



# GENDER ASSESSMENT OF THE REFUGEE AND MIGRATION CRISIS IN SERBIA AND FYR MACEDONIA



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**EUROPE AND CENTRAL ASIA REGIONAL OFFICE  
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*This report was prepared by Galit Wolfensohn (Lead Researcher) with the support of the research team comprised of Anica Milkovic (Research Consultant Serbia), Mirjana Nedeva (Research Consultant FYR Macedonia), and Faten Tibi (Programme Manager Economic Empowerment of Syrian Women, UN Women Regional Office Arab States, Cairo).*

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Cover: Refugees and migrants getting ready to board the train in Gevgelija on the southern border of FYR Macedonia to travel north towards Serbia.  
Photo: UN Women/Mirjana Nedeva

# EXECUTIVE SUMMARY

In 2015, over one million asylum seekers from some of the world's top refugee producing countries made their way towards Western Europe by sea, resulting in the largest refugee crisis in Europe since World War II.

The majority (more than 851,319 people) transited from Turkey to Greece and through the Western Balkans, including the former Yugoslav Republic of Macedonia<sup>1</sup> and Serbia, with the intention of reaching destination countries further north, such as Austria, Germany and Sweden.

The massive increase in population movements has strained reception capacities and asylum systems, and in some cases has resulted in heavy-handed responses by security forces. Without a political solution to the crises in countries of origin, another million people are expected to try to reach the European Union in 2016. Faced with domestic and budgetary pressures (including security concerns), countries along the transit route are challenged to implement a coordinated response that addresses the humanitarian and protection needs of refugees and migrants in line with international standards and obligations.

Protracted conflict, ongoing violence and insecurity, reduced education and livelihood opportunities and uncertain futures in countries of origin are fueling the mass displacement. As a result, whole families are on the move, including increased numbers of women and children (which make up 42 per cent of the total population), elderly people, people with disabilities, unaccompanied and separated minors, and other vulnerable groups. Refugee and migrant women and girls face specific challenges and protection risks in transit, including family separation, psychosocial stress and trauma, health complications (particularly for pregnant women), physical harm and injury,

and risks of exploitation and gender-based violence. Language barriers and cultural factors, combined with the intention of asylum seekers to move through transit countries as quickly as possible, complicate the efforts of humanitarian actors to provide essential services to women and girls, as well as to identify and support particularly vulnerable groups.

Many women and girls are fleeing conflict in their homeland where they have faced systemic rights violations, including bombardment of civilian areas, killing and disappearance of family members, sexual and gender based violence (SGBV), obstructed access to food, water and electricity, and destruction of their homes and livelihoods. Many have been repeatedly displaced and some have suffered violence, exploitation and abuse while seeking asylum. Women often serve as the main caretakers for children and elderly family members, further increasing their need for protection and support.

The international humanitarian response in FYR Macedonia and Serbia began scaling up in mid-2015 and has focused on supporting the Government response to the emergency needs of populations on the move, including through establishing reception and transit facilities, strengthening registration systems, and providing key services including temporary shelter, emergency health care, essential food and non-food items, and water, sanitation and hygiene. In recent months, with population movements anticipated to continue, the focus has included winterization and contingency planning for longer-term stays. While FYR Macedonia and Serbia are likely to remain primarily transit countries, the situation may change in 2016 as European Union countries impose more restrictive

<sup>1</sup> Macedonia is provisionally referred to for all purposes within the United Nations as "the former Yugoslav Republic of Macedonia", as per UN Resolution 817. Hereinafter referred to as FYR Macedonia.

access to their territories<sup>2</sup> and as the EU defines a more cohesive policy vis-à-vis refugees and migrants.

In October 2015, UN Women's Regional Office for Europe and Central Asia (ECA) commissioned a gender assessment of the humanitarian response in Serbia and FYR Macedonia (where UN Women has a programme presence) to gain a better understanding of the specific needs, priorities and risk factors facing women and girls in the context of the escalating crisis, to assess the extent to which the current response is meeting those needs, to make recommendations to strengthen the response, as well as to identify what operational role UN Women might play.

The assessment found many positive examples of targeted efforts to respond to the specific needs, priorities and protection risks of refugee and migrant women and girls. These include the systemic collection of and reporting on sex- and age-disaggregated data through the asylum registration system; the establishment of mobile protection teams to identify vulnerable groups and facilities to fast track them; the distribution of targeted non-food items (NFIs) such as dignity kits and women's clothing; the availability of targeted services in reception and transit centers including gynecological health care, child-friendly and mother/baby-friendly spaces and psychosocial support; in some cases, the existence of women-only spaces within shelter facilities; and the availability of sex-segregated toilets and showers.

In addition to good practices, the assessment found that while up to 42 per cent of refugees and migrants are women (17%) and children (25%), response planning, services, protection capacity and information are not yet sufficient to meet their needs and address their distinct vulnerabilities. Specifically, the assessment found that registration systems are not comprehensively identifying and referring at-risk groups, and have weak linkages to protection responses. Qualitative



*Women carrying babies in the one stop center in Presevo, Serbia.  
Photo: UN Women/Mirjana Nedeva*

data on women and girls as well as other vulnerable groups is limited, and it is not clear whether or how existing disaggregated data is being used for contingency planning and operations. Overall coordination among and between government and humanitarian actors needs to be streamlined, and there is a need for more systemic and sustained attention to gender and gender-based violence (GBV) issues within the broader coordinated response. The capacity of front-line actors to systemically identify, refer and respond to issues of gender, GBV and protection of vulnerable groups needs strengthening, as does the capacity of social services and local women's organizations to play an operational role in the response. Some sector-specific services do not yet have adequate provisions in place to ensure that women, girls, boys and men can equally access and benefit from them and targeted services for women and girls are limited or missing, including: systemic protection monitoring, GBV prevention and response services, targeted psychosocial support and trauma counseling, women-only spaces, and full-time gynecological services on site in transit and reception centers.

In 2016, the response should be strengthened to better protect and promote the safety, dignity and

<sup>2</sup> As Slovenia and FYR Macedonia did in November 2015 when they decreed that only persons from conflict-affected Syria, Iraq and Afghanistan would be granted access.



rights of refugee and migrant women and girls in line with international humanitarian and human rights standards.<sup>3</sup> The following recommendations to key stakeholders involved in the refugee and migrants response aim to guide this effort. Further sector-specific recommendations are detailed in the body of the report. UN Women looks forward to cooperating with key stakeholders and partners to help take forward these recommendations, as part of the 2016 UN inter-agency Europe Regional Refugee and Migrant Response Plan (RRMRP).

## Recommendations:

**1. Ensure that all response and contingency plans for the refugee and migrant crisis and related operations and services are in line with international humanitarian and human rights standards** to uphold the safety, dignity and rights of refugee and migrant women and girls, including the Sphere Standards, and standards and guidelines outlined in the IASC Gender Handbook for Humanitarian Action (2006) and the IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action (2015).

**2. Ensure that the response is evidence-based** and able to adapt to a quickly evolving context and to the distinct needs of a diverse population. This requires:

- Strengthening the accuracy and efficiency of national registration systems including by carrying out individualized face-to-face registration with all asylum seekers, continuing to collect sex- and age-disaggregated data, standardizing vulnerability

<sup>3</sup> Humanitarian actors have an obligation to promote gender equality through humanitarian action in line with the Inter-Agency Standing Committee's (IASC) 'Gender Equality Policy Statement' (2008), as well as an obligation to support, through targeted action, women's and girls' protection, participation and empowerment as articulated in the Women, Peace and Security thematic agenda outlined in United Nations Security Council Resolutions. Internationally agreed standards for humanitarian action and gender and GBV programming in emergencies are furthermore outlined in the Sphere Standards, the IASC Gender Handbook for Humanitarian Action (2006) and the IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action (2015)

criteria and incorporating GBV as a risk factor for vulnerability profiling, building the capacity of registration staff to carry out interviews with different at-risk groups, and ensuring, when possible, confidential and non-stigmatizing registration.

- Systematizing the regular collection, analysis and reporting on qualitative and quantitative sex- and age-disaggregated data, as well as on other vulnerability criteria, and ensuring that this analysis is used to inform planning and operations.

**3. Strengthen coordinated action on mainstreaming of gender-responsive programming and advocacy,** including by:

- Institutionalizing the involvement of National Gender Machineries to participate in and advise inter-Ministerial national coordination structures and response planning.
- Appointing a full time gender advisor to provide technical support on gender and GBV mainstreaming to the United Nations Country Team including through participation in regular coordination, planning, assessment and monitoring activities.
- Supporting the establishment of a regional network of local NGOs including women's organizations working on the response from countries of origin, transit and destination to share information and experiences, improve coordination and carry out joint advocacy on the rights of refugee and migrant women and girls.
- Assisting local governments to promote positive attitudes towards refugees (non-discrimination, solidarity, gender equality) among host communities through communication campaigns and other local community engagement initiatives.

**4. Increase national capacity** to effectively respond to the specific needs, priorities of and protection risks facing refugee and migrant women and girls, including by:

- Increasing the number of field-based staff including gender and GBV experts, protection officers, female health workers including gynecologists, female police officers and Arabic and Farsi language

interpreters, and where possible improving gender parity among first responders.

- Building the capacity of national service providers on issues of gender, GBV, women's/human rights, social exclusion, cultural sensitivity and non-discrimination, psychological first aid, international human rights and humanitarian law and standards, and prevention of sexual exploitation and abuse.
- Building the capacity of state social workers and relevant social work institutions (including Centers for Social Work) to play a greater operational role in the current refugee and migrant crisis response.
- Building the capacity of the national gender machinery and of local women's NGOs in humanitarian action so that they can play a more operational role in the response.

**5. Provide immediate and medium-term priority services,** protection and information to refugee and migrant women and girls in reception and transit centers as well as in waiting areas outside centers, including:

- Establishing multi-purpose women-only spaces for refugee women and girls that provide private

spaces for women to rest, receive information and access a range of targeted services including psychosocial support, trauma counseling, legal advice, health care and NFIs;

- Making mobile gynecological services available 24 hours per day, 7 days per week;
- Establishing accessible and confidential GBV prevention and protection services and functioning national and transnational referral pathways;
- Expanding protection presence, monitoring and measures in under-served areas including along remote green border roads and in transit;
- Ensuring that shelter facilities (for short and long term stays) are safe, accessible, winterized and have family and sex-segregated partitions that ensure safety, privacy and dignity;
- Standardizing WASH facilities so that they are all safe, sex-segregated, dignified, clean and accessible; and
- Establishing NFI distribution protocols that ensure safety, dignity, accessibility and equal benefit for women, girls, boys and men.

## 2.

# RATIONALE

This assessment is informed by an understanding that women, girls, boys and men experience crises and resulting displacement in different ways, and as such have distinct needs, coping methods, priorities and face different protection risks.

It acknowledges that there are differences among women (and among men), shaped by age, socio-economic status, educational level, marital status, nationality/ethnicity, access to resources and ability, among other variables, and that gender roles and power relations among and between groups may change over time and geography, as well as during crises. Understanding these distinctions is key to designing gender-responsive rights-based humanitarian action which helps provide humanitarian actors with a more accurate understanding of the impact of the crisis on different groups, enables them to meet the needs and priorities of the population in a more targeted manner, ensures that all people affected by the crisis are acknowledged and their needs and vulnerabilities are taken into account, and that as a result the humanitarian response is more effective and efficient.

UN Women was established to assist countries to progress more effectively and efficiently toward achieving gender equality, women's empowerment and upholding women's rights, and to hold the UN system accountable for its own commitment towards gender equality. Humanitarian actors have an obligation to promote gender equality through humanitarian action in line with the Inter-Agency

fYR Macedonia and Serbia to respond to the refugee and migrant crisis. The specific objectives of the assessment were to carry out a gender analysis of the response to the refugee crisis in FYR Macedonia and Serbia which:

- Determines the main risks that women and girls who are part of the refugee flow face;
- Classifies the existing services being provided by national and international partners to assist women and girl refugees and identifies gaps;
- Determines if there are barriers to access existing services and information for women and girls;
- Preliminarily identifies prevailing attitudes of host communities to women refugees, and any conflict risk factors;
- Assesses how women's organizations and women's activists are contributing to the response and how their capacities could be strengthened;
- Recommends how gender issues can be mainstreamed in the national and international response and where UN Women can provide value added.

This report outlines the findings of the assessment

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