

# Key Challenges for Refugee Policies and Programs: A Gender Perspective

## Jeni Klugman

Senior Academic Adviser to the World Bank's Gender Dimension of Forced Displacement Research Program; Managing Director, Georgetown Institute for Women, Peace and Security; and Senior Fellow (non-residential), Brookings Institution.

## Elena Ortiz

Research Associate, Gender Dimensions of Forced Displacement Research Program, World Bank.

## Amalia Hadas Rubin

Program Officer, Latin America and the Caribbean, International Republican Institute.



## Abstract

Forced displacement has moved to the top of the global policy agenda. Refugees face a range of challenges including limited access to education, health services, legal status, and justice, some of which are more acute for women and girls. While important strides have been made in addressing forced displacement, global and national policies have continued to outstrip progress in practice. This review examines refugee policy commitments and persisting challenges through a gender lens and finds that there are gendered barriers and deliberately exclusionary policies, which appear to be worst in countries where gender norms limit women's mobility, autonomy, and choice. Progress on data availability has also been limited, despite long-standing commitments to improving gender (and age) disaggregated information. There is clearly a need for development partners to accord more explicit attention and resources to overcome systemic gaps excluding displaced people and especially women and girls. This now appears to be recognised in the Global Refugee Compact as well as in recent innovations to the World Bank Group's IDA. These reforms and increased commitments and resources are needed to meet the Sustainable Development Goal to leave no-one behind.

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## 1. Introduction and context

This paper aims to provide an overview of the key international legal frameworks, challenges, and legal, policy, and program responses around refugees from a gender perspective. The focus is on women and girls. It highlights major gaps and shortcomings in the extent to which gender differentiated needs have been responded to, including on the data front. The paper also highlights promising innovations and emerging good practice and connects what is known from both the humanitarian and development spheres.

Given the heightened prominence of both displacement and gender on the global agenda, the main audience is policymakers in governments and humanitarian and development agencies, to provide a ready reference of the state-of-play on displacement from a gender perspective. It is designed to complement the World Bank's Refugee Policy Review Framework and the Global Compact on Refugees.

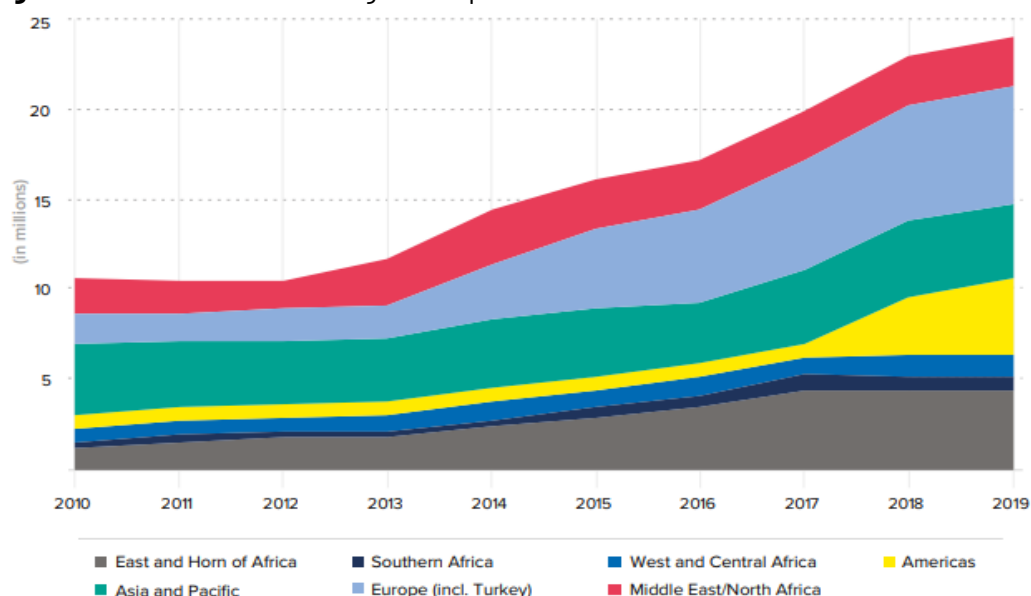
The rest of this introduction reviews estimated numbers, demographic profiles, and location of refugees, and can be skipped by readers familiar with the state of play. This is followed by an exploration of international frameworks, and then a review of policies and challenges on the ground. An important area of focus is the interplay between humanitarian support and ongoing national policies and programs. Readers who are familiar with the international frameworks can go directly to section 4 on current challenges facing refugee women and girls.

The number of forcibly displaced people has risen by some 50 percent over the decade to 2020, as a result of persecution, conflict and/ or generalized violence. In mid-2020, about 26.4 million people worldwide were categorized as refugees and 4.2 million were seeking asylum.<sup>1</sup> Here we follow the established definition of a refugee is "a person forced to flee their home because of violence, persecution, or war,<sup>2</sup> and do not include the growing numbers of people displaced by disasters and climate change. At the end of 2020, 16 million refugees lived in a protracted situation; four million more than in 2016.<sup>3</sup>

Conflicts in Syria, Afghanistan, Iraq, Yemen, the Democratic Republic of the Congo (DRC), Myanmar and South Sudan account for much of the displacement over the past decade.<sup>4</sup> There was a spike in Europe's refugee numbers in 2014 with the conflict in eastern Ukraine, and again in 2015 as the war in Syria intensified and conflicts in Iraq and Afghanistan worsened.

Recent major outflows include Rohingya, Syrian and Venezuelan refugees to neighboring countries in different parts of the world. Refugees often end up in neighboring countries: Turkey hosts 3.6 million Syrians; Colombia, 1.8 million Venezuelans; and Pakistan, 1.4 million Afghans. Figure 1 shows the destinations of refugees over the past decade.

**Figure 1: Destinations of Refugees Displaced abroad 2010-2019**



Source: UNHCR. (2020). Global Trends 2019. United Nations.

In 2020, about two thirds of all refugees originated from five countries: Syria, Venezuela, Afghanistan, South Sudan and Myanmar. Syria has been the largest source refugees since 2014.

Table 1 shows the top ten host and origin countries, as estimated by UNHCR in June 2020. The top ten hosts account for over ten million refugees. Many refugees are hosted by countries already facing major development and poverty challenges, with large numbers residing in Turkey, Colombia, Pakistan, Uganda, and Sudan.

**Table 1: Top ten refugee hosting and origin countries, numbers and population shares, 2021**

Top 10 Refugee Hosting Countries			Top 10 Refugee Origin Countries		
Host country	Number of refugees	Percent of host population	Origin country	Number of refugees	Percent of origin population
Turkey	3,696,831	4.4	Syria	6,761,560	38.6
Uganda	1,475,311	3.2	Afghanistan	2,610,067	6.7
Pakistan	1,438,523	0.7	South Sudan	2,277,919	20.4
Germany	1,235,160	1.5	Myanmar	1,127,588	2.7
Sudan	1,068,339	2.4	DRC	864,510	1.0
Bangladesh	889,775	0.5	Sudan	805,874	1.84
Lebanon	856,758	12.6	Somalia	790,022	5.0
Iran	800,025	1.0	CAR	713,262	14.8
Ethiopia	782,896	0.7	Eritrea	492,465	15.3
Jordan	708,308	6.9	Nigeria	369,880	0.2

Source: UNHCR. Data last updated November 2021 and World Bank's World Population Prospects 2020.

In 2020, an estimated 2.6 million refugees lived in camps while around 15 million lived outside camps in urban settings.<sup>5</sup> Refugees outside camps can face challenges in accessing refugee services, even if they have larger opportunities for integration. Currently, Turkey hosts the largest urban refugee population, most living in urban or peri-urban areas.<sup>6</sup>

Camps run by UNHCR typically provide shelter, food, medical treatment and other basic services. The largest camps are located in Bangladesh, Uganda, Kenya, Jordan, Tanzania, and Ethiopia. Refugee camps are intended as temporary accommodations, but many camps have existed for extended periods. For example, Katumba Refugee Camp in Tanzania was constructed in 1972, Kakuma Refugee Camp and Dadaab Refugee Camps in Kenya in 1992 –all are still operational.

For how long are refugees typically displaced? For people who were refugees in 2015 (the most recent year for which estimates available), the average duration of exile was estimated at 10.3 years, although the median duration is much shorter – four years—that is, half of refugees have spent less than four years in exile.<sup>7</sup>

An estimated 46 percent of refugees are women and girls, although the share varies across settings. During the crises in Bosnia (1995), South Sudan (2016) and Congo (2017) women and girls accounted for the majority of refugees.<sup>8</sup>

As investigated below, evidence suggests that displaced women face higher risks of violence and have less access to employment opportunities than displaced men do<sup>9</sup> — and to services, including sexual and reproductive services,<sup>10</sup> mental health support,<sup>11</sup> and skills training.<sup>12</sup> Section 4 examines available evidence on gender disadvantage and policy and program responses.

In 2020, the COVID-19 pandemic created major economic, social, and health challenges for refugees, as for hundreds of millions of other people around the world. Box 1 highlights some of the effects of the pandemic on refugees, which should be borne in mind in understanding the current policy and program challenges that are outlined in the sections that follow.

### **Box 1 COVID-19 pandemic and refugees**

Widespread quarantines, border closures and travel bans, and social distancing measures have adversely affected forcibly displaced persons. The economic shocks associated with the pandemic has dealt blows to refugees' ability to meet their basic needs. Documented impacts include job losses, strains on temporary shelter capacity, limited health services for non-COVID related health issues and increased food insecurity.<sup>13</sup>

Many of the refugees located in developing countries are living in overcrowded and underserved camps and informal settlements. Poor sanitation and cramped living arrangements heightens their risk of exposure in settings where accessing health care is difficult.

The 2021 GCR report cites surveys in eight countries show worsening socio-economic well-being of both forcibly displaced and host communities over the course of the pandemic. Both populations have lost assets, savings, income, and access to basic services, and many are severely food insecure. In Uganda, for example, poverty among refugees is estimated to have increased from around 44 percent before the pandemic to 52 percent in October/November 2020, with nearly nine out of ten households experiencing declines in total income.

Evidence from crisis settings, including refugee camps and humanitarian assistance zones, confirms that when family members are in close proximity under conditions of duress for extended periods of time, rates of GBV increase.<sup>14</sup> Reports from the IRC,<sup>15</sup> UN Women,<sup>16</sup> the Center for Global Development,<sup>17</sup> and the WHO<sup>18</sup> suggest that the escalation of risks was linked to lockdown measures that forced victims to spend more time with their abusers and prevented them from seeking safety elsewhere, even temporarily. UNHCR reports that COVID-19 has doubled rates of sexual violence against forcibly displaced women.<sup>19</sup> IRC interviews with more than 850 refugee and displaced women in 15 African countries across East Africa, West Africa and the Great Lakes region found that 73 percent of women reported an increase in domestic violence, 51 percent reported sexual violence, and 32 percent observed a growth in early and forced marriage associated with displacement.<sup>20</sup>

Restaurants, infrastructure/construction, and manufacturing have all been hard hit, and are where an estimated 60 percent of employed refugees work.<sup>21</sup> Remittances, projected to shrink by 14 percent in 2021, are often an important source of support for refugee families.<sup>22</sup>

Many refugees may face exclusion with the shift to virtual education and service provision. A recent GSMA mixed methods study in Jordan, Rwanda, and Uganda found that the digital exclusion of women can be worse in humanitarian settings.<sup>23</sup>

Refugee women have taken a critical role as first responders in the pandemic. UNHCR, among others, have committed to support refugee-led organisations and service providers and acknowledged the need for mechanism to be developed which allow them to open bank accounts, and receive funding directly.

The rest of this paper is structured as follows. The next section highlights the international legal and normative framework, beginning with the 1951 *Convention Relating to the Status of Refugees* and highlighting the importance of the Global Compact on Refugees. Using a gender lens, Section 4 documents key challenges for refugees — namely, legal rights, gender-based violence, paid work, clean energy and access to health, education, and justice – outline the directions of policy responses to date, and gaps. The final section concludes.

## **2. International Refugee Framework from a Gender Perspective**

The international refugee protection framework is long established and has continued to evolve through recent years. The basic convention originated in the aftermath of World War II, while in the subsequent decades, regional conventions and global compacts have begun to address key challenges that had not been addressed at the outset. These challenges – which include the uneven global distribution of refugees, climate driven movement and gender inequality – have begun to be tackled, albeit to varying extents, as outlined below.

The foundational international instruments do not have gender specific provisions, and there is no evidence of women being extensively included in the negotiations.<sup>24</sup> As illustrated below, the evolution over time shows greater recognition of the needs of women and girls, especially around the risks of gender-based violence. Some subsequent arrangements, especially at the regional level, have explicitly addressed gender dimensions and there is a growing body of practice around how gender-based violence affects the determination of refugee status.

There are a whole host of agreements and initiatives that reflect both political will and provide practical guidance towards a more gender-responsive humanitarian system, which are beyond the scope of this paper to review in detail.<sup>25</sup>

## **6 Gender Dimensions of Forced Displacement**

The 2018 Global Compact on Refugees (GCR) marked a significant expansion in the involvement of women and women's groups,<sup>26</sup> although while signed by 176 countries does not have binding legal force. The progress in implementation and reporting were the subject of a 2021 report, highlighted below.<sup>27</sup>

## **2.1 Cornerstones: The 1951 Convention and the 1967 Protocol**

The 1951 *Convention Relating to the Status of Refugees* and 1967 *Protocol Relating to the Status of Refugees* are at the heart of international law and policy on refugees. These conventions defined refugees as persons who "owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it".<sup>28</sup> The 1951 Convention applied only to people who had been displaced as a result of events before 1951, although the 1967 Protocol expanded the temporal and geographical scope and applied the protections universally.<sup>29</sup>

The Convention and Protocol established basic rights for refugees including the principle of non-refoulement,<sup>30</sup> as well as civil, economic and social rights. These include the right to work, to education, to housing, to public relief and assistance, to freedom of religion, to access courts, to freedom of movement, and to identity and travel documents. However as outlined further below, there is no explicit universal recognition of gender-based sources of disadvantage and discrimination as a basis either for refugee claims, or subsequent protections, although GBV has been recognized as such by UNHCR and a number of countries, as discussed below.

Refugees – regardless of gender – were excluded from the process of developing the 1951 international refugee framework. More broadly, the documents reflected the concerns which dominated in the aftermath of WWII.<sup>31</sup>

The international legal framework for refugees has continued to evolve through several regional conventions in Africa, Latin America and the Arab region, that have responded to more context specific needs. Examples of more extensive access include the 1969 OAU Convention and the 2003 Maputo Protocol.

Many governments have adopted specific legislative and administrative measures to implement the 1951 Convention, and some have gone beyond those minimum standards.<sup>32</sup> For example, Germany's 2015 Act on the Acceleration of Asylum Procedures amended several laws in order to accelerate the asylum process, substitute in kind benefits for cash benefits, reduce barriers to integration and language classes, and reform integration policies for refugees.<sup>33</sup>

However, many of the rights in the Convention and Protocol have not been implemented in practice.<sup>34</sup> For example, In 2001, Australia adopted a policy excluding various Islands and territories from 'migration zones', so that the asylum process and associated obligations would not be triggered.<sup>35</sup> As of 2014, Egypt's constitution stipulates that refugees are eligible for work permits, but permits are costly, and refugees must find an employer to sponsor and pay all fees.

Similar to other international instruments of the era, the gender-blind language and policies in the Convention and Protocol excluded and ignored the specific needs of refugee women and girls.<sup>36</sup>

While none of the regional conventions explicitly focus on gender relevant aspects, the Latin American declarations appear to go furthest in terms of recognizing the needs of women and providing a foundation for more gender responsive approaches, as outlined below.

The gender-blind language had negative repercussions. For example, the needs and circumstances of women refugees have been closely linked to children – as in the UK, where women have been more likely than men to be granted “Exceptional Leave to Remain” but this allows fewer rights than refugee status and regards women as victims rather than refugees.<sup>37</sup>

## **2.2 The legal determination of refugee status**

There is a formal process by which UNHCR and governments determine who is a refugee under international, regional or national law. In principle the determination is on an individual basis, but where there are very large inflows of refugees, governments may proceed through prima facie determination, with an individual status determination at a later stage. Status determination is a vital step in enabling refugees practically realize their rights.

The lines between refugees as conventionally defined and other people who are forced to flee their countries have become increasingly blurred.<sup>38</sup> Not all people who are forcibly displaced across borders are recognized as refugees, as defined by the Convention. People fleeing climate change and natural disasters, economic crises, long standing economic or social inequality and political instability are not currently considered refugees in international law.<sup>39</sup>

Here we focus on two important aspects of refugee status – viz climate change and protection from gender-based violence -- from a gender perspective.

### *2.2.1. Climate change*

A major challenge to the conventional definition is the increasing number of people displaced by climate change.<sup>40</sup> Movement, especially internal displacement, driven by climate driven hazards -- droughts, fires, typhoons, cyclones, and rising sea levels -- has become a growing issue. The 2018 GCR (detailed below) recognizes that “external forced displacement may result from sudden-onset natural disasters and environmental degradation” for which the State could seek international support. It mentions the possibility of measures “to assist those forcibly displaced by natural disasters...[offering] temporary protection and humanitarian stay arrangements”.<sup>41</sup> A multi-agency Task Force on Displacement was established in 2017 to develop approaches to “avert, minimize and address displacement related to the adverse impacts of climate change,” and has published data and guidance on addressing climate-related displacement, and is tracking national and regional policy frameworks.<sup>42</sup>

In many ways, women are disproportionately burdened by climate change.<sup>43</sup> Rural women often rely on natural resources to sustain their livelihoods.<sup>44</sup> Water scarcity, poor air quality, and increase in vector-borne diseases disproportionately affect women because their responsibility for cooking and water collection. Women displaced by disasters face an increased risk of gender-based violence and often have less access to relief.<sup>45</sup>

However, climate refugees are not universally recognized under the international definition of refugee. In limited circumstances, displacement due to climate change may satisfy the conventional definition – for example, if a government withholds humanitarian aid due to a person’s



political opinion or ethnicity.<sup>46</sup> While there have been some regional expansions of the definition, as noted below, there is a legal gap at international/regional level regarding ‘climate refugees’ (assuming no overlap of people fleeing generalized violence compounded by disaster). The only real protection that climate refugees currently have is provided at national level, and may be time limited.

### 2.2.2. Gender based violence

While GBV was not explicitly included in the convention or protocol as grounds for fear of persecution, this has received increased attention over time. Since 1993, UNHCR has considered claims of women facing gender-based violence in the determination of refugee status.<sup>47</sup> Whether a victim of rape is categorized by the UN as a refugee depends on a multiplicity of factors such as establishing a well-founded fear of persecution in the future.<sup>48</sup>

Whether or not gender-based violence is considered a basis for claims at the national level depends on the laws and regulations in place. In a number of countries – including Belgium, Hungary, Italy, Malta, Romania, Spain, Sweden and the UK – rape and other forms of sexual violence (like forced marriage) may be considered to amount to persecution. Intimate partner violence may be considered as a form of persecution in Belgium, Hungary, Italy, Romania, Spain, Sweden and the UK.<sup>49</sup> As noted above, in European practice, intimate partner violence is often interpreted by the United Nations as a form of serious harm leading to the grant of “subsidiary protection”, which offers one year of protection. The situation for refugee GBV survivors has changed over time in the United States. In 2014 “married women who are unable to leave their relationship” were able to apply on special grounds, but then a ban on such claims was introduced in 2018. In 2021, the U.S. Department of Justice reversed this ban, allowing survivors to seek asylum on the basis of domestic violence.<sup>50</sup>

## 2.3 Regional arrangements from a gender perspective

The 1969 *Organization of African Unity Convention Governing the Specific Aspects of Refugee Problems in Africa* significantly broadened the definition of refugees, and for the first time, conflict-related refugees were protected.<sup>51</sup> The convention has no explicit mention of women, gender, or sex, even in the non-discrimination clause, nor were we able to find any indication that women’s groups were consulted in the crafting of this document in the 1960s.<sup>52</sup>

The 1984 *Cartagena Declaration on Refugees* came at the end of a long period of authoritarianism in the Latin American region, and also expanded the refugee definition. The Declaration is non-binding but has been incorporated into national legislation in 14 states. While there is no explicit gender lens in the Declaration, it led to the First Regional Forum on Gender Focus in working with Refugee, Returnee and Displaced Women (FOREFEM) with recognition of women’s needs in personal documentation, to land ownership, and organization of their own voluntary repatriation.<sup>53</sup> Successor declarations include the 1994 San José Declaration and recommends full participation of women’s groups in the creation and implementation of programming and highlighting the specific needs of displaced women and girls.<sup>54</sup> Both the 2004 Cartagena Declaration<sup>55</sup> and the 2014 Brazil Declaration<sup>56</sup> note that women are vulnerable during displacement and require specific programs and services.<sup>57</sup> The 2012 *Mercosur Declaration of Principles on International Refugee Protection* aimed to facilitate the movement and employment of refugees in the region but did not recognize the gendered dimensions of displacement nor involve regional women’s organizations.<sup>58</sup>

The 1994 Arab Convention on Regulating Status of Refugees in the Arab Countries was adopted in 1994 but has not been ratified by any state. This convention did include gender in the non-discrimination clause.<sup>59</sup>

## **2.4 Developments since 2015**

The past several years have seen major international declarations and instruments relevant to refugees, although the extent to which refugees have been included, and their needs recognized and addressed, has been uneven.<sup>60</sup> Moreover, while these declarations indicate political commitments – or lack thereof – none of the declarations have binding legal force.

While several of the Sustainable Development Goals (SDG) adopted in 2015 are relevant to refugees, there are very few explicit references to refugees in the SDG agenda beyond the target to reduce transaction costs for remittances by 3 percent.<sup>61</sup> A 2019 IRC report found that Voluntary National Reviews prepared by member states mostly excluded refugees and ten of the largest host countries did not mention the needs of refugees in their submissions.<sup>62</sup>

Around the same time as the SDGs, surging refugee numbers led to the unanimous adoption of the New York Declaration for Refugees and Migrants by the General Assembly. Women’s groups and organizations like UN Women were observers at global fora and involved in the consultations, leading to the incorporation of gender-responsive language and commitments.<sup>63</sup> It is useful to quote the explicit commitment to women and girls in the 2016 Declaration in full:

*“We will ensure that our responses to large movements of refugees and migrants mainstream a gender perspective, promote gender equality and the empowerment of all women and girls, and fully respect and protect the human rights of women and girls. We will combat sexual and gender-based violence to the extent possible. We will provide access to sexual and reproductive health care services. We will tackle the multiple and intersecting forms of discrimination against refugee and migrant women and girls.... We will work to ensure their full, equal and meaningful participation in the development of local solutions and opportunities. We will take into consideration the different needs, vulnerabilities and capacities of women, girls, men and boys.”<sup>64</sup>*

However, the 2016 Leaders’ Summit on Refugees did not explicitly mention the distinct needs of women and girl refugees, nor did any pledges focus on addressing gender disadvantage.<sup>65</sup>

Around the same time, the 70<sup>th</sup> World Health Assembly resolution on “Promoting the health of refugees and migrants” recommended creating “people-centered, refugee- and migrant-and gender-sensitive health systems”, and highlighted the minimum initial service package for reproductive health, sexual and reproductive health information and services and specialized care for survivors of sexual violence.<sup>66</sup>

### **2.4.1 2018 Global Compact on Refugees**

While not a binding treaty, the 2018 Global Compact on Refugees (GCR) is perhaps the most important international development on the topic since the convention and protocol – affirmed by all UN Member States except the United States and Hungary (voted against) and Eritrea, Liberia and Libya (abstained). The GCR sought to strengthen the international response to unprecedented spikes in the numbers of displaced people, including large numbers of people seeking entry into Europe. UNHCR and Member States, international organizations, refugees, civil society, and the

private sector were all involved in the process, which was notably aimed at improving the burden sharing between refugee hosting countries and the international community. The Compact includes the Comprehensive Refugee Response Framework (CRRF), which is to be applied at the country level, which aims to ensure the safety, dignity, and ability to thrive of the most vulnerable.

Consultations with civil society organizations and UN agencies in the GCR process tended to increase attention to women's needs and experiences. The inclusion of women and refugees was a welcome development. A gender audit has documented that over 200 civil society organizations, and male and female refugees participated in the drafting and 51 percent of all panel speakers in the thematic discussions leading up to the drafting of the GRC were women, as well as both male and female refugees.<sup>67</sup> Over 30 organizations – including Refugees International, CARE International, Plan International, and the Women's Refugee Commission – submitted suggestions to address language and content gaps related to refugee women and girls.<sup>68</sup>

The GCR has four key objectives — namely easing the pressure of host countries, enhancing refugee self-reliance, expanding access to third-country solutions, and supporting changes in countries of origin for safe and dignified returns. It expands on existing international law and standards by focusing on providing and bolstering financial resources for host countries – from humanitarian assistance, development cooperation and the private sector – with comprehensive planning under national leadership. However, while the intended directions are clear, there are no specific targets or mandates.

The GCR stresses that “the programme of action is underpinned by a strong partnership and participatory approach, involving refugees and host communities, as well as age, gender, and diversity considerations including: promoting gender equality and empowering women and girls; ending all forms of sexual and gender-based violence, trafficking in persons, sexual exploitation and abuse, and harmful practices; facilitating the meaningful participation of youth, persons with disabilities and older persons; ensuring the best interests of the child; and combating discrimination.” It highlights the need to strengthen national capacity for individual registration and documentation, including for women and girls, regardless of marital status; enhancing sex-desegregated data collection; improving gender-responsive referral mechanisms at borders; and providing resources and expertise to promote economic opportunities to women. There is also a major emphasis on the importance of disaggregated data:

*“To support evidence-based responses, States and relevant stakeholders will, as appropriate, promote the development of harmonized or interoperable standards for the collection, analysis, and sharing of age, gender, disability, and diversity disaggregated data on refugees and returnees” para. 46*

These commitments are a mark of major progress, although gaps remain. The overall commitment to gender and the inclusion of gender-relevant content is mainly in terms of identifying women and girls as a group with specific needs and adding such phrases as “including women” or “especially for girls” to priority action areas of education, employment, training, and protection, and the intersecting forms of discrimination facing women refugees is not explicitly addressed.<sup>69</sup>

A major gap is the failure of the GCR to recognize sexual reproductive rights and health. There is no recognition of the rights to access sexual and reproductive services – including access to skilled birth attendants and newborn care, voluntary contraception, and safe abortion – reportedly due to

the efforts of governments with conservative views on women's rights, including the Vatican, Pakistan, and the United States.<sup>70</sup>

Follow-up to the GCR includes meetings every four years to share good practices, contribute with financial support, technical expertise and policy changes. The 2019 Global Refugee Forum attracted more than 700 national law and policy pledges to achieve such broad outcomes as promoting inclusion, access to services, strengthening of protection mechanisms, and creating legal frameworks to ensure protection of refugee rights.<sup>71</sup> More details are captured in the digital platform.<sup>72</sup>

A valuable gender audit of the pledges highlights that among the pledges submitted prior to the 2019 Global Refugee Forum, the titles of 42 pledges mentioned gender, women and girls and/or SGBV.<sup>73</sup> Examples from NGOs include CARE International's pledge to undertake Rapid Gender Analysis in all refugee operations.<sup>74</sup> (Recent global developments on the health and education fronts are outlined in section 4 below.)

In practice, progress on disaggregated GCR indicators has been very limited – and indeed in the 2021 report, only school enrolment rates were provided by sex, and noted that there is “substantial room for strengthening implementation” of the AGD approach. An updated gender audit from 2020 found that 70 percent of the GRF pledges made no reference to age, gender, disability, or other diversity considerations, while 85 percent of GRF pledges did not mention gender.<sup>75</sup>

In sum, the gaps between the international rhetoric and reality persist. While, as shown below, there have been welcome advances and innovative programming—inadequate attention remains the norm.

### **3. Major actors and humanitarian assistance: gender dimensions**

While refugee policy is primarily the responsibility of nation States, a range of multilateral agencies and NGOs are involved in service delivery, policy and advocacy. Humanitarian actors are present and active in most countries with refugee populations – especially in camps in developing countries – delivering food, water, cash transfers, shelter, health services, in-kind transfers. This section reviews the main UN agencies before outlining some of the important activities being undertaken by civil organisations, with a focus on women's groups and work being done to advance gender equality.

The UNHCR has been the major actor with the mandate of protecting and supporting refugees since 1951. The UNHCR's Age, Gender and Diversity policy, adopted in 2018, is a useful guide for UN agencies working to ensure a more universal coverage of diverse groups.<sup>76</sup> The other main multilateral actors providing humanitarian assistance to refugees are United Nations Development Programme (UNDP), the United Nations Children's Fund (UNICEF), the International Organization for Migration (IOM), and World Food Program (WFP), while the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) plays a coordinating role.

International NGOs and humanitarian actors -- such as Refugees International, International Rescue Committee, the International Committee of the Red Cross, and the Refugee Women's Commission - all play vital roles in advocating for refugees and the delivery of key services, often with a focus on women and girls. Examples of gender-focused efforts include the following.

- The Women and Girls Program of *Refugees International* provides avenues to bring women and girl refugees into policy conversations through interviews, fact finding missions, and consultations with women's groups.
- The *International Rescue Committee* has an explicit goal to promote gender equality, through activities such as improving access to health centers and sexual/reproductive rights, supporting adolescent girls to stay in school, and providing economic empowerment and cash assistance in emergencies, as well as research and advocacy.
- The *International Committee for the Red Cross* seeks to address, among other things, sexual violence, and girls' access to education in situations of violence and armed conflict.
- The *Women's Refugee Commission* researches the needs of refugees and advocates for programs and policies to increase their resilience in humanitarian emergencies, with a on rights and justice, sexual and gender-based violence, sexual and reproductive health, economic empowerment and self-reliance, and gender and social inclusion.

Some non-governmental organizations (such as Amnesty International and Human Rights Watch) engage in advocacy work and document human rights violations experienced by refugees before, during, and after crises. The organizations can act as vital watch dogs - for example, Human Rights Watch has tracked women's rights - and refugee women's rights- in global reports since 1990, advocating for their inclusion in policy development and highlighting specific risks.

Some faith-based organizations like Islamic Relief, World Vision and Hebrew Immigrant Aid Society have been active in advocacy work, community building, and service provision for refugees. For example, the Women's Programs division of Islamic Relief has worked to strengthen maternal health care in Kenya, establish entrepreneurial and livelihoods training in the West Bank and Gaza, and create home-based education for women in Afghanistan.<sup>77</sup>

A broader range of development actors have played an increasingly larger role in the policy and programs that affect refugees. These organizations - which include multilateral banks (Asian Development Bank, Inter-American Development Bank, World Bank, European Bank for Reconstruction and Development), bilateral agencies (United States Agency for International Development, UK Department for International Development, and Norwegian Agency for Development Cooperation) - have paid varying degrees of attention to gender.

In some cases, the differences in approach between humanitarian and development actors has created tensions. The humanitarian focus on protection and relief tends to prioritize immediate needs for food and services, whereas development programming tries to build up government capacity and financially sustainable programs.<sup>78</sup> Over the past decade or so, the humanitarian-development nexus has shifted away from the sequential process of an initial humanitarian response followed by a development effort.<sup>79</sup> Discussions and coordination among agencies at the global and country levels have developed a more coherent humanitarian-development nexus and agencies like USAID, UNHCR and the World Bank have now agreed on common results frameworks for programs at the country level.<sup>80</sup> This allows both sets of actors to engage in complementary efforts for greater impact throughout the entire period and contribute to a comprehensive effort from the onset of forced displacement.

Still, however, observers have noted that many new financing mechanisms do not adequately integrate gender or gender equality and often totally neglect gender-based violence. For example, the World Bank's Global Concessional Financing Facility (GCFF) and the EU Regional Trust Fund in Response to the Syrian Crisis (EUTF) have been two of the primary vehicles for non-humanitarian

aid during the Syrian crisis – only the EUTF explicitly supports gender-equality-focused projects (albeit at 2 percent of the budget) and also integrates GBV-related targets.<sup>81</sup>

Through 2022, \$2.2 billion from the International Development Association (IDA) Refugee Sub-window will be available to help host countries manage protracted crises with longer term solutions. This IDA funding follows a similar stream under IDA 18 (2017-2020), and has supported some policy changes at the national levels including:

- A new Ethiopian Jobs Compact to facilitate access to employment for refugees, including work permits, business formalization and access to bank accounts. However, no goals for women refugees are laid out in the related IDA project documents.<sup>82</sup>
- A \$60 million IDA-funded operation in Chad rehabilitates and builds public service infrastructure, and consistent with the new national refugee policy, the target is that 52 percent of the beneficiaries for cash transfer and grant component of the IDA project are women.<sup>83</sup>

However, the 2021 IDA19 Refugee Policy Review found that few policy developments have addressed gender gaps in access to services. The Review recognized several challenges that demand greater attention: limited access to education for refugee girls, barriers to refugee women’s livelihood opportunities, and heightened risks of GBV during displacement.<sup>84</sup> More broadly, the review highlighted the need to better address literacy and school enrolment rates among refugee children, low rates of birth registration and corresponding risks of child statelessness, and access to social safety nets for refugees.

The findings of the review will inform policies and programs supported by IDA20 and strengthen the attention paid to gender gaps among refugee populations in the next phase of the Window for Host Communities and Refugees. On the policy front, reform opportunities, including along gender policy dimensions, have been identified through a refugee policy review framework.

The overall picture and directions of change are positive from the perspective of female refugees. Women’s groups and a range of non-governmental agencies at the global and grassroots levels are doing important work to advance the rights and opportunities of refugee women. Humanitarian agencies, in particular UNHCR, have an established focus on the protection of women, including the prevention of gender-based violence. More recently, major development actors, including the World Bank Group, are moving toward addressing the specific needs of displaced women and girls, and working with national governments to address disparities and gaps. However, as outlined below, attention remains uneven and major challenges persist.

#### **4. Key challenges**

The rights afforded to refugees in global frameworks and the progressive policy pledges at the Global Refugee Forum do not always translate into clear or consistent national policy. There are persistent and sometimes newly emerging gaps on multiple fronts – from legal status through to access to services. The extent to which protection and rights in the international conventions and compacts have translated into domestic laws and policies, and practice is reviewed here, highlighting major gaps, with a focus on the gender dimensions. This includes a review of legal identity, protection against gender-based violence, rights to work, and access to education, health and justice in turn.

Host governments are often resource constrained in terms of providing assistance and access to services for citizens, let alone refugees. The influx of displaced people can put burdens on host

communities, and raise challenges and tensions when assistance is targeted and limited to the displaced, and has led to greater attention to including host communities and promoting social cohesion.<sup>85</sup> Governments face major challenges in prioritizing policy actions where there are limited resources and capacity constraints. Gender disaggregated data is often not collected, and in some cases, awareness and evidence about what works may be lacking. There is also the issue of determining when someone is no longer displaced, which has implications for planning – i.e., whether forcibly displaced persons are seen as temporary or long-term residents.

A related general challenge which has been widely recognized but not fully addressed is the importance of complementarity, coherence and sustainability of humanitarian and development efforts. This is especially critical to policy reforms related to access to education and health, labor markets and social protection, as well as efforts to combat gender-based violence.

#### **4.1 Nationally recognized identity**

For refugees, there are basically two different, but connected, issues: first, the registration of vital events that occur in the host country or have occurred before coming to the host country (birth, marriage, divorce, and death) and to be issued the corresponding civil registration; and second, the issuance of official personal identification (as refugees) which is effectively recognized by national and sub-national authorities, law enforcement entities, and the private sector.

Globally, an estimated one billion people are unable to prove their individual legal identity – because they lack birth certificates or national ID cards – whether or not they have been displaced. This gap disproportionately affects women and girls – an estimated 45 percent of women in low-income countries do not have legal identity. Countries with greatest gender gaps include those with large displaced populations, namely Afghanistan, Chad, Niger, South Sudan, and Ethiopia.<sup>86</sup>

Refugees often receive refugee ID or other proof of their refugee (or asylum seeker) status, but this may not be recognized by national officials or the private sector. In Bangladesh, for example, all Rohingya refugees have access to biometric registration and a formal identity card, but these cards are not accepted as the legal documentation needed to open an account with a bank or mobile financial service. In Cameroon, only some banks accept refugee identity cards and in Pakistan, refugees do not have access to mobile money transfer services as this requires a specific kind of national identity card, which is only available to citizens.<sup>87</sup>

Barriers to Syrian refugees obtaining civil registration documentation (birth registration and certification), in Lebanon and Jordan, for example, reportedly include complex and lengthy procedures, difficulty in accessing documentation, problematic physical access, and illiteracy.<sup>88</sup> The remoteness of some refugee camps can add a further layer of difficulties.

Where displaced women and men lack forms of identification that is formally recognised, this will limit access to employment in the formal sector, accessing financial institutions (borrowing, creating accounts, or withdrawing funds) and health or social services, mobility and owning a property or a business.

Additional challenges can arise for female refugees due to rules around passports and nationality in origin and host countries that have discriminatory legal practices for all women – including citizens. The male guardian's physical presence is still required to apply for documentation in Bahrain, Gabon, Iran, and Saudi Arabia. Legal obstacles to obtaining national documentation that persists in several

countries – including Afghanistan, Algeria, Fiji, Gabon, Guatemala, Jordan, Pakistan, Philippines, and Saudi Arabia – entail obtaining permission from a male guardian, documentary evidence not required of men, and specific requirements based on marital status.<sup>89</sup>

Refugee women face added obstacles to obtaining proof of identity needed to claim legal rights and access services in host communities. In Lebanon and Jordan, Syrian refugees have faced complex and lengthy procedures to register and certify births. Children of Syrian refugees born in other countries cannot acquire the nationality of their mothers under Syrian law. Many Syrian women refugees, who are often separated from their husbands, lack necessary documentation to prove their marriage and the paternity of their children, which can make a child stateless.<sup>90</sup>

Addressing these gaps can require eliminating legal discrimination against women in accessing identity and improving birth registration and certification. While specific efforts may be needed to reach refugee women, broader approaches, like the World Bank's ID4D which supports digital identification systems, should also reduce exclusion and facilitate movement for refugees.<sup>91</sup> The World Bank's Uganda Digital Acceleration Program (2020) includes enrollment programs which target refugee women.<sup>92</sup> Between 2014–2016, the Government of Jordan introduced civil registration offices in refugee camps and mobile registration services near camps, waived registration fees and simplified procedures. By 2016, these measures had increased birth registration among refugees 12-fold, relative to 2013.<sup>93</sup> Additional good practices to facilitate the formal identification and civil registration of refugees include allowing substitute documentation, such as records from local civil or religious leaders.<sup>94</sup>

#### **4.2 Protection from gender-based violence**

Women can face high risks of gender-based violence (GBV) during conflict and subsequent displacement. A systematic review published in 2014 found that at least one in five refugees or displaced women in complex humanitarian settings experience sexual violence.<sup>95</sup> A 2019 systematic review found that rape, unwanted sexual contact, sexual abuse and sexual torture were the most common types of sexual gender-based violence experienced by refugees.<sup>96</sup>

Refugees can experience violence at different stages of displacement. Displaced women and girls in host communities or refugee camps may face violence on various fronts – whether in their own homes,<sup>97</sup> or in the community.<sup>98</sup> There have been reports of rape, sexual abuse and coercion to exchange sex for food and goods from guards, military, police, people in charge of food distribution, at times from local and international aid workers, and men from the local community.<sup>99</sup> Within the home, increased financial stress can challenge men's traditional breadwinner role and sense of masculinity, which can lead to lower self-esteem and negative coping mechanisms including violence against women.<sup>100</sup>

Some 173 countries now have national legislation in place prohibiting violence against women, though these may or may not protect refugee women. Bangladesh's 2000 legislation covers all women, including refugees. Similarly, Cameroon's Women, Peace and Security National Action Plan (2018–2020) adopted measures to protect women and girls, including refugees, from violence before, during, and after conflict.<sup>101</sup> However Lebanon's domestic violence law excludes refugees.

However, women, whether or not displaced, typically do not report violence to the authorities.<sup>102</sup> Many survivors are reluctant to report GBV incidents for fear of reprisal, harassment and perpetrators not being prosecuted. As outlined further below, under access to justice, formal



systems may be difficult to access while community-based conflict resolution mechanisms based on traditional norms tend to disadvantage women and children in cases of GBV. Women have very little say in the proceedings or outcomes of these courts – and can be forced to marry her abuser in a SGBV case.<sup>103</sup> Lack of documentation and the low number of crimes reported to NGOs, UNHCR and the police (particularly involving sexual and gender-based violence) make it impossible to know precisely how many crimes and/or civil issues refugees adjudicate themselves.

UN agencies have introduced various policies and guidance to combat violence, since UNHCR's 1990 Policy on Refugee Women, notably the 2003 recommendations,<sup>104</sup> handbooks and procedures.<sup>105</sup> The 2011 UNHCR strategy shifted the focus to access to services and inclusive programming, for LGBTQ+, child, and/or disabled refugees,<sup>106</sup> while in 2015 the UN Inter-Agency Standing Committee Sub-Working Group on Gender and Humanitarian Action published guidelines to integrate GBV interventions in humanitarian action, differentiating between prevention and mitigation, and addressing risks of GBV during natural disasters.<sup>107</sup> In 2020, UNHCR updated its Policy on the Prevention, Risk Mitigation, and Response to GBV with additional commitments to programming for adolescent girls and older women, livelihoods programming for those at-risk and survivors, as well as safe shelters and access to justice.<sup>108</sup>

Implementation of these guidelines by staff has been uneven and incomplete.<sup>109</sup> Ongoing challenges include inadequate funding.<sup>110</sup> In 2013, a global Call to Action reinvigorated commitments to addressing GBV in humanitarian settings. By 2019, this partnership had 82 members including many UN member states, international organizations and NGOs and local civil society organizations. One example of follow-up in 2017 was the European Commission's Directorate-General for European Civil Protection and Humanitarian Aid Operations allocation of \$76 million USD for prevention and response efforts.<sup>111</sup>

Examples of promising programs designed to protect refugee women and girls from GBV, implemented by local governments, UN agencies, and/or NGOs include:

- An evaluation of Through Our Eyes (2006-2011), a multi-year participatory video project stimulating community dialogue and action in post-conflict settings in South Sudan, Uganda, Thailand, Liberia and Rwanda found positive impacts including greater individual recognition of rights and personal freedoms, improved family gender dynamics, communication and reduced violence within the family, and more equitable treatment of girls and boys.<sup>112</sup>
- In Côte d'Ivoire, evaluation of the *Men & Women in Partnership Initiative* created weekly discussion groups for 174 male participants, using a 16-session curriculum designed to reduce partner violence found that women's experience of current physical and/or sexual IPV decreased and men's belief that a woman can refuse sex increased among intervention group.<sup>113</sup>
- In Lebanon, the Mobile Approach to GBV response and Mitigation Service Delivery provided non-camp based Syrian refugees with case management and psychosocial support services. A 2014-2015 evaluation by the IRC and the ICRW found that participants experienced increased social connectedness, social support, and skills; improved family relations; and reduced distress.<sup>114</sup>
- What Works Initiative funded a Tearfund and HEAL Africa in the Democratic Republic of Congo to change attitudes, behaviors and social norms through training 75 local Christian and Muslim leaders in a faith-based curriculum. Results included a significant reduction in reports of violence against women perpetrated in the past 12 months, with non-partner sexual violence falling from 24 to 4 percent, the share of respondents who agreed that a wife should tolerate violence for the sake of marriage halved and survivor willingness to seek help, particularly from religious leaders, rose.<sup>115</sup>

Ongoing activities include the 'Safe from the Start' Initiatives supported by the US government and implemented by various partners, including CARE, IOM and ICRC, to build capacity to prevent and respond to violence.<sup>116</sup> The World Bank's DRDIP (Development Response to Displacement Impacts Project) in Kenya supported the construction of lighting on pathways and location of supply points to reduce GBV risk.<sup>117</sup>

There are however major gaps in the evidence base on the effectiveness of GBV mitigation measures. A 2020 *What Works* Report examined 48 prevention and response programs implemented since 2015 in humanitarian settings and was unable to classify any intervention as 'effective', although a number were deemed 'promising', as seen in the examples below.<sup>118</sup> Community-based approaches utilizing faith leaders showed promise in response programming, as did community-based programming targeting attitudes, behaviors and social norms. Psychosocial support for survivors has also been shown to be effective, as well as modified case management approaches (e.g. task shifting, mobile service delivery) may reduce some barriers that prevent access to services.

Moreover, funding to address GBV in refugee settings is still very low. In 2021, about \$190 million in humanitarian funding was allocated towards addressing GBV, representing just one percent of total humanitarian spending and translating to an average of only 5 cents per woman.<sup>119</sup> Moreover, only a quarter of requested funding for GBV was met with actual funding, down from about a third in 2020.

The urgency of reducing GBV against refugee women means that efforts to both better understand the risk factors and enhance prevention, as well as building knowledge about effective responses are both important. More deliberate efforts are needed on the parts of international agencies as well as national and local authorities.

### **4.3 Rights to work**

The 1951 Convention stipulates that refugees should be granted "the most favorable treatment accorded to nationals of a foreign country...as regards the right to engage in wage-earning employment" (Article 17) and a "treatment as favorable as possible and, in any event, not less favorable than that accorded to aliens generally in the same circumstances, as regards the right to engage on his own account in agriculture, industry, handicrafts and commerce and to establish commercial and industrial companies" (Article 18-19).<sup>120</sup>

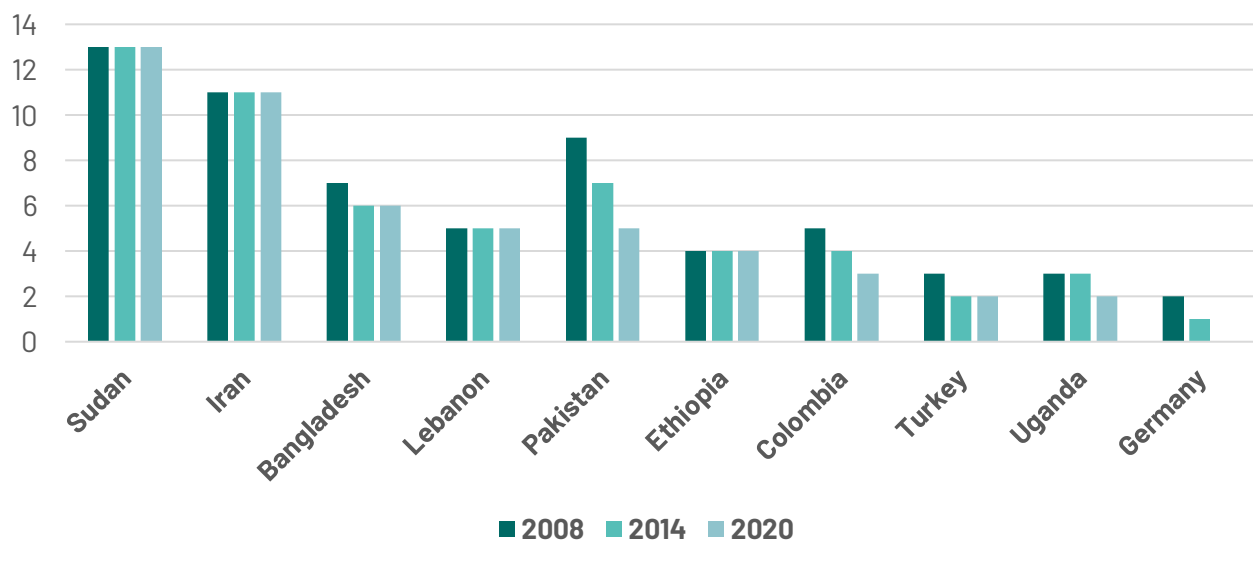
In many countries, the right of refugees to work envisaged in the convention is not the case in practice. Refugee status typically does not automatically confer a right to work, and in some countries, people with refugee status are not allowed to work.<sup>121</sup> According to the KNOMAD database, refugees can work in the public and private sector in 31 countries, and in the private sector in 76 countries.<sup>122</sup> The 2021 GCR report cites a UNHCR survey of 25 countries collectively hosting 11.2 million refugees, where just over half (52 percent) have full access to decent work under the law, but only 38 percent of refugees globally have unrestricted access in practice.<sup>123</sup>

The exclusion of refugees from paid work can increase their dependence on humanitarian and other assistance. A 2017 survey among refugees in Ethiopia, for example, found that female headed households were significantly more likely than male headed refugee households, and host populations, to depend on aid,<sup>124</sup> although this predated the 2019 reforms allowing refugees' greater freedom to work.<sup>125</sup>

There are also formal restrictions on the economic opportunities of all women in a number of refugee hosting countries. In 2021, the 10 largest refugee hosting countries totaled over 75 economic restrictions pertaining to women included registering a business, opening a bank account, having ownership rights over property.<sup>126</sup> The World Bank's Women, Business, and the Law (WBL) index shows, for example, only two of the 10 highest refugee hosting countries prohibit discrimination in access to credit based on gender, three guarantee equal inheritance rights to surviving spouses, four legally protect equal pay, and five have criminal penalties for sexual harassment in the workplace. The DRC's Labour Code explicitly denies women the right to work the same jobs as men, and these stipulations apply to refugees as well as citizens.<sup>127</sup>

As figure 2 summarizes, most of the top 10 hosting countries have not significantly reduced legal barriers facing women over the past dozen years. In Sudan, Iran, Lebanon, and Ethiopia, the same number of barriers in mobility, workplace, pay, and entrepreneurship have remained in place. Trends in Colombia and Pakistan reveal some progress.

**Figure 2: Number of legal restrictions on women seeking jobs in the 10 largest refugee-hosting countries, 2008, 2014 and 2020**



Source: World Bank (2021) Women, Business, and the Law. Washington, DC: World Bank.

Even without formal barriers, discrimination against refugees can impede their access to good jobs.<sup>128</sup> In focus group discussions, Congolese refugees in Rwanda cited employers' lack of knowledge of refugees' right to work as a major obstacle to their labor market integration.<sup>129</sup> (The experiences of discrimination discussed in the focus groups were not sex disaggregated.) A World Bank assessment of economic opportunities for Jordanians and Syrian refugees found that childcare duties and lack of transportation were key barriers to host and refugee women's economic opportunities, leading many to work from home.<sup>130</sup>

Recent analysis of gender gaps in employment rates, hourly earnings, and pay gaps of refugees and the host populations in Turkey, Uganda, Lebanon, Jordan, United States and Germany found large gaps but also significant variation in the extent of gendered occupational segregation, discriminatory social norms, regulatory barriers, concentration in the informal economy, as well as in the extent of social networks and women's organizations.<sup>131</sup>

Non-recognition of their skills, qualifications and diplomas means that many refugees find work in less skilled jobs than their qualifications and experience warrant, and/or in the informal economy. Female refugees can face greater challenges than men if their opportunities are further restricted to typically “feminine” sectors such as cleaning, cooking, garment manufacturing. As is the challenge more generally, gender occupational norms can relegate refugee women, like all women, to unskilled, undervalued and low-paid sectors.<sup>132</sup> Recent studies in Jordan and Lebanon found that refugees who work are more likely to be involved in the informal economy than their host counterparts.<sup>133</sup> In these contexts, refugees – particularly women refugees – can face greater risks of discrimination, harassment and exploitation in the workplace.<sup>134</sup>

On the other hand, new settings may broaden opportunities for refugee women. Evidence from countries including the United States, Sweden, Netherlands, Finland, Switzerland, and the UK suggests that refugees can close the employment gap over time through financial grants, access to education and job search assistance.<sup>135</sup> A 2018 joint report by the London School of Economics and Women for Women International on Iraq found that conflict and displacement can increase access to livelihood activities for female refugees.<sup>136</sup> If women are displaced from countries where women traditionally did not work – for example female labor force participation rates in Syria prior to the conflict were only around 13 percent – they may have more opportunities outside the country.<sup>137</sup> However, focus group discussions with Syrian refugees in Jordan indicated that both men and women often resisted the idea of women working. While men justified their resistance by citing scarce job opportunities, low salaries, and poor treatment, women in the discussions highlighted that the idea of women's work clashes with traditional values.

Development agencies can support the programs and policy changes needed to advance refugees' economic inclusion, some with a focus on women. The most common UNHCR livelihood interventions include support for vocational training, agriculture and artisan opportunities.<sup>138</sup> A 2020 World Bank review of job interventions for refugees and IDPs highlighting several positive findings for cash transfers, training programs combined with other interventions such as business skills, language training and job search assistance. Unfortunately, however, the assessment did not cover the gendered dimensions of jobs interventions for refugee women.<sup>139</sup>

While training programs can both enable refugee access to higher learning and can boost refugees' well-being and future aspirations, female refugees' access to training programs may be restricted by gender norms that discourage women from appearing in public spaces, as well as the lack of childcare options. One study of refugee training programs in Greece found that men dominated enrolment because gender norms that limited the movement of women and girls meant they could not participate.<sup>140</sup> There were similar findings for women and girl refugees in Jordan who wanted to learn and work but were not able to access training due to cultural norms.<sup>141</sup> And for many camp-resident women, attending skills training and working outside camps was difficult because of the distance, time and costs involved, as well as security concerns.<sup>142</sup>

There are a number of recent examples of support for policy reform designed to open up economic opportunities for refugees. The World Bank and others have supported the Ethiopian government's Jobs Compact initiative to issue 30,000 work permits for refugees.<sup>143</sup> The compact allows access to work permits and primary education, and allows refugees to obtain drivers' licenses, legally register life events such as births and marriages and open bank accounts. However, no specific target for percentage of female refugees was set, and no sex-disaggregated data was available as of November 2021.

The Ethiopian compact is modeled on the 2016 Jordan Compact wherein the government undertook to allow up to 200,000 work permits for Syrian refugees over a three-year period with over US\$1.7 billion of concessional financing.<sup>144</sup> The associated World Bank project targeted 1000 officially registered home-based enterprises, of which only 100 are Syrian refugee owned and 100 female owned – and female refugee ownership was not an explicit priority.<sup>145</sup> As of the end of 2020, over 2,400 permits were issued to Syrian women and 720 women owned home-based businesses were established.<sup>146</sup> The policy changes in Jordan were coupled with expanded employment opportunities – albeit mostly in unskilled jobs.

However, concerns have been raised in Jordan about refugee working conditions and their bargaining power, as well as the accessibility of permits. The Jordan Compact did not address gender-based barriers such as unpaid care work and women’s fear of harassment and discrimination in public spaces and workplaces. Recent policy reversals make it more difficult to register home-based businesses, which likely affect women more given evidence that women refugees would prefer to work from home.<sup>147</sup>

In Latin America, MERCOSUR and the Andean Community created regional migration arrangements allowing citizens of South America to be granted residency and work permits, with an opportunity for permanent residence after two years. However, the agreement has not been implemented consistently in each country. And unlike free mobility in the European Union, where EU law supersedes national law, the Mercosur agreement is an international treaty implemented by individual countries. For example, Uruguay went beyond the agreement to directly grant permanent residence to those applying for a permit, without the two-year temporary stay.<sup>148</sup>

The evidence overall reveals significant variation in the experience of women refugees in the labor market – depending on host country economic conditions, gender norms and legal and policy variables.

#### **4.4 Social protection**

Social protection programs provide direct income support and can be designed as an entry point to help facilitate the expansion of future opportunities, through access to counselling, training, and job search support, for example. Social protection programs with design features that respond to women’s care responsibilities and address barriers to women’s economic opportunities are especially important for refugee. Cash plus approaches, for example, complement direct transfers with training, key information, and access to services, aiming to address multiple constraints at once and ensure that women can maximize the potential of cash transfers.<sup>149</sup> Cash transfer programs with Syrian refugees in Lebanon have helped women regenerate community bonds and social networks, and another that linked the transfer with training in budgeting, debt management and banking services.<sup>150</sup>

Social protection is also known in humanitarian settings as cash and voucher assistance, and cash transfer programming. Displaced people and communities who have fled conflict often depend heavily on this assistance for survival. Cash transfers can be especially beneficial to women by increasing their agency and ability to participate in household decision-making.<sup>151</sup>

Traditionally, most humanitarian assistance was provided in kind, but there has been a trend over the past two decades toward the use of cash-based modalities such as vouchers, e-transfers, and

direct cash transfers. Social protection includes the range of policies and programs adopted by national and local governments to alleviate and/or prevent poverty and vulnerability when individuals or households face shocks or risks along the lifecycle.<sup>152</sup>

The 2016 Grand Bargain included commitments to increase cash transfer programming in humanitarian aid in an attempt to improve the effectiveness and efficiency of humanitarian action. Accumulating evidence – including a recent systematic review<sup>153</sup> – suggests that cash-based humanitarian assistance approaches can increase food security and are more cost effective than in-kind food transfers.

Moreover, consistent with the vision of the 2018 Global Compact for Refugees, greater coherence and collaboration between humanitarian assistance and government social protection programs can strengthen the wider humanitarian–development– peace nexus. Aligning international humanitarian assistance with government social protection programs can be a key step towards paving the way for inclusion of refugees and IDPs into government social protection systems as part of sustainable solutions.

In practice however, protection gaps can arise for individuals and families between humanitarian assistance and the national social protection system. Preliminary research findings in Greece suggests that refugees are either unaware of social protection programs, or face significant entry barriers to access – because they lack a social security number, a tax registration number or a bank account– prerequisites for registration for state benefits programs, and very few of refugees interviewed were receiving any form of state benefit.<sup>154</sup>

Refugees residing in developing countries are often excluded from government social protection responses, with the exception of Latin America and the Caribbean. Where refugees are not included in social registries, alternative approaches to targeting, such as collaborating with international humanitarian actors with refugee databases, could be pursued, and vice versa. Two recent examples have emerged during the COVID pandemic. For example, in Jordan, the government used UNICEF’s RapidPro communication technology, a tool that allows for feedback between donors and beneficiaries, to expand cash transfers to both host communities and refugees, and the World Food Program used the Colombian government’s SISBEN database on family living conditions to better target displaced Venezuelan households in COVID-19 relief efforts.<sup>155</sup> Internally displaced people may also be missing from local registries. It is clearly important that social registries include displaced people, and that eligibility criteria can be reviewed in light of what is known about the profile of disadvantaged displaced individuals and families, including the shape of gender inequalities.

When designing these programs, the restrictions in mobility and safety concerns of women having to mobilize to receive cash or vouchers should be taken into account. Strategies to avoid harm when receiving payments/vouchers such as hiring men to pick up disbursements and receive part of them as payment should be closely monitored. Electronic transfers may be safer for women if available in the displaced setting.<sup>156</sup> Digital cash transfers can also be beneficial by depositing money directly into women’s accounts, increasing women’s control over assets and strengthening women’s decision-making power.<sup>157</sup>

ODI recently concluded that the availability of external funding that covers both refugees and host communities has facilitated the inclusion of refugees in social protection responses to COVID, citing a World Bank loan for Colombia’s Ingreso Solidario.<sup>158</sup> However, concerns about costs may limit

inclusion. This is reportedly the case in Jordan, where there is a general commitment to eventually include refugees in the government social assistance program, but concerns around funding mean that there is not yet a clear roadmap.

#### **4.5 Clean energy**

Access to energy is important for households, and needed for many economic activities, health centers and community safety.<sup>159</sup> Improved energy access also facilitates women's access to television and the internet, which in turn could enhance women's voice and agency.<sup>160</sup> Forcibly displaced people often face constrained access: the Moving Energy Initiative estimates that about 97 percent of displaced persons in refugee camps have limited or no access to electricity.<sup>161</sup> In Ethiopia, for example, female-headed refugee households are less likely to have access to electricity than male-headed refugee households.<sup>162</sup>

Gender norms in most developing country settings mean that women and girls, including in displaced families, do most of the cooking and fuel collection. The use of firewood and lack of electricity has been linked to multiple risks for women including gender-based violence.<sup>163</sup> Women also experience heightened risks of respiratory infections from the use of firewood as a source of cooking fuel.<sup>164</sup> In Uganda, for example, a 2015 study found that 97 percent of refugees use firewood for cooking and walk 4-10 km to collect.<sup>165</sup> The time involved in collection may limit opportunities to attend school or engage in paid work.

The gender dimensions of energy have been well recognised for at least a decade -- as reflected in the UN's Sustainable Energy for All Decade (2014-2024) - but not always well addressed in the context of displacement. In 2018 the GCR called for increased investment in renewable energy in countries hosting refugees, in order to secure "safe access to fuel and energy"; however, of the 1000+ pledges from the Compact, only three addressed energy and gender.<sup>166</sup> The UNHCR Energy Strategy, 2019-2024, lays out important global initiatives and various targets and indicators, but no explicit reference to women or sex-disaggregated data.<sup>167</sup>

Since 2012, the World Bank's Energy Sector Management Assistance Program (ESMAP) has funded a range of activities, including the Energy Access for Host Communities and Refugees initiative in Bangladesh, the Horn of Africa, the Lake Chad and Sahel Region, and the West Bank & Gaza.<sup>168</sup> For example, ESMAP supported a \$5 million energy project in Bangladesh targeting Rohingya refugees which finance approximately 100 solar nano grids in the camp area to increase access to clean and sustainable electricity to energy-poor households and shared facilities like health centers and learning centers. As part of the project, UNFPA and the Local Governing Engineering Department of Bangladesh have implemented GBV prevention measures, including the establishment of 16 women friendly safe spaces in camps and host communities and training for GBV case workers on topics such as psychosocial first aid, case management, and suicide prevention.<sup>169</sup> An ongoing World Bank project in Chad is seeking to reduce firewood consumption to decrease the vulnerability of girls and young women when seeking household fuel.

Some interventions have sought to limit the need to collect firewood, which can benefit both the environment and women's safety. Promising examples include Nyarugusu refugee camp in Tanzania, where refugee women are making stoves that use much less firewood and create less indoor smoke pollution, which helped reduce risks of sexual and gender-based violence for the women who have to leave the camp to collect firewood.<sup>170</sup> In Dadaab refugee camp in Kenya,

reported rapes while collecting firewood fell by 45 percent during periods when households were fully supplied with firewood as compared to periods when they were not.<sup>171</sup>

#### **4.6 Access to education**

Education is a basic human right. Many studies indicate that accessing even primary level education for refugee girls can have benefits – reducing child deaths from diarrhea, malaria, and pneumonia<sup>172</sup> and child marriage.<sup>173</sup> Multiple studies demonstrate gains for future earnings from staying in school – UNESCO estimates that each additional year of school can increase a woman’s earnings by up to 20 percent.<sup>174</sup> Conversely, research from the Gender Dimensions of Forced Displacement program at the World Bank across Ethiopia, Sudan, and multicounty studies found that education deficits impacted women’s economic opportunities.<sup>175</sup>

According to UNHCR, refugee children can access primary education in the same way as citizens in three quarters of countries, but this share drops to two thirds for secondary school.<sup>176</sup> For primary education, there is considerable regional variation, ranging from equal access in 97 percent of European countries to just 17 percent in MENA. A number of host country governments have worked to remove barriers for refugees, including through providing access to language classes and removing identification paper requirements.<sup>177</sup> In Turkey, for example, new national legislation in 2014 established a curricular framework for informal schools and temporary education centers. Similarly, Uganda’s 2018 Education Response Plan for Refugees and Host Communities aimed to build new classrooms, provide textbooks and desks, strengthen curriculum, and hire more teachers with diverse language backgrounds.<sup>178</sup> Ecuador’s 2008 constitution recognizes the right to asylum, granting refugees equal access to education and healthcare.<sup>179</sup> Chad’s government is increasingly integrating refugee camp schools into national systems—in 2018, 108 camp-based schools became public schools.<sup>180</sup>

However, there are major gaps for refugee children, and especially girls. The 2021 GCR report highlights that in a quarter of countries, refugee children cannot legally access primary education in the same way as host community children. For secondary school, the share is even higher at 34 percent. There are significant gender gaps: primary gross enrolment rates were estimated at 70 and 67 per cent, for boys and girls, respectively. Secondary gross enrolment rates were reported at 35 per cent for boys and 31 per cent for girls.<sup>181</sup>

Even if governments permit refugee children to enroll, they may face barriers due to registration requirements, fees, distance, dangerous or costly transportation, and high costs of school supplies.<sup>182</sup> These barriers can be especially significant for refugee girls, who face compounding barriers to education as a result of both their gender and displacement status. UNHCR has highlighted that the barriers to girls’ education include the distance to the nearest school, the high cost of transportation, the need to help with household chores, health problems, and gender norms adverse to girls’ education.<sup>183</sup> Additionally, data on learning outcomes disaggregated by displacement status is virtually non-existent, rendering it impossible to know how refugee children are performing in school relative to their host country counterparts.

One challenge that especially impacts girls is the risk of rape and sexual assault by school teachers, including being forced to exchange sex for scholastic materials and good grades, which can make parents are reluctant to send girls to school.<sup>184</sup> Another major issue for menstruating girls is that lack of adequate sanitary material can mean that they miss one week a month of schooling, and this causes many to drop out of school.



For example: in Pakistan, UNHCR's 2020 participatory survey of refugee communities revealed a lack of qualified female teachers (particularly at higher grades); school facilities that do not meet sociocultural and religious expectations; long distances and lack of transport; safety concerns and sociocultural practices, such as early marriages.<sup>185</sup> A 2019 survey of 260 refugee girls living in the Nakivale refugee settlement in Uganda revealed that 43 percent missed school during their period due to physical pain, inadequate access to menstrual hygiene products, and fear of stigmatization.<sup>186</sup>

Accessing education can be more difficult for undocumented refugee boys and girls,<sup>187</sup> not least because their families are fearful of the authorities and deportation. However, sex-disaggregated information on this point is generally not available.

The closure of schools, borders, and service centers during the pandemic have exacerbated existing inequalities.<sup>188</sup> The Malala Fund predicted that as a result of COVID-19, half of all refugee girls in secondary school would not return when classrooms reopen.<sup>189</sup>

Refugees, teachers, and governments have been developing ways to keep education services going during the lockdown. Innovations documented by UNHCR ranged from Egypt moving its entire curriculum online, to a teacher in Dadaab refugee camp broadcasting lessons over a local radio station.<sup>190</sup> Mobile classrooms in Bolivia, new roles for parent-teacher associations in Chad, and a learning content platform in Uganda were ways around the obstacle of low or no connectivity for schools serving refugee children. Evidence on effectiveness or effects on refugee girls is not yet available. However, the emphasis on digital learning raises important considerations for displaced persons: refugees are half as likely than the general population to have a phone with access to the internet; harmful gender norms and safety concerns make some parents reluctant to allow girls access to devices; and 29 percent of refugee households worldwide have no phone at all.<sup>191</sup>

In 2019, UNHCR published a global framework and strategy for education, which highlights gender-specific barriers including sexual and gender-based violence, early pregnancy, and child marriage. It calls for equal access to technical and vocational training for women and girls without gender-stereotypical programs and for gender-responsive curricula, teaching and learning training and materials, as well as education data that is disaggregated by gender.

Some examples of good practices for advancing refugee girls' education are outlined in box 2.

### **Box 2 Examples of good practice in refugee girls' education**

Research to date has tended to focus on projects that are implemented either in parallel with, or complementary to, national education systems. A recent systematic review concluded that the current body of evidence on the effectiveness of education programming in national systems for forcibly displaced children, let alone gender impacts, is very limited.<sup>192</sup>

There is however some encouraging project evidence about what works to improve refugee girls' education including unconditional cash transfers in Lebanon that were found to boost school attendance, though not enrollment.<sup>193</sup> While this intervention did not find significant gender-differentiated impacts, other evidence suggests that well-designed cash transfer programs can improve girls' attendance in school when bundled with interventions focused on improving girls' learning outcomes and school quality.<sup>194</sup>

Examples of where stakeholders have worked together to expand educational programs for refugee girls include:

- Since 2013, UNHCR and Vodafone Foundation have partnered to expand refugees' access to education and connectivity through the Instant Network Schools program in Kenya, Tanzania, South Sudan and the DRC, reaching over 130,000 refugee students and over 2,000 teachers.<sup>195</sup> However, sex-disaggregated data or gender evaluations are not available.
- In 2018, the World Bank committed US\$ 130 million for Cameroon to, among other things, support the education needs of public schools in host communities with refugees, with an emphasis on girls' education.<sup>196</sup> The project targets are for gender parity in both pre-school enrolment and teachers, although no progress has yet been reported on these indicators.
- UNICEF's 2020-25 strategic plan for Syrian refugee children in Turkey includes increasing preschool enrollment for refugee children from 31 to 45 percent and secondary education enrollment from 33 to 50 percent.<sup>197</sup> Target indicators on enrollment are sex disaggregated for Turkish children, but not for refugees.<sup>198</sup>

While information about the effectiveness of initiatives to address refugee girls' inclusion in education is limited, there are some promising results. Providing female teachers, girls-only schools, accelerated learning programmes, community-based schools, and approaches to distance learning for primary, over-age, and secondary students have all shown promise for increasing refugee girl enrollment and retention rates.<sup>199</sup> Rigorous studies of the effects of retrofitting school structures with gender-segregated latrines, community monitoring, and school vouchers also find some positive effects on access to education. Improved access to education is also associated with reduced incidence of child marriage.<sup>200</sup> Much more research is needed to understand how refugee girls and boys and their parents respond to interventions that promote access to education and quality of learning.

Recommendations for national governments to facilitate refugee access include passing legislation that protects refugee rights to education and demonstrating flexibility around documentation requirements (such as transcripts and examination results) for children who have documentation from other states or no documentation at all.<sup>201</sup> Most relevant to girls are providing safe and accessible travel options to and from school, providing hygiene infrastructure, dedicating programming to address missed schooling and language differences, and designing specific measures to support refugee girls who have dropped out, or who are at risk of dropping out, of education.<sup>202</sup>

#### **4.7 Access to health services**

The health needs of refugees are often large, due to higher risks of communicable diseases, chronic diseases and mental illness compared to non-migrant populations,<sup>203</sup> as well as often unsafe working and/or living conditions.<sup>204</sup> Refugee women and girls often bear the brunt of food insecurity in host communities and camps and are more likely than the host population to experience poor nutrition.<sup>205</sup> The most recent available global estimates are that 60 percent of preventable maternal deaths in 2014 occurred in settings of conflict, displacement, and natural disaster.<sup>206</sup>

The 1951 Convention acknowledges the right to health for refugees, and that refugees should have access to the same or similar treatment as host populations with respect to public relief and social security – which has been interpreted as including healthcare.<sup>207</sup> This has been reaffirmed on several occasions, including in the 2018 GCR, which called the expansion and enhancement of the quality of national health systems for refugees and host communities.<sup>208</sup>

KNOMAD's Migration and the Law database reports that in 100 countries, refugees can legally access healthcare services on par with citizens<sup>209</sup> and the World Bank's Mid-Year IDA19 review found that an increasing number of countries have taken steps to include refugees into their healthcare systems.<sup>210</sup> For example, by law in Chad, refugee women and girls have equal access to the sexual and reproductive health services and other women's health services, and Niger's legal code similarly makes free sexual and reproductive healthcare services equally available to refugee women.<sup>211</sup> In Algeria, the government provides equitable access to universal health coverage, including access to quality essential services, medicines and vaccines and health care financing for refugees.<sup>212</sup> Rwanda has included urban refugees in the national healthcare system and in Uganda, 72 percent of health facilities in refugee-hosting districts have been formally accredited by the Ministry of Health.<sup>213</sup> Algeria and Rwanda are among the ten countries in Africa that offer free and universal healthcare.<sup>214</sup>

Yet, accessing health services remains a key challenge for refugees, especially for women, for a range of reasons, ranging from limited mobility, to complicated service structures, unfamiliar/infrequent service delivery, cost of services, health literacy, and communication barriers.<sup>215</sup> In Europe, affordability was identified as the major barrier to access maternal healthcare, and patient knowledge of contraception, sexual health or sexually transmitted diseases was limited.<sup>216</sup>

Recent efforts to address gaps include the first global action plan addressing the health of refugees and migrants, launched by the WHO in 2019, following a decade of consultations. Recommendations to promote gender equality through health in refugee contexts include supporting affordable and non-discriminatory access, including to sexual and reproductive health and reproductive rights for women and providing support for surveillance tools and mechanisms for data on the health of refugees and migrants to inform gender-responsive programs and services.<sup>217</sup> The action plan is intended to influence policy norms and practice, and is not binding.<sup>218</sup>

Displaced women may have limited access to sexual and reproductive health care services during flight and in the host setting.<sup>219</sup> Box 3 highlights selected programs to address sexual and reproductive needs of refugee women and girls.

### **Box 3 Programs to address sexual and reproductive health needs of refugee women and girls**

*Ethiopia.* From 2006-2014 the Biruh Tesfa Project, operated by the Population Council, provided training on literacy, financial literacy, life skills, entrepreneurship and education about HIV and reproductive health to both host community and refugee girls in urban areas. Out-of-school adolescent girls in urban slums in 18 cities in Ethiopia, obtained social support for violence as well as assistance in developing communication and psychosocial skills. Mentors provided the girls with vouchers for subsidized or free medical and HIV services at participating clinics. Of the participants, 2/3 were refugees.

*Regional, Latin America.* In 2019, UNFPA led an initiative to provide health services to Venezuelan Refugees at transit points. In Cúcuta and Maicao (Colombia). UNFPA is working with the government and humanitarian partners to help women receive reproductive health care, including access to maternal health care, contraceptives and other critical services. In addition, UNFPA is also distributing dignity kits, which contain hygiene supplies including sanitary napkins, soap and

shampoo, as well as information on where to find health and psychosocial support services. As of June 2019, around 2,300 dignity kits have been distributed, and 2,600 women have been reached with contraceptives. More than 2,300 women and adolescents have received information about sexual and reproductive health and gender-based violence.

*Lebanon.* Since 2017, the Ministry of Public Health provided free immunization, vaccines, acute and chronic medications for displaced persons in its centers in urban and border areas regardless of nationality. The services were subsidized for displaced persons and refugees cover consultations fees, laboratory tests, antenatal care and other reproductive health services as well as the management of infectious and chronic diseases.

*Jordan.* The World Bank's Emergency Health Project supported the national government in providing critical healthcare services to poor and uninsured Syrian refugee women, with capacity building for the Ministry of Health, including training on GBV and barriers to accessing health care.<sup>220</sup>

Sources: WHO Africa. (2018). Health of refugees and migrants: Practices in addressing the health needs of refugees and migrants. Available at <https://www.who.int/migrants/publications/AFRO-Practices.pdf?ua=1>; WHO Eastern Mediterranean. (2018). Situation analysis and practices in addressing the health needs of refugees and migrants: Examples of public health interventions and practices. Available at <https://www.who.int/migrants/publications/EMRO-report.pdf?ua=1>; UNFPA. (2019). Dignity and strength: Venezuelan refugees and migrants in Colombia. Available at <https://www.unfpa.org/news/dignity-and-strength-venezuelan-refugees-and-migrants-colombia>

Evidence from high income countries show that schools may be the key route to mental health services for refugee children. Reviews of school-based mental health interventions differentiate between those based on creative expression and cognitive behavioral therapy.<sup>221</sup> However teachers may not be equipped to offer these types of support.<sup>222</sup> In Syria, the NGO Assistance Coordination Unit found that 73 percent of teachers surveyed had no training in providing psychosocial support for children in their classrooms.<sup>223</sup>

As on other fronts, undocumented refugees are at the greatest risk of exclusion from health care. Access to health care by undocumented migrants is not guaranteed in the European Union, for example. In many countries –Switzerland, Ireland, The Netherlands, Norway, Slovenia, Turkey, and the UK– undocumented individuals can only access health care if they can cover the full cost, unless a country allows free emergency care. Emergency services exclude access to prevention, primary care and early intervention, and force these individuals to wait until diseases worsen and become more expensive to treat.<sup>224</sup>

The Minimum Initial Services Package for Sexual and Reproductive Health developed by the Inter-Agency Working Group on Reproductive Health in Crisis has promoted a with four main goals aimed at preventing sexual violence, transmission of and reduce morbidity and mortality due to HIV and other STIs, excess maternal and newborn morbidity and mortality and unintended pregnancies.<sup>225</sup>

Actions to improve access to health services and quality of care for refugees include:

- Adopting and implementing inclusive national policies for full healthcare coverage for all refugee women and for their children regardless of legal status.<sup>226</sup>
- Improving information and training of health professionals on refugee children and adolescents' health-related issues.<sup>227</sup>
- Training practitioners and intercultural mediators to provide them with the skills needed to deal with refugee trauma and to become familiar with international guidelines on providing care for

victims of violence.<sup>228</sup> In Egypt, a community-based psychosocial workers network is providing culturally-relevant psychosocial and mental health support to Syrian refugees.<sup>229</sup>

It is important that the COVID pandemic does not derail progress in addressing the health needs of refugees.

#### **4.8 Access to justice**

It has long been recognised that access to systems of justice is essential to ensuring the protection of refugees' basic rights. Article 16 of the 1951 Convention provides that refugees are entitled to access the courts and legal assistance, and similar treatment under the law as nationals.

However, host nation systems of justice may not guarantee gender equality to any women, regardless of displacement status, meaning that women can encounter deliberate discrimination against women, and/or lack of legal protection. Discriminatory laws have a range of repercussions – barring women from owning property, feeling disempowered in work environments, being stuck in abusive relationships, unable to open bank accounts or take out loans – all of which can act as serious barriers to access to justice.<sup>230</sup> Adverse gender norms can further curtail women's abilities to obtain justice.<sup>231</sup> When refugee women seek justice, they can face pre-existing legal gender inequalities. This is exacerbated by higher illiteracy rates among refugee women and girls, and where norms prevent women from seeking counsel alone – particularly if the legal expert is male.<sup>232</sup>

In most countries, the right to legal aid for citizens is part of national legal frameworks – from constitutions to specific national laws and dedicated policies on legal aid.<sup>233</sup> However, the government typically does not provide legal services to non-citizens. A study of 68 countries in 2016 found that only about one in four provided legal aid to refugees.<sup>234</sup> Djibouti is one country that does afford equal access to legal services and counselling to citizens and refugees alike, under its 2017 Refugee Law. In Burkina Faso, UNHCR has partnered with the government to mobilize a mobile court system to expand birth registration among refugee communities.<sup>235</sup> However, implementation is limited in practice due to resource constraints and long travel distances.

In practice, refugees often face hurdles as a result of poverty, marginalization, language barriers and discrimination,<sup>236</sup> alongside discriminatory laws. Refugees can face legal problems linked directly to their displacement, such as status determination hearings, as well as family, civil, and criminal matters. Studies in Jordan, Uganda, Tunisia, and Colombia have documented how female refugees were more likely to experience family related legal problems (such as alimony, child support, divorce, and child custody), as well as legal issues arising from denial of social safety net benefits.<sup>237</sup>

Barriers to both women and men refugees accessing formal national justice systems identified by UNHCR<sup>238</sup> include physical distance from legal institutions and services, lack of familiarity with host country formal legal system and lack of resources and adequate legal representation, as well as language barriers, fear of discrimination and lack of legal status of the refugee victim.

Refugee women can face additional barriers – notably:

- Cultural stigma – restrictive social norms such as shame or fear of revenge. This can mean that women do not feel comfortable starting their justice journey or even seeking help from informal institutions.

- Knowledge of rights/services – Particularly in poor countries, a large gender gap exists between men and women knowing where they can get the advice they need to pursue justice.
- Fear of, and actual rape and sexual abuse by police and other people in the justice system has been reported in a range of settings.<sup>239</sup>

More work is needed at the intersection of refugee status and gender to understand the specific barriers facing refugee women and girls.

Many disputes— particularly in refugee camps— are handled by systems of traditional justice, that is community leaders or village courts.<sup>240</sup> According to UNHCR’s Guide on Operational Protection in Camps and Settlements, “refugee elders, traditional judges, or refugee leaders, who are either elected or appointed and who can arbitrate disputes, assign guilt, and impose punishment” administer traditional justice and mostly reflect mediation and punishment practices from refugees’ countries of origin.<sup>241</sup> Traditional justice, along with ‘discipline committees’ or ‘grievance committees’ are forms of Refugee Dispute Resolution Systems (DRS) and usually overseen by men.<sup>242</sup>

Box 4 highlights the nature of traditional systems of justice encountered by Rohingya refugee women in Cox Bazar and shows the unique barriers to women refugees accessing justice within the patriarchal system.

**Box 4 Barriers facing refugee women accessing traditional justice: Cox Bazar, Bangladesh**

For the Rohingya, all disputes are first raised through the Majhis: an unelected, traditional system of community representatives established in previous waves of displacement. Most Majhis and meditation leaders are male members of the Rohingya community which can make reporting sexual injustices more difficult for survivors.

Patriarchal norms mean that women rely on their male head of household to engage with the Majhis. In cases of intimate partner violence, this means that a survivor of violence must convince the male head of house to bring her case before the Majhis. This places additional pressure on survivors to prove their case and increases opportunities for revictimization even before beginning the process of seeking justice.

Also, the Rohingya community and Majhis frequently engage in victim blaming and shaming survivors due to the cultural understanding that women hold responsibility for the violence they experience. The meditation process relies on the voluntary presence of disputing parties in proximity, creating risks of further physical harm, trauma or social stigma for GBV survivors. The Interagency Gender-Based Violence Case Management Guidelines, Providing Care and Case Management Services to Gender-based Violence Survivors in Humanitarian Settings do not recommend mediation for GBV cases.<sup>243</sup>

Source: IRC. (2019). Access to Justice in Crisis: Legal Empowerment for Rohingya Refugees Living in Cox’s Bazar, Bangladesh.

Available at: <https://www.rescue-uk.org/sites/default/files/document/2078/accesstojusticeincrisis.pdf>.

Studies have found that when women are informed of their rights, they may be able to pressure their local leadership to ensure better protection under the customary judicial system. Reported examples include Malawi, Cambodia, Bangladesh, Timor-Leste, and Indonesia, where education

campaigns, street theatre, literary courses, and distribution of guidebooks for women and marginalized populations increased their legal awareness and offered valuable entry points for human rights campaigns.<sup>244</sup>

The COVID-19 pandemic has underlined specific threats facing forcibly displaced women in their pursuit of justice. Mass quarantine measures have heightened the risk of abuse for women and girls. Border closures have created long delays and cases of denial of justice.<sup>245</sup>

Ensuring enforcement of rights and access to justice is a critical underpinning to enabling equal opportunities for refugees, and the constraints facing women and girls require specific attention. Failure to do so will have adverse repercussions across multiple dimensions, including access to paid work, adequate services and safety.

## **5. Conclusions**

Refugees around the world are grappling with a range of challenges, from legal status through to accessing health care and finding gainful paid work. These challenges are often most difficult for women, especially when compounded by risks of gender-based violence, and have been amplified by the COVID-19 crisis.

International treaties have established important basic rights for refugees, which in several cases have been further enhanced by regional agreements. More recent compacts have explicitly recognised the larger constraints and risks that can face refugee women and girls. However, the extent to which national and local institutions, policies and programmes operate to enable equal access for displaced people, and displaced women and girls, varies significantly across countries. In some cases, there are specific barriers and deliberately exclusionary policies, which appear to be worst in countries where gender norms limit women's mobility, autonomy, and choice.

A cross-cutting challenge is the lack of disaggregation of data by sex, age and diversity. This is reflected in the most recent report on the GCR indicator framework. There is general consensus and international guidance on the inclusion of refugees in national statistical systems, but greater investments are needed. The UNCHR-World Bank Joint Data Center on Forced Displacement, working to strengthen the capacity of national governments in including forcibly displaced persons in national surveys, is an important initiative on this front.

We also identified a range of cases of promising reforms and approaches that intentionally seek to close existing gaps and undertake efforts to ensure inclusion. In many cases, impressive gains have been made – particularly through partnerships and coordination between various actors. However, there is clearly a need for development partners to accord more explicit attention to the needs of displaced people and especially women and girls. This appears to be recognised in the Global Compact for Refugees as well as in recent innovations to the World Bank Group's IDA, as is the importance of multi-actor partnerships.

Both displaced persons and host communities would benefit from national policy approaches that allow – indeed ensure – refugee access to the labour market, as well as to health care, education, and justice. Our assessment of the current policy and program landscape also pointed to the need for refugees, and refugee women and groups, to have voice and active roles in discussions and development of policy.

Looking ahead, there is need for gender disaggregated data to better understand refugee needs, know what policies work, and allow for more systematic tracking of gaps and progress, again distinguishing opportunities and outcomes for different groups. More funding is also to overcome the systematic gaps that limit the operations of UNHCR and other agencies undertaking important work on the ground, not least for programs that would directly benefit women and girls.

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