communication, physical and structural barriers within SGBV programs and activities.
- Examples include making available sign language interpreters for medical interviews following an incident of SGBV or providing a vehicle or bus fare to bring refugees with disabilities to agency programming.

Resources

CBM (2010) [CBM and the Twin-Track Approach to Disability and Development](#).

The slide features a dark blue header with the title 'Exercise: Power Walk Continued...' in white. Below the header is a white content area with a blue border. The text 'Group Activity' is in blue. A bulleted list follows, with a red dot for the main point and red dashes for sub-points. At the bottom, a red footer contains the text 'TRIPLE JEOPARDY TRAINING | HIAS 12'.

Exercise: Power Walk Continued...

Group Activity

- Develop two strategies to address this barrier:
 - An empowerment strategy (Track 1)
 - A mainstreaming strategy (Track 2)

TRIPLE JEOPARDY TRAINING | HIAS 12

Materials

Flip chart and markers

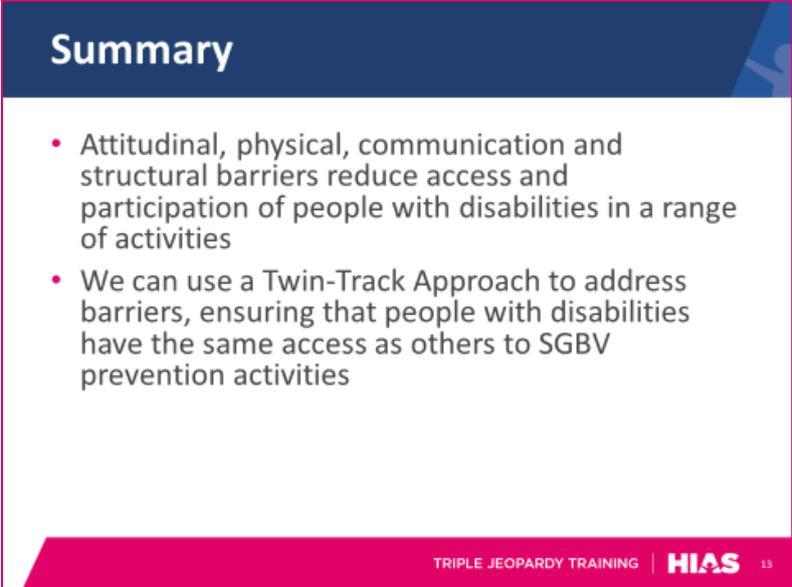
Background

- We can use a Twin-Track Approach to address barriers, ensuring that people with disabilities have the same access as others to SGBV prevention activities.
- Track 1 uses targeted actions to empower and mitigate barriers facing refugees with disabilities. Track 2 uses mainstreaming to ensure refugees with disabilities are included in services for all.

Group Activity (10 minutes)

- Split participants into four groups.
- Pick four barriers listed in the previous Power Walk activity, giving one to each group.
- Ask participants to develop two strategies – an empowerment strategy (Track 1) and a mainstreaming strategy (Track 2) – that help to address this barrier.
- Ask participants to report back from each group.
- Close by explaining that the Twin-Track Approach will be revisited in the next module.

SLIDE 13: SUMMARY

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Summary

- Attitudinal, physical, communication and structural barriers reduce access and participation of people with disabilities in a range of activities
- We can use a Twin-Track Approach to address barriers, ensuring that people with disabilities have the same access as others to SGBV prevention activities

TRIPLE JEOPARDY TRAINING | HIAS 13

Background

- Present the summary points.
- Ask participants for any questions or requests for clarification.