

GBV AoR HELPDESK

Gender Based Violence in Emergencies



Guidance Note: Exit Strategies in the Event of Premature and Permanent Gender Based Violence (GBV) Emergency Response Program Closure

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Introduction

The aim of this short guidance note is to provide international GBV responders with practical guidance on developing exit strategies and contingency plans. This is to ensure they are prepared should a GBV emergency response program be forced to close permanently and prematurely with little notice. This paper intends to fill a knowledge gap and create a resource that can offer up ways forward which improve sustainability and advance the-localization of GBV prevention and response.

Part 1: Understanding Program Closures and their Potential Triggers

In the first part of this paper, we will define what we mean by emergency response program closure and explore what this looks like in practice. We will also explore what circumstances might trigger the premature and permanent closure of a GBV emergency response program at short notice. e.g., a change in administration; a deterioration in the security situation; expulsion by a host government; and finally, funding shortfalls.

1.1. Understanding Program Closures

An emergency response program closure usually refers to the withdrawal of program staff and resources from a program area, or a specific community within a program area.

There usually are three stages when an international GBV emergency response program closes¹:

- (i) **Stage 1 Phase down:** This refers to a situation where international GBV responders gradually reduce program resources and activities, e.g., the number of staff and the hours and days of operation.
- (ii) **Stage 2 Phase over:** This refers to a situation where international GBV responders gradually transfer tangible assets and responsibility for delivering services to an international non-governmental organization (INGO), a national non-governmental organization (NNGO), a community-based organization (CBO), or a women-led organization, group or movement.

¹ Whilst this terminology is generally applied to international GBV response programs, it can also be used to apply in situations where GBV response programs are being implemented by national and local actors.

- (iii) **Stage 3 Phase out:** This refers to the complete withdrawal of international GBV responders and their resources and the cessation of their program activities.

In principle, the phase-out of a GBV emergency response program should happen once the protection needs arising from the emergency situation no longer exist. These changes trigger the classification of a response from humanitarian relief to a recovery operation, thus prompting the exit of actors who focus specifically on emergency response. The actors that remain should then work to facilitate from transition response to early recovery to development. In reality, however, this process is not always linear. Peacebuilding efforts can break down and parties to a conflict can renew hostilities. Natural hazards can emerge. Early recovery and development efforts can be thwarted and emergency response may once again be necessary.

As well as contextual factors, programmatic criteria should also guide the decision as to when and how a GBV emergency response program should close and withdraw staff and resources. Programming should be guided by a results framework which details the intended impact, outcomes and outputs and there should be indicators to verify results. Once particular outcomes have been achieved, it might be that staff think it is time to transition the programming to a new phase to meet emerging needs, building on lessons learned. It is critical for staff to consult with women and girls about this decision. They should consult and engage with women and girls to understand what services they have found most beneficial and would like to see continue and how they would prefer these to be delivered. Staff working with a UN agency or INGO should then explore whether it is feasible to transfer tangible assets and responsibility for service delivery to national and local stakeholders, such as government institutions, NNGOs, CBOs, and women-led organizations, groups or movements. In an ideal situation, it is after having gathered such information that international GBV responders develop transition or exit strategies, with this being factored for as part of the initial design process.

1.2 Understanding Potential Triggers for Premature and Permanent Program Exits

There are several types of circumstances which occur which result in international GBV responders phasing out programs prematurely, permanently and, at short notice. These include, but are not limited to:

1.2.1 Changes in Administration at the National and Local Level

This refers to situations where a country, or specific region, is subject to a change in administration, e.g., another state actor invades and assumes control, or there is a military coup, or a non-state armed group seizes power. In such situations, INGOs may no longer have authorization to operate or encounter access restrictions which do not allow them to access affected populations. Staff may be at risk of retaliatory attacks due to their association with a previous administration. It is due to this type of situation, that emergency response programs may have to close permanently, prematurely and with little notice.

1.2.2 Volatile Operating Environment: Increasing Insecurity/Threat Level

A volatile operating environment may result from a range of scenarios, such as an escalation in hostilities between warring factions. In such situations, INGOs may be concerned about the safety and security of international staff and have to consider evacuations or relocation. National staff may be worried about their own safety and security and resign to seek sanctuary somewhere else. Tragically, there are increasing cases of humanitarians being targeted in conflict situations. For example, data from the Aid Worker Security Database (AWSDB) shows that Aid worker casualties were at an all-time high in 2020, with 283 major attacks reported. The 484 aid workers attacked in 2020 included 117 who were killed, 242 seriously injured and 125 kidnapped.² Affected populations may also be worried about their own safety and security and therefore begin moving to another location. INGOs may struggle to procure the materials they need to continue with their operations due to heightened security risks and its impact on trade and travel. These

² Humanitarian Outcomes (2021) *Aid Worker Security Report: Figures at A Glance*
https://www.humanitarianoutcomes.org/sites/default/files/publications/figures_at_glance_2021.pdf

factors combined may force an INGO to close down their operations, including an emergency GBV response program, permanently, prematurely and with little notice.

1.2.3 Expulsion by a Host Government

This refers to situations where host governments suspend INGOs from working in the country or a specific region. This can be for various reasons, including public messaging and failure to comply with government rules and regulations. For example, expulsion might result from an INGO speaking out publicly about human rights abuses and violations of international humanitarian law perpetrated by the host government. This can result in GBV emergency response programs closing permanently, prematurely and with little notice.

1.2.4 Funding Cuts

In some situations, donors may cut their funding to a GBV emergency response program at short notice. This can be for various reasons, such as a financial crisis, which means less money is available for public spending and less support for international aid. In eras of increasing nationalist sentiment, aid programs are arguably at greater risk of being cut. This argument is evidenced by, for example, the failure of wealthier countries to equitably distribute COVID-19 vaccines and ensure access for citizens of poorer countries, and their failure to provide adequate financing for those countries in the Global South likely to hardest hit by climate change.³

1.2.5 Public Opinion

In some situations, host governments may choose to close refugee camps and internally displaced person (IDP) settlements. This can be for a variety of reasons, including a wish to convey the message that a crisis is over and life can return to normal, even when this is not the reality. For example, in October 2020, the Iraqi Government announced the closure of 13 camps hosting people displaced by ISIS militants, affecting more than 30,000 residents, some of whom had been accessing emergency GBV response services.⁴ Meanwhile, the Kenyan Government has repeatedly stated its intention to close Kakuma and Dadaab refugee camps, which host Somali, South Sudanese and Ethiopian refugees. The Kenyan Government has claimed that these refugee camps threaten its national security, alleging that they have been used to recruit members of the terrorist group, Al Shabab. There are some, however, who think the issue has become politicized.⁵ Politicians may threaten to close refugee camps in the hope that this will help them win votes given growing hostility towards refugees and asylum seekers among a host population.

Part 2: Consequences of premature and permanent program closure

In the second part of the paper, we explore the consequences that might flow from the premature and permanent closure of a GBV emergency response program. We will structure this in terms of which stakeholders might be affected and how, focusing on survivors, affected communities, international staff, national staff, and national and local partner organizations.

2.1. GBV Survivors, Women and Girls Accessing Safe Spaces (Clients and Service Users)

The premature and permanent closure of GBV emergency response programs will inevitably have an impact on existing clients and service users. Women and girls who are accessing GBV case management services are at particular risk of being adversely affected. GBV case management services are a critical and lifesaving intervention. GBV survivors frequently build a rapport with their case worker, who often becomes a confidant and source of emotional and

³ Clare Short (2021), "What's wrong with Aid", Series 2, Episode 4 of the LSE Cutting Edge Issues in Development Thinking and Practice, October 2021, [S2,E4 Clare Short – What's wrong with Aid? - Cutting Edge Issues in Development Thinking & Practice | Podcast on Spotify](#)

⁴ Firas Al Khateeb (2021), "Returning Iraqis face dire conditions following camp closures", UNHCR, 17 May 2021, [UNHCR - Returning Iraqis face dire conditions following camp closures](#)

⁵ The Sentinel Project (2021), "Closing Kenya's Kakuma and Dadaab refugee camps: Thoughts from the ground", 29 June 2021, [Closing Kenya's Kakuma and Dadaab refugee camps: Thoughts from the ground | The Sentinel Project](#)

practical support. GBV survivors may fear for their safety and be concerned about whether there will be any support that is available and acceptable to them once their case worker withdraws and program activities cease. They may question whether they will have the support they need to move forward with their lives, The resulting uncertainty may negatively impact their recovery. Women and girls who access women's and girls' safe spaces are also at risk of being adversely affected by their closure. Safe spaces are places where women and girls are able to access a range of multisectoral services, cultivate and nurture new interests and skills, and form crucial positive support networks with other women and girls.

2.2. Women and Girls from Affected Communities at risk of GBV/Experiencing GBV but not yet Accessing Services

The premature and permanent closure of GBV emergency response programs at short notice will also impact the lives of the many women and girls at risk of GBV but who had yet to come forward for support. This is due to the inevitable decline in the availability, accessibility, and quality of specialized GBV response services, including GBV case management services and women's and girls' safe spaces. As a result, women and girls may be less likely to seek support, compromising their physical safety, mental health and wellbeing. Even when women and girls do come forward, quality of support may be adversely impacted due to the presently more limited human and financial resources available to other actors, such as NNGOs, CBOs, and women-led organizations and groups.

2.3. International Staff

The premature and permanent closure of GBV emergency response programs at short notice is highly likely to have a detrimental impact on the morale and wellbeing of international staff. It is common for international GBV responders to develop strong attachments to the survivors, national staff and volunteers and communities they work with. Furthermore, many people who pursue a career in specialized GBV response programming are motivated by a heartfelt commitment to gender equality and women's rights born from personal exposure to and experience of GBV. And thus, if they find themselves in a situation where they have to permanently and prematurely close a GBV response program at short notice, this may trigger a range of strong reactions and they are likely to invest considerable time and effort in exploring alternative options to closure and in identifying alternative sources of support for clients to the extent within their control. They may fear for the lives of the women and girls they leave behind. They may feel guilt at being able to leave the location, leaving clients, affected communities, and national colleagues in an unsafe situation.

2.4 National Staff and National and Local Partners, Including Women-led Organizations, Movements and Groups

As above, the premature and permanent closure of GBV emergency response programs is likely to have a detrimental impact on national staff and volunteers working with partner organizations, such as women-led organizations, movements and groups. Like international GBV responders, many of these stakeholders also develop strong attachments to survivors and the communities they work with. Some staff may also be local to the area with an attachment to the community on that basis. Like international GBV responders, many of these stakeholders also harbor a heartfelt commitment to work to advance gender equality and women's rights, this is often born from personal exposure to and experience of GBV. Therefore, these stakeholders may also be significantly adversely impacted by the premature and permanent closure of a GBV response program at short notice and fear for the safety of clients and other women and girls in the community. Depending on the trigger for the closure, they may also fear for their own physical safety and wellbeing. For example, in the event that there has been a change in administration and the incoming regime is hostile to gender equality and women's rights, there is a real risk that individuals involved in GBV response work may be subject to retaliatory attacks.

Part 3: Practical Guidance on Developing High-Quality Exit Strategy and Contingency Plans

In the third part of the paper, we will provide practical guidance to support international GBV responders with the development of high-quality exit strategies and contingency plans. This is so that in the event that a GBV emergency response program has to close permanently and prematurely at short notice, steps can be taken to minimize the impact on clients, survivors, affected communities and staff, and maximize the sustainability of results.

3.1. What is an Exit Strategy?

An exit strategy is a plan which describes how a program will close and withdraw its resources from a community in such a way that maximizes the sustainability of results and minimizes the risk of harm to service users and the affected community. A planned exit strategy is essential to facilitate the ethical closure of a GBV emergency response program.

3.2. What is a Contingency Plan?

A contingency plan is a document which sets out how an organization will respond in the event of certain scenarios, such as the premature and permanent closure of a program at short notice. The key questions which should guide the development of a contingency plan is given short notice, how feasible is the exit strategy? And what steps can be omitted to help facilitate an expedited ethical program exit?

3.3 When to Develop an Exit Strategy and Contingency Plan

Plans for an exit strategy should be built into the design of a program and developed in the early stages of program implementation, with some suggested timeframes given below:

- ✓ If a GBV Emergency Response Program is planned for six months of implementation, an exit strategy and contingency plan should be developed within the first three to six weeks of program start up.
- ✓ If a GBV Emergency Response Program is planned for one year or more of implementation, then an exit strategy and contingency plan should be developed within the first six to twelve weeks of program start up.

It is important to continually update exit strategies and contingency plans in light of situational developments.

3.4 What Content Should an Exit Strategy and Contingency Plan Include?

The key question which should guide the development of an exit strategy is what program outcomes would women and girls like to be sustained following the withdrawal of international GBV responders and the closure of the emergency response program?

Other relevant considerations include:

- ✓ How will we phase down the GBV Emergency Response Program? For example, will we reduce the number of hours and days per week when services are accessible or reduce the number of services themselves?
- ✓ Will we phase out all Emergency Response Program activities or seek to phase over implementation of some activities to a national and/or local partner? What criteria will we use to guide our selection? How will we ensure we do this in accordance and cooperation with GBV coordination mechanisms in-country?
- ✓ If we seek to hand over tangible assets and responsibility for program implementation to a national/local partner, what criteria will we use to guide our selection, what donor criteria do we need to abide by, and what institutional capacity building support can we offer during the implementation phase?
- ✓ What in-person and/or remote support (if any) can we continue to offer to national/local partners during the transition period, and over what period?
- ✓ What happens if we cannot transfer assets and responsibility for program implementation to a national and local partner? How shall we communicate this to women and girls and other stakeholders in the community?
- ✓ What support will be provided to national/local program staff in accordance with duty of care obligations?
- ✓ What support will be provided to international program staff in accordance with duty of care obligations?

3.5 Who is Responsible for Developing an Exit Strategy and Contingency Plan and which Stakeholders Should Have the Opportunity to Contribute?

International GBV responders are responsible for developing a program exit strategy and contingency plan. As part of this process they should consult with and prioritize the wishes of women and girls using their services. This is a core component of adopting a survivor-centred approach to GBV response programming, which requires us to prioritize the safety of survivors and respect their insights and wishes. International GBV responders must make an effort to consult with a diverse range of women and girls so their views are considered and factored for. For example, it is essential to consult with adolescent girls and adult women, with women and girls with disabilities, and with women with diverse sexual orientations, gender identities and expressions.

International GBV responders should also find time to consult with other stakeholders, such as the GBV Sub Cluster Lead(s), fellow international GBV Sub Cluster members, national and regional government offices, national non-governmental organizations, community-based organizations, and women-led organizations, movements and groups. They should also find time to communicate with relevant community stakeholders, such as community leaders and faith leaders. This is important to create a sense of responsibility for ongoing implementation and progress against shared outcomes.

4. Summary Recommendations

In the fifth and final part of this paper, we summarize key recommendations to guide international GBV responders in preparing for, and responding to, situations where they are forced to close GBV in emergency programs permanently and prematurely and at short notice:

4.1. Key Preparedness Activities

- ✓ Ensure an exit strategy and contingency plan is in place at the beginning of program implementation, if not factored for within the design, and both documents are regularly reviewed and updated in light of situational developments.
- ✓ Consult with women and girls from the affected community as to what program outcomes they would like to continue and be prioritized in the event of permanent and premature program closure.
- ✓ Conduct a mapping of national and local NGOs, CBOs, and women-led organizations, groups and movements, who have the interest and capacity to assume responsibility for implementation of some of the program activities. If organizational capacity building is necessary, integrate this into program implementation plans so it ceases to be a barrier to a phase over at a later point.

4.2. Key Response Activities

- ✓ Inform the Protection Cluster Coordinator, the Child Protection Sub-Cluster Coordinator, the GBV Sub Cluster Coordinator and other GBV Sub Cluster members about the imminent closure of the GBV emergency response program and discuss the potential impact on communities. Explore whether it is feasible to phase over certain program activities, e.g., the delivery of GBV case management services and the running of women and girl-friendly safe spaces. Explore whether any institutional capacity building may be necessary, whether this can be done remotely or needs to be in-person, and who will be responsible for what and when.
- ✓ Inform staff and volunteers about the imminent closure of the GBV emergency response programs and next steps, e.g., whether another agency will assume responsibility for all or some aspects of program implementation. Explain what this means concerning their employment and what support they will be given to find alternative employment. Furthermore, explain to staff what support will be available to help manage their health and wellbeing in the wake of this announcement.
- ✓ Inform each client about the imminent closure of the GBV emergency response and explain any implications this will have concerning her case management. If there is the possibility of transferring management of her case to another agency, seek her full and informed consent before doing so.

- ✓ Inform other service users (e.g., of women and girl-friendly safe spaces) about the imminent closure of the GBV emergency program and next steps, e.g., whether responsibility for service delivery will be transferred to another actor or stopped altogether.
- ✓ Inform women and girls and other community members about the imminent closure of the GBV emergency program and next steps, e.g., whether responsibility for service delivery will be transferred to another actor or stopped altogether. Share an up-to-date referral pathway so women and girls know how to access healthcare and other crucial services in the likely absence of specialized GBV caseworkers.

4.3. Key Considerations Concerning GBV Case Management and Data Protection

If plans are in place to transfer a survivor's case to another actor (e.g., another INGO, NGO, CBO or women-led organization or group), then:

- ✓ Ensure that GBV case workers and GBV case worker supervisors are adequately supported during this period of transition with effective supervision and tools to support survivors. For example, a lesson learned captured by the GBV subcluster in Syria was that case workers wanted and requested an individual safety plan checklist they could use with survivors to support an ethical closure process.
- ✓ Ensure that actors planning to assume responsibility for GBV case management have clear policies and procedures in place concerning the safe and ethical collection, storage and management of GBV survivor data.
- ✓ Prior to transferring files, speak with the survivor and ask their permission before sharing their data with another agency. Explain how their data will be used and for what purpose. Remember, the survivor has the right to decide with whom she does not share her data. Do not share her data with another agency without her full and informed consent.

If it is not possible to transfer GBV case files to another actor, then:

- ✓ Speak with the survivor and explain the imminent closure of the GBV response program and the reasons for this. If a survivor is still at risk (e.g. living with or close to a GBV perpetrator), work on a safety plan or revise their present safety plan with them. Share an updated referral pathway for them to seek support from health and multisectoral actors. Explain what will happen with their case files and physical and electronic destruction plans.
- ✓ Distribute copies of the [Pocket Guide: How to support a survivor of gender-based violence where there is no GBV actor in your area to relevant stakeholders](#), to other humanitarian actors and to meet with key actors in the area prior to exit.

4.4. Key Considerations Concerning Staff Care / Duty of Care

The CHS Alliance describes duty of care as ‘the moral or legal obligation organizations need to undertake to ensure the health, safety or well-being of others. It should be good organizational practice and is applicable not just before, during, but also after the period of employment.’⁶ The *Interagency Minimum Standards for Gender-Based Violence in Emergencies Programming* also highlight staff care specifically under standard 3 ‘Staff care and support’ and explain that ‘GBV program staff, and particularly community volunteers, face unique threats to their resilience and safety due to the pressure and stress of working on GBV in emergency contexts.’⁷ Standard 3 lays out the necessary key actions for GBV staff care and support in emergencies that should be adhered to.

⁶ CHS Alliance (2019). *Introduction to Duty of Care*, 17 September 2019. This article highlights clear linkages with the Core Humanitarian Standard and provides a range of resources, tools, partners and experts and research links to Duty of Care information. <https://www.chsalliance.org/get-support/article/introduction-duty-care/>

⁷ UNFPA (2019) *Interagency Minimum Standards for Gender-Based Violence in Emergencies Programming*. GBV AoR, 2019. PP. 18-22. [The Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming \(unfpa.org\)](#)

KEY ACTIONS  Staff Care and Support	Preparedness	Response	Recovery
	Establish a GBV programme team with sufficient staff, resources and support, including female personnel and ethnic diversity, to facilitate quality programming.	✓	✓
Conduct an internal staff capacity assessment across programme areas to identify gaps in knowledge, capacity and attitudes, and develop a strategy to build staff capacity and address identified needs.	✓	✓	✓
Develop job profiles with specific responsibilities in line with the GBV Core Competency Framework for GBV in emergencies.	✓	✓	✓
Establish regular supervision to provide technical and psychosocial support for all staff delivering GBV response services.	✓	✓	✓
Establish access to psychosocial support for all staff working on GBV, recognizing that support needs will be different ¹⁰⁸ based on individual experiences of stress and trauma.	✓	✓	✓
Share GBV training resources with all staff.	✓	✓	✓
Promote staff well-being in emergencies and facilitate a healthy working environment:			
• Prioritize self-care and safety for staff (e.g., clear job description, systematic on-boarding and operational support, at least one day off per week, clear working hours, appropriate insurance and provisions for medical evacuation, parental leave, rest and relaxation or home leave for staff in complex humanitarian emergencies, staff well-being activities, etc.);	✓	✓	✓
• Promote access to health care and psychosocial support for staff; ¹⁰⁹			
• Create spaces for staff to discuss quality of life and safety concerns.			
Ensure the availability of a funded and actionable plan to protect and promote staff well-being within the response context. ¹¹¹	✓	✓	✓
Ensure emergency response proposals include appropriate funding for sufficient staff across GBV programming interventions and supervision for all staff responding to the emergency.	✓	✓	✓
Ensure that management staff model openness about the challenges of working on GBV self-care, stress management techniques and a healthy work-life balance.	✓	✓	✓
Promote an organizational culture in which complaints are taken seriously and acted upon according to defined policies and procedures.	✓	✓	✓
Ensure that specific measures are in place to protect community workers' and volunteers' safety and well-being, recognizing the inherent pressures and risks involved in their dual role as both community members and service providers. ¹¹²	✓	✓	✓

FOUNDATIONAL STANDARDS STAFF CARE AND SUPPORT

In relation to premature/permanent closure it is particularly worth highlighting the following from the key actions:

- ✓ Establish regular supervision to provide technical and psychosocial support for all staff delivering GBV response services
- ✓ Establish access to psychosocial support for all staff working on GBV, recognizing that support needs will be different based on individual experiences of stress and trauma
- ✓ Create spaces for staff to discuss quality of life and safety concerns
- ✓ Ensure that specific measures are in place to protect community workers' and volunteers' safety and well-being, recognizing the inherent pressures and risks involved in their dual role as both community members and service providers.⁸

Additionally, consider how you will support staff after the program closes. For example, it is recommended to:

- ✓ Engage relevant departments of the INGO to support program staff with redeployment/relocation to the extent feasible
- ✓ Engage relevant departments of the INGO to support re-employment/job-seeking efforts of staff who will have contracts terminated when the program closes
- ✓ Discuss with national/local staff who face threats due to the program closure (e.g. retaliation or reprisals) their needs and the options open to them and their preferences. For example, are their staff support funds which can help them or their family to relocate safely? Can staff be paid their final salaries in advance? Are there any relocation or evacuation schemes which affected staff are eligible to apply to? These discussions should happen prior to the program closure and as early as feasible.
- ✓ Provide quality post-deployment debriefings: i) operational and ii) personal to international staff, as routine.

4.5 Key Considerations Concerning Sustainability and Localization

As funding for GBV emergency response programs is finite, international GBV responders must think about strategies to maximize the sustainability of their interventions. Key considerations include the following:

- ✓ When deciding what program outcomes to prioritize as part of a sustainability strategy, it is critical to consult with survivors and service users. They have a right to participate in decisions that will impact their lives. Furthermore, they are arguably the experts on what aspects of an intervention have been most beneficial. If possible, efforts should be made to consult with a diverse range of women and girls in the community (including women and girls with disabilities), as they might also have feedback on the accessibility of activities and services.
- ✓ Regarding sustainability, it is also critical to consult with national and local actors, particularly women-led organizations, groups and movements and organizations representing women and girls with disabilities. They have a right to lead discussions on the future of their communities. Furthermore, they are also the experts on

⁸ Ibid. p. 19.

what will and will not be feasible and in which areas they might need technical, operational and/or financial support.

- ✓ Plans for sustainability should be communicated to the wider community, as husbands and fathers and community leaders will inevitably have an impact on women and girls' ability to continue to engage in activities and access and use services.
- ✓ Sustainability strategies will differ from context to context. In some contexts, a sustainability strategy might focus on building the capacity of national and local women-led organizations, groups and movements, so they can assume responsibility for service delivery once international GBV responders depart. But this might not always be possible. For example, in a refugee camp and IDP settlements, service provision is always temporary. When the refugee camps and IDP settlements close, so will women and girl-friendly safe spaces and the provision of specialized GBV response services. In these contexts, a sustainability strategy might focus on building the knowledge, skills and leadership of GBV survivors and service users. This is so they can support themselves and their peers and have the confidence to join or later form their own organization, group or movement, should they wish to do so.

4.5. Evaluation and Learning

- ✓ If not budgeted for already, approach the donor(s) and seek supplementary funding to review and evaluate the execution of the exit strategy and contingency plan and capture and share relevant lessons learnt. This could be incorporated into an after-action review.
- ✓ If applicable, conduct transfer interviews with national/local staff who will be transferred/redeployed within the organization, to learn from the program closure process and experience.
- ✓ If applicable, conduct exit interviews with national/local staff whose contracts will be terminated, to learn from the program closure process and experience.
- ✓ Conduct post-deployment debriefings with international staff to learn from the program closure process and experience.

Bibliography, including further relevant tools and resources

GBV Guidelines Interagency Support Team (2017), *How to support survivors of gender-based violence when a GBV actor is not available in your area: A Step-By-Step Pocket Guide for Humanitarian Practitioners*, https://gbvguidelines.org/wp/wp-content/uploads/2018/03/GBV_PocketGuide021718.pdf

GBV Sub Cluster and Whole of Syria (Turkey Hub) (2018), *Guidance Note on Ethical Closure of GBV Programmes*, [guidance_note_ethical_closure_of_gbv_programs_final.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/guidance_note_ethical_closure_of_gbv_programs_final.pdf) (reliefweb.int)

Gender-Based Violence Information Management Steering Committee (2017), *Interagency Gender-Based Violence Case Management Guidelines: Providing Care and Case Management Services to Gender-Based Violence Survivors in Humanitarian Settings*, [interagency-gbv-case-management-guidelines_final_2017_low-res.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/interagency-gbv-case-management-guidelines_final_2017_low-res.pdf) (reliefweb.int)

International Rescue Committee and International Medical Corps (2020), *Women and Girl Safe Spaces: A Toolkit for Advancing Women's and Girls' Empowerment in Humanitarian Settings*, [IRC-WGSS-English-2020.pdf](https://www.gbvresponders.org/wp-content/uploads/2020/08/IRC-WGSS-English-2020.pdf) ([gbvresponders.org](https://www.gbvresponders.org))

UNFPA (2019), *Interagency Minimum Standards for Gender-Based Violence in Emergencies Programming*. GBV AOR. [The Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming](https://www.unfpa.org/sites/default/files/pub-pdf/Inter-Agency_Minimum_Standards_for_Gender-Based_Violence_in_Emergencies_Programming.pdf) (unfpa.org)

The GBV AoR Help Desk

The GBVAoR Helpdesk is a unique research and technical advice service which aims to inspire and support humanitarian actors to help prevent, mitigate and respond to violence against women and girls in emergencies. Managed by Social Development Direct, the GBVAoR Helpdesk is staffed by a global roster of senior Gender and GBV Experts who are on standby to help guide frontline humanitarian actors on GBV prevention, risk mitigation and response measures in line with international standards, guidelines and best practice. Views or opinions expressed in GBV AoR Helpdesk Products do not necessarily reflect those of all members of the GBV AoR, nor of all the experts of SDDirect's Helpdesk roster.

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