

Understanding the need for SGBV prevention/support and SRHE services, for refugees with Communication Disabilities in Rwanda- a collaborative consultation

Julie Marshall, MMU, UK; Helen Barrett, Communicability Global; Sidra Anwar, UNHCR Rwanda.

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Background

In 2016, at the instigation of UNHCR, Julie Marshall, Manchester Metropolitan University UK, Helen Barrett, Communicability Global Rwanda, and Sidra Anwar, UNHCR Rwanda, carried out a small scoping study and literature review to begin to understand and describe the challenges to supporting refugee-survivors of sexual and gender-based violence (SGBV) who have a communication disability (CD), in Rwanda. Rwanda has a significant refugee and asylum-seeker population 149,289 in a population of 11.8 million (April 2019). This project helped us to identify the next steps in ensuring that Refugees with Communication Disability (RWCD) are able to access appropriate SGBV response and prevention, and Sexual and Reproductive Health Education (SRHE) services. This consultation aimed to document current SRHE provision, identify good practice and challenges, understand refugees' perspectives and make recommendations for possible ways forward. We collected, analysed and synthesised 4 sets of data.

1. Our 2016 findings from a literature review on access to SGBV response services for refugees with CD, FGDs with service providers and carers of RWCD, and a stakeholder workshop. We found: i) people with communication disabilities (PWCD) are seen as an easy target and easily coerced; ii) families do not want other people to know about their experiences of SGBV – and this may be worse for PWCD; iii) PWCD don't access education or information disseminated in the community; iv) PWCD experience challenges including reporting to SGBV partners/police, providing a reliable account in court, explaining experiences to medical services & accessing counselling.

2. We carried out a second literature review in 2018 covering communication disability/SRHE/refugees in Sub-Saharan Africa. We found that challenges to accessing SRHE, achieving autonomy, and realising SRH rights for PWCD, are identified across the world and carers are anxious about SRHE and feel ill-equipped to educate their children. There is some inclusive SRHE practice for PWCD, but little evidence of its impact.

3. Focus group discussions (FGDs) with 12 groups of service-providers/stakeholders in Rwanda revealed that a range of SGBV services exist, but there are access challenges for RWCD. They believe that RWCD are vulnerable to SGBV and lack information on SRH and SGBV prevention/response and need support to improve services. Service providers/stakeholders report limited knowledge about CD, feel that identification of RWCD is difficult and that RWCD experience stigma and discrimination in their families and communities.

4. Individual interviews with 21 RWCD (some of whom were SGBV survivors) and their carers revealed that they consider that living with CD as a refugee is difficult; that CD increases vulnerability and carer responsibility and limits realisation of SRH rights. RWCD are excluded from services, including SRHE, but there are some examples of supportive practice. RWCD and carers want better access to SRH information, better service access and advocacy.

A stakeholder workshop was held for 26 participants, from a range of organisations and service users, in Nov 2018. See Twitter: #SRHERefugeesComDis and #StandUpForCommRights on. Workshop participants agreed that the consultation findings were familiar.

How can we use these findings?

1. To recommend that service providers across a range of humanitarian sectors should learn how best to communicate with people with different types of CD.
2. To advocate for better data on how many refugees have CD, and how many may be SGBV survivors.
3. To share global evidence of good practice in supporting RWCD to receive appropriate SRHE/SGBV services.
4. To develop, test and evaluate interventions that support RWCD in SRHE / SGBV prevention and response.
5. To raise awareness about the challenges facing RWCD and how best to support them.

For more information about this work, please contact Julie Marshall: J.E.Marshall@mmu.ac.uk

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