# Training of Somali GBV Working Group chairs, co-chairs and focal points



Theme: Strengthening Effective Coordination for Tangible Results 22nd to 26th of June 2015



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#### **BACKGROUND**

UNFPA, with funds from OFDA/USAID, is currently strengthening the technical capacity of the Gender based Violence Working Groups (GBV WGs) from South Central, Somaliland and Puntland. The central coordination, led by UNFPA as national chair in Nairobi, and co-led by Save Somali Women and Children as the newly elected co-chair, is coordinating the field in organizing a five-day technical capacity strengthening training for all GBV chairs, co-chairs and focal points from across the country.

The Gender-Based Violence Working Groups (GBV WGs) in the field are also mainly chaired and co-chaired by the respective line ministries, UN agencies, and Non-Governmental Organizations (both local and international) across the country. However, some of the GBV WGs are not effectively functioning due to insecurity and lack of technical capacities in coordinating members and supporting implementation and reporting of activities. In addition, some of the Working Groups are newly established.

Furthermore, with the GBV WG coordination, GBV Information Management System (GBVIMS), Case Management, Clinical Management of Rape (CMR), Female Genital Mutilation (FGM) reporting are yet to be successfully achieved by some of the major GBV WGs in the field. All these require comprehensive technical and knowledge capacity strengthening, which the five-day workshop will start addressing.

The five-day technical capacity building training with funds from OFDA/USAID focused on promoting Human Rights Based Approach to GBV programming, and implementation of results based management with advocacy, networking, negotiation skills, leadership skills, proposal writing, presentation skills, and communication for GBV coordinators.

#### **OBJECTIVES**

The main objective of the training was to enhance the capacity of GBV coordinators on the application of Human Rights and Results based Management Approaches to GBV Prevention and Response programming, evidence based advocacy, networking, negotiation and leadership skills, proposal writing, presentation skills and communication

#### <Specific Objectives>

- To build the capacity of GBV chairs/co-chairs and focal points on specific areas of Human Rights and Results based GBV programming and reporting
- To agree on collective tangible and concrete actions that will strengthen GBV coordination and result based reporting across the country
- o To review and agree on realistic implementation and review joint monitoring plan
- o To discuss next steps with clear road map on improving on delivery of results

#### **EXPECTED OUTPUTS**

- o Technical knowledge of all GBV chairs, co-chairs and focal points is built
- Improved coordination mechanism of GBV WGs in the field for tangible results in GBV Prevention and Response
- The visibility of gender programming of UNFPA in Somalia is widely enriched and strengthened

#### **OFFICIAL OPENING**

The national chair, **Ms. Isatu Sesay-Bayoh** from UNFPA Somalia, welcomed the participants to the training, together with the national co-chair, Ms. Halima Ali Adan from Save Somali Women and Children. Both the chair &co-chair stressed the importance of the training and the role of the field-based chairs, co-chairs and focal points in strengthening the coordination function in the field. The meeting kicked off with prayers, followed by a round of introductions by the participants with their names and roles in the GBV WGs.

**Dr. Achu Lordfred**, Reproductive Health Advisor and officer-in-charge of UNFPA Somalia delivered welcome remarks on behalf of UNFPA and the Deputy Representative/OIC. He stated in his statement that the training came at the right time when the chairs, co-chairs and focal points of the field-based GBV WGs were selected. He emphasized the interlinkages of reproductive health (RH), GBV, clinical management of rape (CMR) and female genital mutilation (FGM) and the need to create a strong referral mechanism among them.

Mr. Abdullahi Mohamed, Regional Program Specialist of USAID/OFDA, attended the opening of the training and delivered a statement. He thanked UNFPA for organizing this significant training for the chairs/co-chairs and taskforce (TF) members to build their capacity to enable them to carry out their core functions successfully. He reconfirmed OFDA/USAID's continuous support to the capacity building for the GBV WG chairs/co-chairs and the efforts of reducing GBV across the country. He further stated he would hope that the current capacity building project by UNFPA will be able to synchronize the GBV data collection and reporting that will give clearer picture of GBV trend in Somalia, and this will be possible if the capacity of chairs/co-chairs in terms of coordination is strengthened. He concluded his remarks by appreciating the opportunity of meeting the chairs/co-chairs in person.



**Mr. Ahmed Jama**, GBV regional coordinator for Somaliland and co-chair of Hargeisa GBV WG from UNFPA Somalia, facilitated expectations for the training (Annex 4) and ground rules (Annex 5):

The national chair facilitated the power walk and following discussions. Participants were assigned roles of different stakeholders for GBV case and asked to stand where they think the power of their assigned role would be. Participants were requested to observe the power

positions of the different actors who are assisting the survivor and her mother, and discussed why the power of certain stakeholder is considered as higher/lower as others and how it should be in reality in handling the GBV cases.

Key issues and lessons that emerged from the power-walk exercise included:

- The competition among the service providers makes the survivor confused. Respect and wishes of survivor is often overlooked.
- Different understanding on the referral pathway by the service providers, which leads to un-harmonized approach when referring the GBV cases. Service provision and decision-making are distanced and separated in the reality
- The role of the government as policy makers and enactors of the law should not be underestimated.
- It was suggested that those with more power should come closer to the survivor as they have power to support the survivor
- Effective GBV prevention and response can be achieved only by working together.
   In Somalia, all the systems exist, and the issue is more about how to link them together and let all of them engage.

#### HIGHLIGHTS OF PRESENTATION AND KEY ISSUUES EMERGED

## <u>Understanding of Coordination and Presentation of GBV WG Terms of Reference</u> (ToR) and Strategy

The national chair briefed participants on the background for the development of the Strategy. It was mentioned that in mid-2013, the process of consultation in the field had taken place so that all the members would have a say in the Strategy development. The strategy was highlighted to be a document for implementation by everyone who is interested in supporting GBV prevention and response both in humanitarian and development contexts. In January 2015, the Strategy was presented to the donors. She also stated that only one and a half year remains to implement the Strategy and we need to hasten the implementation.

Ms. Bahsan Ahmed Said, co-chair of GBV WG Garowe from UNFPA, highlighted the key focus areas of the Strategy. The presentation was clear that the strategy has linkages with the Somali Compact Peace Building and State Building Goals, the Joint Communiqué on the prevention of sexual violence (May 2013) and the National Action Plan to End Sexual Violence in Conflict (NAP ESVC). The strategy has 4pillars, namely: (1) prevention; (2) response; (3) access to justice and rule of law; and (4) coordination.

The national chair presented the updated harmonized ToR, including core functions, membership and its criteria, coordination leadership and method of election, accountability, decision-making, communication and reporting. She mentioned that this capacity building training for the chair/co-chairs is one of the outputs of the GBV WG strategy for 2014-2016.

The national chair also briefed on the updated organigram of GBV WGs and taskforces (TFs) with new chairs/co-chairs and focal points. A question was raised whether it would be possible to include Ministry of Justice (MOJ) in the co-chairs of FGM TFs in South Central and Somaliland, following the examples of Puntland. This idea was proposed to the field for further discussion. Somaliland participant also mentioned that Ministry of Religious Affairs is another critical player in terms of FGM legal framework.

Another question raised was related to the government representation for GBV WG, FGM TF and CMR TF. The national chair responded that under the global Area of Responsibility, UNFPA and UNICEF provide leadership role for GBV WG. Therefore, in the country with humanitarian settings, UNFPA is usually the one to be requested to lead, and if there is no presence of UNFPA or UNICEF, UNHCR could take up this role on behalf of Protection Cluster. The national chair stated that Somalia is still in the humanitarian and transitional phases, and hence, the global Area of Responsibility arrangement applies. The same approach is applied for FGM TF. While the governments are leading at the field level, UNICEF and UNFPA provide technical support from Nairobi because of the UNFPA-UNICEF Joint Programme. CMR TF was established to meet the acute needs of the stockout, and the involvement of the Government can be discussed during the week.

#### **Introduction of Human Rights Based Approach to GBV Programming**

The national chair led the presentation on Human Rights Based Approach (HRBA) to GBV Programming. The session started with the discussion on definition of HRBA as summarized below:

#### What is human right?

- Natural rights entitled to a person
- Rights enshrined by international bodies (UN, state parties, human rights groups)
- God-given rights

#### What are some of the examples of human rights?

- Basic rights (education, right to life, shelter, health, security, religion, freedom of speech, vote, justice, property, marriage, participation, free from slavery, citizenship)
- What constitutes violation of rights?
- Denial/deprivation of above-mentioned rights
- States/duty-bearers not fulfilling the obligation
- Misuse of power
- Cultural barriers, leading to exclusion and voiceless

#### What is your understanding of HRBA?

- Standard used to protect the dignity of people
- Empower rights-holders to demand for their rights from duty-bearers
- New approach that captures all human rights principles
- Basing our interventions on the human rights principles
- Ensure programmes to apply all the human rights principles
- Pay attention to population dynamics and different needs of women, men, girls and boys

Following presentation included necessity of HRBA, key international instruments, basic principles, steps and benefits of HRBA. Key issues and lessons emerged from this session include:

- Importance of further strengthening the HRBA approach in the programming
- Need to link HRBA with logical frameworks and theory of change and to have human rights-related indicators in the programme
- Need to pay particular attention on the marginalized group (the most marginalized)
- Reflection on how we are engaging communities in the project implementation
- Difference between "needs" and "rights": while needs can be negotiable, rights are not negotiable

Group works were conducted and each group was assigned the following task:

- Checklist for GBV prevention or response program for situation assessment and analysis, M&E
- 2. Focus on situation assessment and analysis/planning and design stage: how do you ensure inclusion of HRBA principles
- 3. Focus on implementation and M&E stage: how do you ensure inclusion of HRBA principles
- 4. Identify rights-holders and duty-bearers (who they are and their claims)

#### **Results Based Management**

**Mr. Ezekiel Kutto**, Monitoring and Evaluation (M&E) Analyst of UNFPA Somalia, led the session. The presentation focused on the concept of the Results-Based Management (RBM), results and results chain, key features of RBM and advantages & challenges in implementing RBM. It was emphasized that results are critical as we need to know where we are going before we start moving. When understanding different types of results (e.g., outputs, outcomes and goal/impact), the example of this GBV WG capacity building training was used.

GBV WG capacity building training

Output: (1) Training completed, (2) Capacity strengthened, (3) Knowledge and skills increased

Outcome: (1) Improved coordination of GBV WG, (2) Improved reporting

The linkage of RBM with resource mobilization and effective proposal writing was mentioned. Having clear RBM framework in the proposal will serve as an advantage, and this is becoming a standard. Logical Framework and Theory of Change were introduced as tools for RBM as they can present all the key components of results in a clear and concise way. The group work was carried out for Output and Indicator Formulation. Participants were divided into 5 groups, and each group-identified weakness of output statements provided, suggested improved output statements and also suggested indicators for the output statements. From the presentations of the group works, it was highlighted that outputs need to be specific, and that output statements need to be past tense.



(Training participants listening to the presentation)

#### **Proposal Writing**

**Ms.** Eri Taniguchi, national GBVIMS TF chair from UNFPA, presented on proposal writing skills. The participants first shared their understanding of what proposal is as summarized below:

• Framework to summarize your interventions

- Document which states problems and how to address solution with clear timeline and budget
- Summary of actions and methodologies
- Appeal for funding opportunities
- Tool for advocacy and lobbying
- Creation of interest

The presentation topics covered the importance of proposal (both for resource mobilization and project implementation), stakeholder analysis and involvement of stakeholders in proposal development, elements of and tips for an effective proposal. To conclude the session, participants were divided into 4 groups to prepare a brief project proposal based on the learnings from the session. Four proposals were prepared on emergency GBV prevention and response in Lower Shabelle, reduction of early marriage, one-stop centers in Mogadishu, and eradication of FGM in Galkayo. When proposals were presented to the group, they were reviewed by a separate group as a donor, who provided feedback from a donor's perspective. These four proposals will be combined and presented to OFDA at the closing of the training.

#### Standard Operating Procedures, Service Mapping and Referral Pathways

**Ms.** Halima Ali Adan, the national co-chair from SSWC, presented highlights of the Standard Operating Procedures (SOP), including what SOP is, the necessity of having SOP, process of SOP development and contents of SOP. Global SOP template was also shared with the participants. The role of the government in SOP development and implementation needs to be discussed, which was also a recommendation from the Regional Emergency GBV Advisor.

**Ms. Domenica Costantini** from DRC shared her experiences of conducting service mapping for GBV service providers. She briefed on the objectives of the service mapping, what it is, methodology, tools to be used, and service mapping outcomes.

**Ms. Alice Mangwi,** GBV focal point for Kismayo from ARC, presented on referral pathways. She explained on what the referral pathways are, key services constituting the pathways, and introduced both good and bad examples of referral pathways.

After the three presentations, participants discussed on how GBV Working Groups can harmonize the tools and move forward to develop/update service mapping and SOPs. At the national level, discussion has been taking place to have joint SOPs for GBV WG and Child Protection WG, and it was agreed that joint SOPs will be developed at the field level, as well. Template for SOP, service mapping and referral pathways will be shared with field WGs for their references.

The actions and timelines were agreed for each location to finalize SOP, service mapping and referral pathways (refer to the section on action points).

#### Introduction and discussion on GBVIMS and Case Management

**Mr. Hussein Hassan Alio**, GBVIMS Coordinator for South Central from UNHCR, provided an overview of GBVIMS. The presentation covered tools and forms used under GBVIMS, classification of GBV incidents, GBVIMS data flow, and GBVIMS in Somalia. After the presentation, discussion took place how to strengthen GBVIMS as currently, GBVIMS data is regularly shared with the national level only from South Central (monthly) and Garowe (quarterly).

Discussion for each region on the status of GBVIMS was discussed as follows:

#### Galkayo:

- ISP was signed in 2011
- Monthly report has been collected but not consolidated due to the request by the Government to share identifying data
- There is an opportunity to start anew with the new Governor, and hence, GBV WG in Galkayo needs to arrange a meeting with the new Governor and MOWDAFA

#### Bosaso:

- Kamal promised to share all the outstanding GBVIMS reports with the national level Garowe:
- Currently, reports are consolidated quarterly, but it was agreed for all locations to consolidate the reports monthly

#### Somaliland:

- GBVIMS training was organized by DRC with support from UNFPA in June. It was decided that GBVIMS TF will be set up, which will be formalized by MOLSA and GBV WG.
- ISP is an urgent need, and it was agreed that South Central regional ISP will be used as a template.

**Mr. Hussein Osman Hussein** from UNICEF presented on GBV case management. The presentation covered definition of case management, core characteristics and steps of case management, principles, and progress achieved and challenges faced in terms of case management in Somalia.

#### Generating Evidence/Research Skills for GBV Programming and Reporting

**Ms. Carolyne Njue,** Senior Technical Advisor from Population Council, led this session. She introduced the concept of research and 7 steps of research, as well as tips for good research and programme skills. All the seven steps for research were extensively discussed and practical exercise on building self-evaluation skills for GBV research and programming was carried out.

#### Presentation on Advocacy and Networking

**Ms. Bahsan Ahmed Said**, co-chair of GBV WG Garowe from UNFPA, briefed the participants on advocacy, including definition, the need for advocacy for GBV coordinators, advocacy and other related approaches, and steps. Group exercise to identify required steps for advocacy campaign was conducted. It was followed by a brief presentation on networking, what it is, its importance, and tips for successful networking.





(Group work on advocacy steps)

#### **Humanitarian Financing**

**Ms. Elizabeth Kigen**, representing the Protection Cluster, presented on humanitarian financing, including categories, objectives of different funds, eligible organizations, agencies in charge of the funds, process of where to send proposals, what they look for in proposals and online data base. There are 2 types of pooled funds: (i) country based pooled funds: ERF/HRF, which is to meet small unforeseen needs, and CHF, which is allocated twice a year, and (ii) Central Emergency Response Funds (CERF) for saving lives during early response.

She also briefed on some criteria used for proposal review, which are overall project rationale, integrated proposal, geographical location, technical expertise of the organization, gender marker, coherent log frame, realistic budget and number of beneficiaries. For CHF, Protection Cluster is available to discuss on proposals. It is recommended that especially local NGOs to ask for review by INGOs and other partners. She emphasized that the attention is currently being paid to make the process for humanitarian financing to be inclusive, especially for local NGOs.

#### Communication for Effective Coordination and Harmonized GBV Messages

**Ms. Pilirani Semu-Banda**, Communications Specialist from UNFPA, led the session. She stressed the importance of "one voice" and the need of communications to be fully integrated in the programming as communications is not only about taking photos. She also explained eight essential elements for communications.

Following this, **Mr. Ahmed Jama**, GBV Coordinator for Somaliland and co-chair of GBV WG in Hargeisa from UNFPA, and Pilirani presented highlights on the harmonized GBV messages, which are meant to strengthen communications with one voice for the GBV WGs. The two briefed on the background as well as process of development of the harmonized messages, which was participatory and consultative, addressing the needs expressed by the field. The extensive discussion was held regarding the role of GBV WG chairs/co-chairs/focal points in the implementation, monitoring and reporting as summarized below:

- General consensus that having the harmonized messages will help us to communicate with one voice
- How to make the harmonized messages convincing and well-accepted
  - One-on-one communications
  - Validation and pre-testing in the field
  - Using the local resources for roll-out (including local artists)
- Need to evaluate the effect of messages both in short and long-terms, thus development of clear M&E plan is required
- Role of GBV WGs in implementation and monitoring
  - -Dissemination
  - -Organize sessions to inform GBV stakeholders on the use of the messages
  - -Endorsement letters by the line Ministries
  - -GBV WG coordinators to monitor the usage
  - -Develop one-page communications strategy

#### New Reporting Template for Protection Cluster/GBV WG/CP WG

Ms. Elizabeth Kigen, representing the Protection Cluster, did a presentation on the new harmonized reporting template for Protection Cluster, GBV WG and CP WG. The new template is developed to avoid multiple reporting by member organizations to different

cluster/working groups and multiple counting of the beneficiary numbers. Discussion followed the presentation in terms of how to roll-out the new reporting template as follows:

- It was explained that CPWG will continue collecting data on GBV for children. If so, it needs to be clarified with PC and CPWG on double-counting and how to share information on GBV cases for children with GBV WG.
- GBV WG does not have a tool to consolidate and analyze the data collected
- The participants strongly expressed a need of training on the usage of the new reporting template. Protection Cluster Information Management Officer will support the training, and PC is planning for this.
- A question was raised regarding the feasibility of start using the template from June reporting.
   Elizabeth clarified that it might be more difficult for PC and GBV WG as the template is new
   for them, while CP WG has been using the similar template. She will internally discuss and
   get back to the members on the actual starting date.

#### Use of Monitoring Tools for GBV Reporting

**Mr. Ezekiel Kutto**, M&E analyst of UNFPA, presented on monitoring and evaluation, including what constitutes monitoring, linkage between monitoring and management, monitoring tools and how to use them, and importance of monitoring by indicators.

#### Clinical Management of Rape Protocol

**Dr. Achu Lordfred**, Reproductive Health and Maternal Health Advisor from UNFPA, guided through the participants on the proposed protocol for clinical management of rape (CMR). He introduced his presentation with the contextualization of rape, and also referred to the responsibility of health care providers, essential components of medical care for rape cases from human rights perspective, and issues to be considered for the development of CMR protocol, including standardization and harmonization, sustainability, quality of services, commodity distribution, ownership, and coordination among different line Ministries.

Following **Dr. Achu, Ms. Eri Taniguchi,** national GBVIMS TF chair from UNFPA, briefed the participants on the process of the development of CMR protocol in Somalia and the way forward.

#### Post-Rape Treatment Kits

**Dr. Ibnou Diallo,** Reproductive Health Commodity Security Advisor from UNFPA, provided an overview of the post-rape treatment kits (PRTK). He explained its composition, content, and system in place for its management. Ms. Eri Taniguchi, national GBVIMS TF chair from UNFPA, also briefed on the current arrangement of PRTK request and reporting under CMR TF.

It was elaborated by Ibnou that UNFPA is currently supporting the transitional process, where Ministries of Health will be in charge of the RH commodities management. Streamlining process for ordering, storing and reporting the RH commodities is being undertaken. CMR TF and RH WG will continue sharing information and discuss on consolidated request and reporting arrangement for PRTK.

#### Linkage with RH WG, FGM TF and other Clusters

**Dr. Achu Lordfred,** Reproductive Health and Maternal Health Advisor from UNFPA, presented on RH WG in order to identify and discuss on possible linkages with RH WG and GBV WG. It was stressed and agreed that RH WG and GBV WG need to work together. RH WG in Nairobi has a standing agenda of updates from CMR/FGM TFs, and this good practice was suggested to be replicated in the fields. It was also emphasized that health is an integral part of GBV referral pathways.

## <u>Presentation of FGM Indicators and the Role of FGMTF and GBV WG in supporting its Implementation and Reporting</u>

**Ms. Charity Koronya,** the national FGM TF co-chair from UNICEF, and Ms. Fatima Farah Handulle from UNICEF presented the indicators set for the UNFPA-UNICEF Joint Programme on FGM. Following the presentations, active discussion took place on sharing experiences, good practices and challenges.

Key issues and lessons emerged from the discussion include:

- Puntland: it was difficult to discuss on FGM issue, but it is changing slowly. The
  issuance of Fatwa was one of the biggest achievements. The efforts have been taking
  place to include GBV-related indicators in the Health Management Information
  System (HMIS). Ministry of Justice drafted the Sexual Offences Bill, which will be
  submitted to the Parliament soon.
- Somaliland: with support from UNFPA, FGM policy is developed in a consultative way.
   However, this still remains as a draft, and MOLSA is struggling to have it approved.
   In Somaliland, Type III is decreasing, but Sunna type is still ongoing.
- South Central: Federal Government is committed to address GBV, including FGM. Ministry of Religious Affairs is conducting community awareness-raising activities, and MoWHRD is working with the male network and media for community engagement. FGM policy is developed with support from UNICEF. The National Action Plan to end sexual violence in conflict. With support from UNFPA, the Sexual Offences Bill is developed, and will be finalized soon. Recently, the Attorney-General made statement to criminalize FGM. FGM issue is integrated in the midwifery curriculum. FGM TF was launched at the end of May, and MoH and MoWHRD cochair the TF.
- Requests are being made to include GBV indicators in HMIS from all the zones. Field GBV WGs need to lead the consultation process for this.
- PL has a good practice of involvement of the Ministry of Justice (MoJ). Somaliland and South Central could follow this and strengthen the involvement of MoJ.

#### Linkage with Child Protection –the best practical way forward

**Ms. Halima Ali Adan**, the national GBV WG co-chair from SSWC, and Ms. Charity Koronya, the national FGM TF co-chair from UNICEF, presented key points for linking GBV with child protection system as follows:

- Strengthen national data collection systems i.e. GBVIMS, CPIMS and 4W matrix
- Avoid duplications of efforts by sharing information, i.e. having common referral pathways, service mapping, SOP
- Coordination with other sectors such as security and justice is crucial in order to foster a comprehensive strategy
- GBV and CP point of view to be reflected in CMR TF and one-stop centers for service provision
- CP and GBV aspects to be integrated for training of chairs/co-chairs
- GBV WG and CP representations required in both monthly meetings
- PC, GBV WG and CP WG streamlining reporting tools
- Information Sharing Protocol is developed by CPWG and GBV aspect needs to be reflected
- Harmonization of GBV/CP awareness messages

## The Role of the Chairs, Co-chairs and Focal points in Supporting the Implementation of the GBV WG Consolidated Plan

**Ms.** Halima Ali Adan, the national GBV WG co-chair from SSWC, presented the consolidated GBV WG plan for 2015. Action points were agreed by the participants as provided in the section for the action points.

## The Role of the Government in Ensuring GBV Prevention and Response is better Coordinated and Reported

The government participants from all the zones jointly made a presentation on roles nad responsibilities of the government as follows:

- Enhancing coordination mechanisms, particularly linking working groups such as GBV WG, RHWG,CPWG, FGM taskforce, Gender cluster and JWG
- Advocate within the government on the development and enactment of policies and other legislations, such as, sexual offence bills, FGM policy and act, gender policy and action plan, family law policy, alternative care policy and act, national action plan for children, juvenile justice act and CEDAW ratification
- Strengthen the justice delivery mechanism to comprehensively address sexual abuse and violence against women
- Contribute to the development of CMR protocol and medical support Oversee the adherence of human rights based approach, survivor centered approach and community based approach by the service providers
- Validation of harmonized GBV messages
- Improving supply management of RH kits( kit3 and 9)
- Development of anti-medicalization strategy and code of conducts
- Enhance midwifery and nurses school curriculum
- Development of harmonized GBV curriculum for schools

After the presentation, below suggestions were made:

- Government co-leads to organize the similar training for government officers/colleagues
- To include government's commitment towards the total abandonment of FGM

#### Presentation and Discussion on Coordination

**Ms. Bahsan Ahmed** Said, co-chair of GBV WG Garowe from UNFPA, presented on coordination, including specific coordination activities, coordination mechanisms, accountability, and the functions of GBV coordinators.

#### Communication Channels (GBVIMS, Minutes and Reporting)

**Mr. Hussein Hassan Alio,** GBVIMS Coordinator for South Central from UNHCR, Ms. Halima Ali Adan, the national GBV WG co-chair from SSWC, and Ms. Eri Taniguchi, national GBVIMS TF chair from UNFPA, led this session to clarify the reporting channel for GBV WG and GBVIMS. Meeting minutes template will be shared in the flash disk for the field WGs to follow.

#### Introduction on the Use of Blue Jeans and Group Email

**Mr. AyubMohamud,** ICT Analyst from UNFPA, introduced the participants on how to use blue jeans, which is software-based video conference tool, and group e-mail. Group e-mail address for Somali GBV WG is <a href="mailto:gbvworkinggroup@gmail.com">gbvworkinggroup@gmail.com</a>.

#### **CLOSING AND CERTIFICATION**

The closing of the training was attended by Mr. Thomas Tauras, Director of OFDA, Mr. Abdullahi Mohamed, Regional Programme Specialist of OFDA, and Ms. Grace Kyeyune, Deputy Representative and OIC of UNFPA. It had presentation on action-oriented outcomes to strengthen coordination towards GBV prevention and response by Ms. Alice Mangwi, GBV focal point for Kismayo from ARC. She summarized the key topics covered by the 5-day training, major outcomes and actions points committed by the participants.



#### **KEY OUTCOMES:**

- -Improved knowledge on key areas that will contributed to the rights- and results-based prevention of GBV and ensure timely and adequate response to survivors
- -Coordination linkages with the government, civil society, child protection and reproductive health working groups agreed with clear actions on implementation
- -Coordination tools harmonized (SOPs, referral pathways, service mapping, improved reporting tool, summarized checklist on application of GRBA, minutes template, finalized TOR, common log frame and monitoring tool)

**Mr. Hussein Hassan Alio,** GBVIMS Coordinator for South Central from UNHCR, presented a consolidated GBV proposal as an outcome of the group work carried out for the proposal writing session.



**Dr. Mina Hassan** from the Ministry of Women and Human Rights Development represented the Government and delivered a statement. She reiterated the government commitments presented in the previous session, and also expressed the appreciation towards OFDA and UNFPA for bringing the participants together to strengthen the capacity on GBV coordination and programming.



**Mr. Thomas Tauras**, Director of OFDA, congratulated the participants for completing the 5-day training. He expressed his delight in meeting with the chairs, co-chairs and focal points of GBV WGs and TFs, and encouraged them to apply the skills, knowledge and tools gained and agreed during the training.

The training certificates were handed over, together with the flash disk, by Mr. Thomas Tauras and Ms. Grace Kyeyune. Mr. Abdikadir Dahir from WARDI delivered an appreciation statement on behalf of the participants, stating the gratitude towards this first ever comprehensive training on GBV coordination and programming and stressing the commitments to translate the knowledge gained into actions. The training was closed with the group photo.



#### **ACTION POINTS**

Action Points	Timeline	Responsible Persons
HRBA		
Application of the HRBA checklist developed in GBV Programming in the field	31 December 2015	All the chairs/co-chairs and focal points
SOP and Service Mapping		
To share the templates on SOP, service mapping and referral pathways with the field WGs and consolidate data	26 June 2015	National GBV WG chair/co-chair
Share the service mapping with the national GBV WG	30 July 2015	Somaliland: Ahmed (UNFPA), Domenica (DRC) and Hussein (UNICEF) in consultation with MOLSA (MOLSA to play an oversight role) Puntland: Amina (UNHCR), Penina (UNFPA) to lead for Galkayo Bahsan (UNFPA), Fatuma (UNICEF) to lead for Garowe Kamal (UNICEF) and Mohamed (GRT) to lead for Bosasso South Central: Mursal (UNFPA), Dr. Keif (MoH), and Sadia (MoWHRD) in cooperation with INTERSOS
To share the updated SOPs with the national GBV WG and Child Protection Working Group	31 August 2015	Somaliland: Ahmed (UNFPA), Domenica (DRC) and Hussein (UNICEF) in consultation with MOLSA (MOLSA to play an oversight role) Puntland: Amina (UNHCR), Penina (UNFPA) to lead for Galkayo Bahsan (UNFPA), Fatuma (UNICEF) to lead for Garowe Kamal (UNICEF) and Mohamed (GRT) to lead for Bosasso South Central: Mursal (UNFPA), Dr. Keif (MoH), and Sadia (MoWHRD) in cooperation with INTERSOS
GBVIMS		
All regional data to be collected monthly by regional GBVIMS coordinators (Hussein for South Central, Abdikani for Puntland and Abdirisak for Somaliland), who will further share the consolidated data with the national level	continuous	Regional GBVIMS coordinators with data gathering agencies
Share the South Central GBVIMS ISP and Incident Recorder to be used as template/reference for other zones	26 June 2015	Hussein (UNHCR)
To support GBVIMS training in other zones and share experiences of South Central. Official request needs to be made for this support.	30 November 2015	Hussein (UNHCR) UNFPA and UNICEF for official request

To send all the outstanding monthly GBVIMS reports for Bosaso and Galkayo respectively to the national level for consolidation	31 July 2015	Kamal (UNICEF) and Amina (UNHCR)
To hold a meeting with MOWDAFA Minister on GBVIMS	10 August 2015	Bahsan (UNFPA) and Kamal (UNICEF)
To hold a meeting with the Galkayo Governor and MOWDAFA to discuss on GBVIMS in Galkayo	31 August 2015	Mursal (UNFPA), Amina (UNHCR), Penina (UNFPA), Bahsan (UNFPA), Kamal (UNICEF) and Abdikani (UNICEF)
To set up GBVIMS TF for coordination in Somaliland	5 July 2015	Ahmed and Abdirisak (UNFPA) together with MOLSA and DRC
Advocacy		
To develop GBV WG advocacy strategy	15 August 2015	GBV WG chair/co-chair
<b>Communications and GBV Ha</b>	rmonized Mes	sages
To agree on the focus theme per quarter for communications	continuous	GBV WG field chairs/co-chairs/focal points
Field to further facilitate the dissemination and M&E plan for harmonized GBV messages	15 August 2015	Field GBV WGs and line Ministries
<b>New Reporting Template for P</b>	C/GBV WG/CF	P WG
To clarify on information sharing on GBV cases for children with GBV WG through new reporting template	31 July 2015	GBV WG chair/co-chair together with PC and CP WG
Share a consolidation and analysis tool with GV WG for new reporting template	31 July 2015	Protection Cluster
Organize training for GBV WG members on the use of new reporting template as soon as possible	15 August 2015	Protection Cluster
CMR Protocol		
Have comprehensive CMR protocol	30 November 2015	CMR TF together with line Ministries
A pool of CMR master trainers training to be conducted  Linkage with RH WG	30 November 2015	CMR TF
Field GBV WG meetings to have an update from RH WG as a standing agenda	continuous	Field GBV WG chairs/co-chairs/focal points
FGM		
To discuss with Ministries of Justice in South Central and Somaliland regarding a possibility of becoming a co-chair of FGM TF	31 August 2015	Co-chairs of FGM TFs in South Central and Somaliland
To lead the consultation process for integration of GBV indicators in HMIS	30 November 2015	Field GBV WG chairs/co-chairs/focal points
<b>Linkage with Child Protection</b>		

To engage with CP WGs on the usage of harmonized GBV messages	30 November 2015	Field GBV WG chairs/co-chairs/focal points
To strengthen interaction with CP WGs by attending meetings and providing updates	continuous	Field GBV WG chairs/co-chairs/focal points, together with respective CP WGs
<b>GBV WG Consolidated Plan</b>		
To review the timeline for the consolidated plan	15 August 2015	GBV WG chair/co-chair
To share the consolidated work plan in the flash disk	26 June 2015	GBV WG chair//co-chair
To organize a session for other WG members to share the learning and experiences from this training	30 September 2015	Field GBV WG chairs/co-chairs/focal points
<b>Communications Channels</b>		
To share the calendar of each field WG meetings with the national level	1 <sup>st</sup> week of July 2015	Field GBV WG chairs/co-chairs/focal points
To share the monthly meeting minutes with the national level before the Nairobi meeting	continuous	Field GBV WG chairs/co-chairs/focal points
To organize a meeting with all the field WGs on Tuesday before the Nairobi meeting	continuous	GBV WG chair/co-chair
To join the Nairobi meetings, or at least, share the inputs before the meeting	continuous	Field GBV WG chairs/co-chairs/focal points
To share monthly report to respective regional coordinators	continuous	GBV WG members
To share the consolidated monthly reports with the national GBVWG	level by the 5 <sup>th</sup> of each month	Regional GBV coordinators (Mursal for SC, Ahmed for SL and Penina for PL)
To send GBVIMS report by the 2 <sup>nd</sup> in SC, and by the 7 <sup>th</sup> in Bossaso	By the 2 <sup>nd</sup> of the month in SC, and the 7 <sup>th</sup> of the month in Bossaso	Data gathering agencies
To share the consolidated GBVIMS report with the national level	by the 9 <sup>th</sup> of the month for SC, and by the 15 <sup>th</sup> for Bossaso	GBVIMS regional coordinators
To review the intake form, especially to tailor for legal support	15 August 2015	GBVIMS TF

#### Annex 1: Agenda

Time	· · · ·			
Time	Travel Date: 21 <sup>st</sup> June 2015			
Day 1 Monday 22 <sup>nd</sup> June 2015				
08:30-09:00 Arrival and registration: All				
	ning , objectives, and purpose for the Training			
09:00-09:10 Call meeting to order, prayers and introductions: Halima Ali Adan (GBVWG national Co-				
09:10-09:15	Welcome by the Deputy Representative of UNFPA- Grace Kyeyune			
09:15-09:30	Statement by OFDA, USAID			
09:30-10:00	Participations expectations and ground rules: by Bahsan Ahmed and Ahmed Jama			
10:00-10:10	Taking participants through the agenda: By Eri Taniguchi			
10:10-10:15	Objectives and purpose of the training — Isatu Sesay-Bayoh			
10:15-10:25	Security Briefing: Bakhtiar Safi			
10:25-10:40	Presentations on power walk and discussions -Isatu Sesay-Bayoh			
10:40-10:50	Health Break			
10:50-11:45	Understanding of Coordination, and presentation of GBVWG ToRs and Strategy- Isatu Sesay-			
10:50-11:45	Bayoh and Bahsan Ahmed			
11:45-12:30	Introduction of Human Rights Approaches to GBV Programming by Isatu Sesay-Bayoh			
12:30-1:00PM	Group work on Human Right based Approach to GBV programming by Isatu Sesay-Bayoh			
1:00-2:00	LUNCH			
2:00 - 3:00PM	Group Presentations and discussions			
3:00 - 3:45PM	Human Rights Based Approach to GBV Programming continues by Isatu Sesay-Bayoh and Eri			
End of Day One				
Day 2: Tuesday,2	3 <sup>rd</sup> June 2015			
08:30-9:00	Registration of participants by Agnes Ekeno			
09:00-9:15	Recap of Day1 : Mohamed Mursal Abdi			
9:15 - 10:15am	Presentation on Results Based Management by Ezekiel Kutto and Isatu			
10:15 - 10:45am	Discussions			
10:45-11am	Health Break			
11am - 12pm	Results-Based Management Continues by Ezekiel Kutto and Isatu			
12:00-12:30pm	Group work on application of Result based Management in GBV Programming and Coordination			
	by Isatu Sesay Bayoh and Kutto			
12:30 - 1:00pm	Group presentations and discussions			
1:00-2:00	LUNCH			
2:00-3:45pm	Proposal writing skills by Eri Taniguchi			
	Practical Exercise- Isatu Sesay-Bayoh and Eri			
End of Day Two				
Day 3: Wednesda	Day 3: Wednesday, 24 <sup>th</sup> June 2015			
8:00	Registration of participants by Agnes Ekeno			
8:15-08:25	Group work by Eri Taniguchi			
08:25-09:00	Presentation of Service Mapping Tools by Dominica			
09:00 - 10:30	Joint SOPs for GBV aspect to be reviewed and finalized by Kamal, Halima			
10:30 - 10:40	Health BREAK			
10:40 - 12:00pm	Review of a common GBV referral pathway for utilization by all by Alice and Domenica			
12:00 - 12:30PM	GBVIMS –The experience of SC by Hussein			
12:30 - 1:00pm	Case Management By Hussein (UNICEF)			
1:00 - 2:00pm	LUNCH/PRAYERS			
2:00 - 3:00PM	Generating evidence/research skills for GBV programming and reporting by Population Council			

Time					
3:00-3:45pm	Practical exercise and discussions -Population Council				
	Day Four: 25 <sup>th</sup> June				
8:00 -	Registration of participants by Agnes Ekeno				
8:00-8:10am	Recap of day three by Hussein				
8:10 - 9:10am Presentation and practical exercises on Coordination skills, Advocacy, Networking and					
	dialogues at all levels by Isatu and Bahsan				
9:10-10:00am Understanding the 4 W's, Humanitarian financing processes including, CHF Requirement					
	CERF and discussions by Elizabeth Kigen				
10:00 -10:30am	Communication for effective coordination - Practical exercise by Pilirani				
10:30-11:00am	Presentation of harmonized GBV messages and discussions on the role of the chairs, co-chairs				
	and focal in its implementation, monitoring and reporting on results by Pilirani & Ahmed				
11:00-12:00pm	Presentation and practical exercise on GBV reporting using available reporting tools by				
	Elizabeth from Protection Cluster and a representative from child protection working group				
12:00 - 1:00pm	Presentation on Use of Monitoring tools for GBV reporting by Kutto				
1:00 -2:00PM	LUNCH				
2:00 - 2:30pm	resentation on the proposed Clinical Management of Rape protocol and the role of the GBVWG				
	Chairs, co-chairs and focal in support of its finalization and implementation by Achu				
2:30 -3:00pm	Post Rape Treatment Kits by Ibnou				
3:00 - 3:45pm	Linkages with Reproductive Health Working Group, FGM Taskforce and other Clusters by Achu				
End of day					
Day five: Friday 20	6 <sup>th</sup> June 2015				
8:00 -	Registration of participants by Agnes Ekeno				
8:00-8:10am	Recap of day four by Alice				
8:10 - 9:00am	Presentation of FGM Indicators and the role of the FGMTF and GBVWG in supporting its				
	implementation and reporting by Charity and Isatu				
9:00 -9:30am	Linkages with child protection-the best practical way forward by Halima and Charity				
9:30 -10:00am	The role of the chairs, co-chairs and focal points in supporting the implementation of the				
	GBVWG consolidated plan by Isatu, Halima and Kamal				
10:00 - 10:30am	The role of the government in ensuring GBV Prevention and Response is better coordinated				
	and reported by MOH, MoWHRD, MOJ				
10:30 -11:00am	Introduction on use of blue jeans and group email (Practical exercise) by Ayub				
11:00 -11:30am	Presentation and discussion on Coordination by Isatu and Bahsan				
11:30 -12:00pm	Communication channels (GBVIMS, MINUTES, REPORTING, EMAILS, BLUE JEANS ETC) by				
	Hussein, Eri and Halima				
12:00 -12:30pm	Presentation of all coordination harmonized tools discussed at the training and Evaluation of				
	the workshop by Eri				
	ication from 2:00 -3:00pm				
2:00 - 2:15pm	Presentation on action oriented outcomes to strengthen coordination towards GBV Prevention				
0.45, 0.55	and Response by a participant				
2:15 -2:30pm	Statement by a Representative from the government				
2:30 -2:55pm	Closing of the training and certification by Deputy Representative of UNFPA-Grace Kyeyune,				
0.55.0.65	and Director or Representative of OFDA/USAID				
2:55 -3:00pm	Appreciation by a participant				
Group Photo					

Annex 2: Participant List

TITIEX	2: Participant List			
s/n	Name	Agency	Title	email contact
Puntland				
1	Amina Osman Haji	UNHCR	Galkayo GBV WG alternate	hajia@unhcr.org
•	Bahsan Ahmed	- CHITCH	Co-chair of Garowe	najia Samior.org
2	Said	UNFPA	GBV WG	bsaid@unfpa.org
	Idris Mohamed		co-chair of FGM	
3	Abdullahi	MOH	task force co-chair of FGM	idirismoha@gmail.com
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_	AL IIII D. L. I	MOWDAF	co-chair of FGM	
5	Abdijibar Rashid Fatima Farah	Α	task force on behalf of FGM	jabirconsultant@gmail.com
6	Handulle	UNICEF	TF	ffhandulle@unicef.org
	Tidilidalio	ONICE	co-chair of Bossaso	mandano samoon.org
7	Kamal Nidam	UNICEF	GBV WG	knadan@unicef.org
Som	aliland			_
	Ahmed Abdi			
	Jama		Co-chair Hargeisa	
1		UNFPA	GBV WG	ajama@unfpa.org
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3	Luui Aueri Geui	MOLSA	co-chair	luul_adan@hotmail.com
	Abdirisak Yusuf			
	Ali		SL GBVIM	
4		UNFPA	Coordinator	_
5	UgaasoJamaGuled	MOH	FGMTFCo-Chair	ugaso56@hotmail.com
	Hussein Osman			
6	Hussein	UNICEF	on behalf of CM TF	hohussein@unicef.org
_	Ayan Mohamed	DDC	DRC capacity	
7	Askar	DRC	building officer	ayan.m@drcsomalia.org
Sout	th Central	1	SC GBV	
			coordinator, chair	
			of Mogadishu and	
1	Mohamed Mursal	UNFPA	Baidoa GBV WGs	mabdi@unfpa.org
			GBV focal point for	
2	Alice Mangwi	ARC	Kismayo	alicem@arcrelief.org
	NAC II	NA-14/1155	chair-FGM	
2	Mina Hassan	MoWHRD	Taskforce	hobywasan@amail.com
3	Mohamed Sadia Mohamed	-	Mogadishu	babyxasan@gmail.com
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5	Dr. KeifHersiKeyre	MoH	FGM TF co-chair	drkeifh@gmail.com
	Dr. Naima		. 5101 11 55 511011	<u>s.n.o.m ogman.oom</u>
	Abdulkadir			
6	Mohamed	МоН	FGM TF	dr.nacima@gmail.com
		Northern	on behalf of	
_		Youth	Mogadishu GBV	bashirjacfar@yahoo.com,
7	JaafarBishar	Frontier	WG co-chair	jaffrulb@gmail.com

8	Hussein Hassan Alio	UNHCR	GBVIMS Coordinator South	alio@unhcr.org
			Central	
			On behalf of	
		SWACED	GalgaduudGBV	kaden@swaceda.org /
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		Midwifery		
14	HawaAbdulahiElmi	School	Mogadishu	hawa114qk@hotmail.com
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Nairo	Nairobi			
			National GBV WG	
1	Isatu Sesay-Bayoh	UNFPA	Chair	Kajue@unfpa.org
2	Eri Taniguchi	UNFPA	chair-GBVIMS TF	taniguchi@unfpa.org
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3	Hassan	IRC	CMRTF CO-CHAIR	rg
			National GBV WG	
4	Halima Ali Adan	SSWC	Co Chair	halima@sswc-som.com
5	Agnes Ekeno	UNFPA	Programme Asst.	ekeno@unfpa.org
			on behalf of	
6	Ruth Mbugua	IOM	Dhobley	rmbugua@iom.int
	DomenicaCostantin			
7	i	DRC		d.costantini@drcsomalia.org
8	Charity Koronya	UNICEF	Co-chair FGM TF	koronya@unicef.org

#### Annex 3: The Opening Statement

Opening Remarks by UNFPA Deputy Representative/OIC, represented by Dr. Achu Lordfred

It is a great pleasure for me to welcome you all here today. First of all, congratulations for the new field co-chairs and focal points for being elected and endorsed, and thank you for those of you who are continuously committed to assuming the role of chairs/co-chairs.

This training of Somali GBV Working Group chairs, co-chairs and focal points is being organized in order to meet the needs of further and continuous capacity strengthening as expressed by many of you. This also directly corresponds to one of the four pillars of the GBV Working Group Strategy 2014-2016, which is Outcome 4.1: "Strengthened coordination of prevention and response programmes among GBV Working Groups". This is why, UNFPA as the chair of the national GBV Working Group, together with the newly-elected national co-chair, Save Somali Women and Children (SSWC), is organizing this training to strengthen technical capacity of all GBV chairs, co-chairs and focal points.

The training will cover key important themes/topics, including Human Rights Based Approach to GBV Programming, Results Based Management, evidenced based Proposal writing, Reporting, Advocacy and Networking skills, and effective coordination and

communications for results. All of these are critical elements to ensure effective and efficient coordination. During the training, you will also have opportunities to discuss on standard operating procedures (SOPs), service mapping, referral pathway, GBV Information Management System (GBVIMS), linkages and cooperation with Child Protection Working Group and Case Management Task Force, post-rape treatment kits, clinical management of rape, harmonized GBV messages, and possible humanitarian financing.

This training is being organized at the right time, especially just after new co-chairs and focal points are selected. We really hope that all the sessions of this training will equip you with relevant and useful knowledge, skills and tools when you assume the leading coordination roles in your respective locations. Furthermore, during the training as well as outside the time of the training, it is expected that participants share their experiences and have open and frank discussions on challenges they might face and possible solutions, thus learning from each other's expertise and experiences. Therefore, I would encourage you to maximize your time here, to interact with each other, ask questions, clarify issues you are not sure of, and discuss on the concrete actions for the way forward.

Lastly, but not the least, I would like to express our gratitude to OFDA/USAID, without whose support, this training would not have been organized. We really appreciate their understanding on the importance of strengthening of coordination capacity for GBV prevention and response, as well as their commitment and generous support towards addressing this critical, yet often underestimated, needs. We can assure you that your support towards this training will not only bring the tangible results, but also will have multiplying effects, especially at the field levels through the planned follow-up trainings.

I thank you for your attention and wish the next 6 days will be fruitful and enjoyable for all of you.

#### Annex 4: Participants Expectations

- Share tools used in other locations and harmonize them.
- Hear experiences of other co-chairs who coordinate both Protection Cluster and GBV WG
- Understand the scope of responsibilities of chairs, co-chairs and focal points
- Learn how to strengthen coordination, GBV programming and guiding principles, human-rights based approach, and how to bring out tangible results
- Strengthen coordination between RH& GBV WGs
- Share GBV goodpractices &challenges
- Clarify working modalities between the filed-based WGs and national GBV WG in Nairobi
- Improve reporting among the GBV WG members
- Come up with concrete actions to address GBV
- · Utilize learning from the training in the field

#### Annex 5: Ground Rules

- Full and inclusive participation
- Speak louder
- Focus on the topic
- Respect one another's views
- Time Management
- Mobile on silent mode
- Minimize unnecessary movement

- No side talks
- · Limit use of computers

Annex 6: Presentations