

INTRODUCTION

“Gender-based violence (GBV) in humanitarian settings has received increased attention in research and in the work of development agencies. Viewed primarily as a form of violence against women, this Annex addresses male survivors of gender-based violence in the Serbian Migrant Context who have been largely invisible owing to socio-cultural norms surrounding masculinity and a permissive approach towards violence perpetrated against men.”¹

Although defined as a general term used to capture violence occurs as a result of the normative role expectations associated with each gender, along with the unequal power relationships between the two genders and the context of a specific society, sexual and gender based violence is often thought of as a crime against women and girls. The following definition better serves the purpose of this Annex which aims at providing a specific framework for understanding and addressing the phenomenon of GBV against male migrants (men and boys) toward delivering adequate assistance interventions:

The term ‘gender-based violence’ is also increasingly used by some actors to highlight the gendered dimensions of certain forms of violence against men and boys—particularly some forms of sexual violence committed with the explicit purpose of reinforcing gender inequitable norms of masculinity and femininity (e.g. sexual violence committed in armed conflict aimed at emasculating or feminizing the enemy). This violence against males is based on socially constructed ideas of what it means to be a man and exercise male power. It is used by men (and in rare cases by women) to cause harm to other males. As with violence against women and girls, this violence is often under-reported due to issues of stigma for the survivor—in this case associated with norms of masculinity (e.g. norms that discourage male survivors from acknowledging vulnerability, or suggest that a male survivor is somehow weak for having been assaulted). Sexual assault against males may also go unreported in situations where such reporting could result in life-threatening repercussions against the survivor and/or his family members. Many countries do not explicitly recognize sexual violence against men in their laws and/or have laws which criminalize survivors of such violence²

¹ N. Linos (2009). “Rethinking gender-based violence during war: is violence against civilian men a problem worth addressing?” In: Social Science & Medicine Volume 68, Issue 8, April 2009, p. 1548-1551.

² GBV Guidelines, https://gbvguidelines.org/wp/wp-content/uploads/2016/10/2015_IASC_Gender-based_Violence_Guidelines_full-res.pdf, page 5

In Serbia, recent research and inputs from practitioners engaged in providing support to migrant's worldwide show that boys and men are subjected to GBV in their countries of origin, during the travel through transit countries and within the context of their onward movement. As stated by the protection experts in Serbia, there is also increased evidence that boys and young men suffer from GBV while on their staying in Serbia.

As stated by the UNHCR, "Entrenched gender norms combined with cultural and religious taboos, and scarce services, make it very difficult for males to disclose that they are survivors of sexual violence, while service providers may not recognize the male experience of GBV. Communities are frequently reluctant to acknowledge the experience of male survivors because it may be seen, among other things, as conceding weakness and bringing shame to the community. Left unaddressed, the effects of sexual violence magnify the risks inherent in conflict and displacement contexts and gravely harm the social and economic well-being of survivors. The effects of sexual violence on individuals, households and entire communities seriously damage social relationships, thereby undermining peace and security and the likelihood of achieving durable solutions".³

The purpose of this assignment was thus to amend existing Standard Operating Procedures (SOP) for the prevention and protection from gender based violence against people involved in mixed migration by pointing to the specific differences in the prevention and protection of male survivors of GBV in Serbia, since the approach and activities employed for the prevention and response to GBV experienced by men and boys differ from those directed towards helping women and girls. However, based on the inputs received through meetings with relevant actors, inputs by References group and through desk review the characteristics of the protection system in place in Serbia, procedures and even programs currently available, as well as lack of systematic data about the GBV cases, do not leave much space for additional interventions in the referral system described in the mentioned SOP. Instead, this review will offer additional view of the causes, risk factors, as well as recommendations for future actions in regards to prevention and protection of boys and men against GBV. As it is based on the analysis of the theoretic frameworks and global practices in combating GBV on one hand, and the experiences of current service providers in Serbia, on the other hand, hopefully, the review will reflect relevant but realistic expectations

3 UNHCR. (2012). Working with Men and Boy Survivors of Sexual and Gender-based Violence in Forced Displacement. Division of International Protection, United Nations High Commissioner for Refugees, p. 4-5.

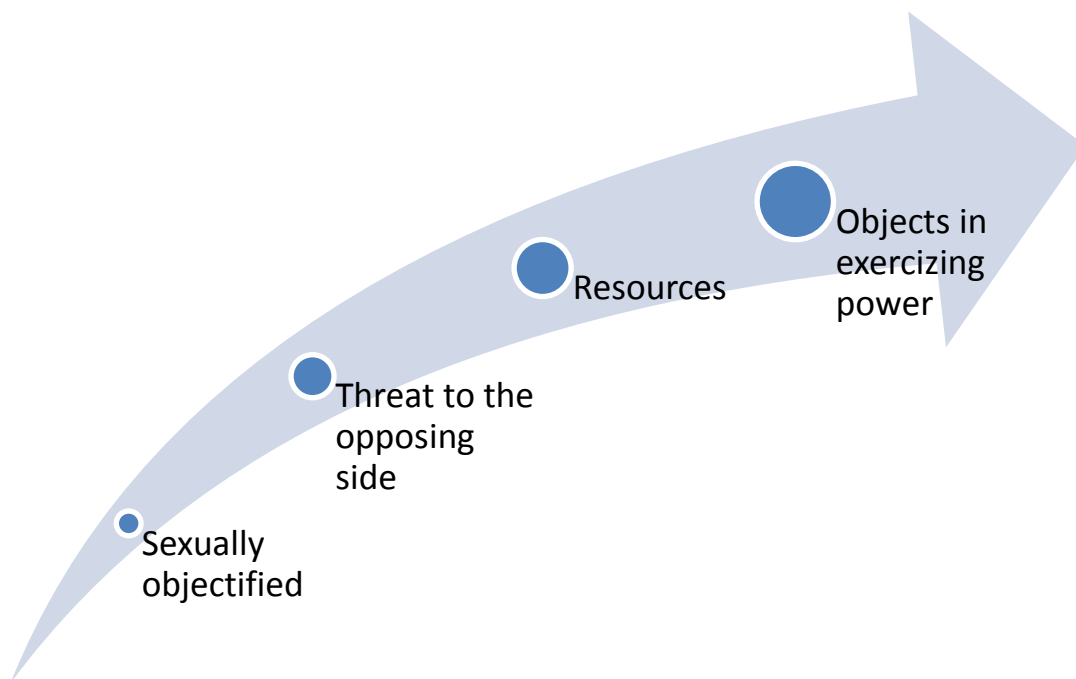
from the protection system in regards to adequate prevention of and protection from these types of violence.

PREVENTION AND RESPONSE FROM GBV

Boys and Men Survivors of GBV in Serbia

As reported by field workers and experts and stated in the UNICEF specialized advocacy paper, **Call to Action on Protection from Gender-based Violence in Emergencies**, they are equally at risk if they are accommodated in the government-run centers or if they stay out of the system. “They are usually permanently “on the move” accessing services in and out of the centers on an irregular basis, entering and re-entering the national asylum system depending on their possibility to cross the border. They usually travel in groups and they have been sent by their families to Europe to provide for the rest of the family back at home with a goal of reaching Western European nations. This has a particular impact on their determination and on their reluctance to access the care system that could further delay their journey; and on their mental wellbeing as caretaker of their family.”⁴

As described by the professionals, boys’ and men’s manifestation of GBV could have different forms, based on the specific circumstances.



⁴ **Call to Action on Protection from Gender-based Violence in Emergencies, advocacy paper, UNICEF material, year 2018.**

As presented in the chart above and stated by the professionals in Serbia, boys and men migrants currently residing in Serbia, could (have) become survivors of GBV in their country of origin. Namely, whereas rural Pashtun culture remains largely misogynistic and male-dominated due to deeply-ingrained radical religious values, teenage boys can become the objects of lustful attraction and romance for some

Protection services have to be offered to all survivors of GBV: those who were male survivors in the countries of origin, in transit, and those who have been male survivors in Serbia.

of the most powerful men in the Afghan countryside. Harmful practice of 'grooming' or even kidnaping the adolescent boys for sexual relationships with older men, as a **practice of gender reversal** stripes the boys of their masculine identity and makes them particularly vulnerable to the GBV in the later stages of the travel. Normalization of such a practice leaves consequences to the men's wellbeing

and future developments.

Furthermore, MARA Secretary General Report 2016, for the first time, United Nations country presences were requested to report on the use of sexual violence as a tactic of terrorism.

Furthermore, boys and men are often exposed to forms of GBV in transit: they are **forced to assist the smugglers and traffickers** in organizing and executing travel arrangements and even gaining control over the groups of migrants.

In addition, boys and men can become survivors of GBV which sole purpose could be exercising power and **regaining control over the groups of migrants**. In addition, due to lack of resources for the continuation of the travel, some of them 'willingly' become 'slaves' of the most powerful men in the groups.

In addition to personal and external risk factors already stated in the existing SOP, the following risks can be identified, based on national experience:

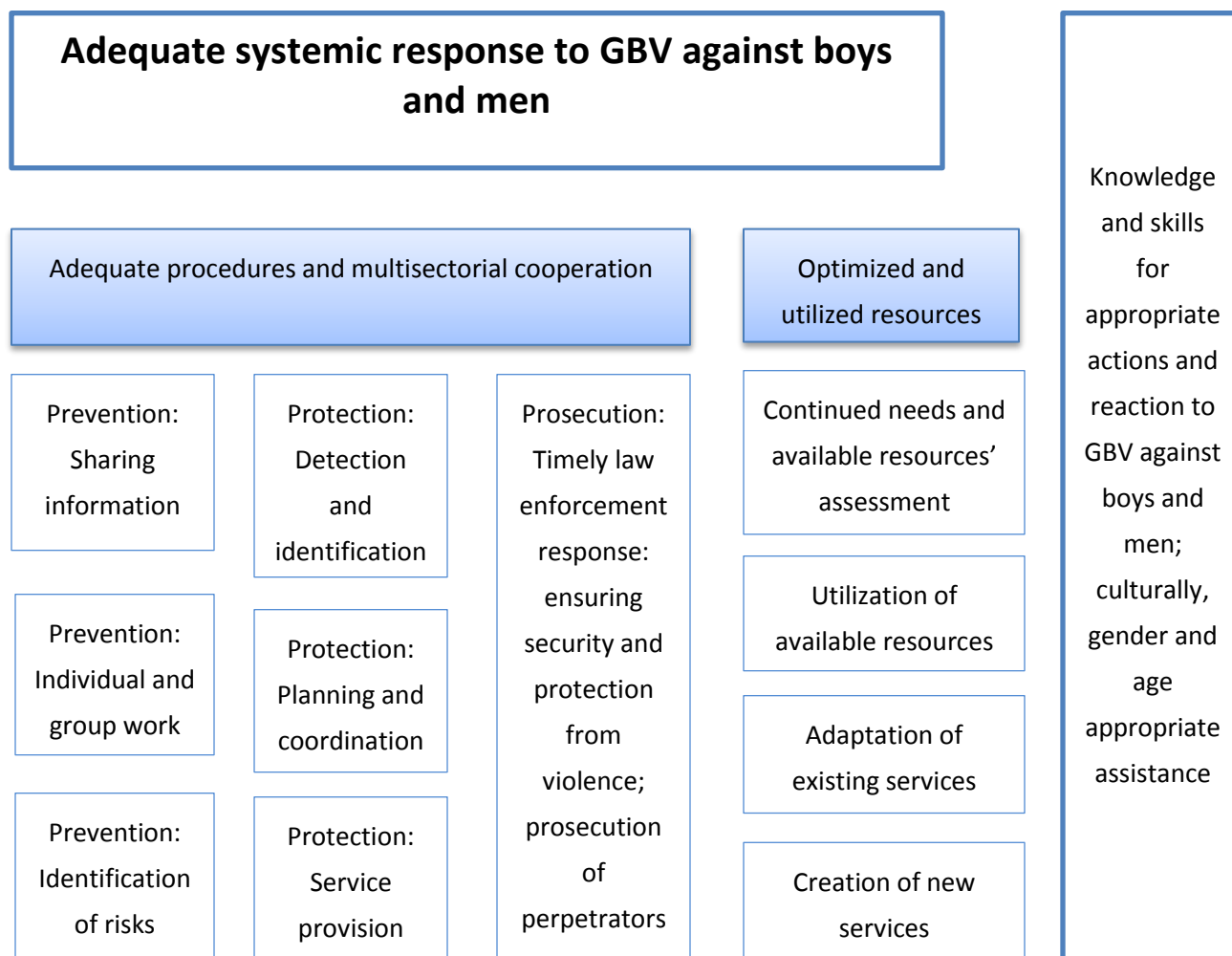
Personal risk factors:

- Prior male survivor;
- Substance abuse;
- Lack of family support;
- Sexual orientation and/or gender identity;
- Lack of resources for continuing travel to the preferred county of final destination;
- High level of tolerance towards GBV.

External risk factors:

- Cultural norms which normalize GBV against boys and men;
- Inadequate coordination among all engaged actors;
- Presence of smugglers, traffickers and members of other criminal groups in refugee/migrant population;
- Limitation of appropriate prevention programs targeting potential perpetrators: information about the consequences, STIs, etc.;
- Limitation of appropriate prevention programs targeting potential survivors: sharing information about GBV, available services, etc.;
- Limitation of adequate procedures for identification and referral;
- Limitation of capacities for adequate guardianship and case management
- Inadequate security protocols and safety protection practices;
- Limitation of protection programs and services.

Prevention and response and schemes



Gender based violence response

To adequately address the issue of GBV against boys and men, all available services on both national and local level (including services and assistance schemes provided by the CSOs) should be mapped in order to provide case managers and boys and men (potential) survivors with relevant information about all available options. The final product should be a material shared with all residents of Asylum centers and migrants entering the Republic of Serbia. In addition, basic information should include the list of migrants' obligations and rights, including the right to be protected against GBV, as well as potential consequences for the perpetrators.

As already mentioned, boys and men might face particular barriers to in seeking the information about possible protection schemes, which could lead to unequal access to resources. Thus, specific interventions targeting boys and men should be implemented in order to ensure their equal access to all services. Also, information should be provided by well-trained staff, including female/ interpreters/cultural mediators and should include packages of information about prevention of violence, protection from violence and available services. It is important that multi-sector services including health, psychosocial services, safety and security and legal assistance are available to all survivors in a non-discriminatory manner, irrespective of their gender. Male survivors have specific needs regarding treatment and care that should be addressed by health care providers. It is important that health staff members understand and are trained to identify indications of GBV in men and boys. All those information should be provided in registration phase and later on, continuously.

CULTURAL MEDIATORS

As the first point of contact the refugees have on arrival, cultural mediators play a crucial role: translating, informing and generally acting as go-betweens with the local authorities. They advise migrants about their rights and the services available in their new country. They also explain the cultural differences they need to be aware of as they navigate life in a foreign land, all the while relaying vital information back to aid workers.

Cultural mediators have a decisive action in the field of prevention “public safety” and defense of rights. They can better answer the new needs and social demands expressed by refugees.

Other channels for information sharing should be used based on the previous assessment of the prevalent/usual methods of communication of boys and men – websites they usually visit, in the public spaces in the camps, etc. In addition, field workers from CSOs, medical staff and cultural mediators could serve as a great mechanism for information sharing (References group, bilateral meeting, desk review) In addition, all involved stakeholders should be included in distribution of relevant information (Commissariat staff, police, centers for social work, etc.).

As proposed by the professionals in Serbia, workshops aiming at prevention of GBV against boys and men should be organized. Since the issue is highly sensitive, different forms and methodologies should be used: art, games, storytelling, etc. In addition, the issues which should be urgently addressed are sexual education, including sexual orientation and gender identities, STIs, conflict resolution, criminal aspects of some cultural practices, etc.

Beyond providing clinical, psychosocial, socio-economic and legal support to survivors of GBV, prevention should be emphasized through behavior change. Behavior Change Communication program takes a holistic approach to GBV by considering the consequences of GBV not only for survivors, but also for families and communities as a whole, while also aiming to prevent future acts of violence. The program

seeks to change societal, community and individual attitudes and behaviors around gender and violence through different ways of communication, such as popular music, Community Theater, youth events, radio shows, public service announcements, and local community organizations.

Finally, relevant actors should be actively involved in strengthening insufficient evidence base, in order to be able to ensure an effective programming and systemic response. In order to get correct and useful information, data collection and function of a system for information management should follow certain principles. (Principles of ethical and safe data collection, Principle of confidentiality of personal data, Principle of avoiding repetition/duplication of the events/cases, Pyramid principle)⁵

Protection Services

Key issue with the protection of both female and male survivors of GBV is evident lack of adequate services to be referred to upon (proper) identification. From the very beginning,

protection system lacks even safe spaces for individual interviews in the camps accommodating migrants, as mentioned. Furthermore, adequate accommodation which would prevent GBV is not available, and the same goes for the shelters for male survivors of GBV. Some state resources are being mentioned as possible solutions, but field workers are not familiar with its capacities or procedures for accommodation. Actual practice of moving the survivors from one camp to another is not adequate and should be changed with the provision of adequate safe accommodation. In addition, some CSOs provide specific specialized services – from preventive workshops, through the counseling and provision of comprehensive support, to the accommodation; but the prerequisite for these services to be available to all boys and men in need, is that they are sustainably funded and formally recognized by the relevant institutions, including Commissariat for Refugees and Migration, Ministry of Labor, Employment, Veteran and Social Policy, etc.

Identifying gender based violence In order to provide adequate assistance, both in the prevention and response aspects, first precondition is a comprehensive training of all engaged staff – all actors involved have to have adequate knowledge and skills for appropriate actions and reactions to GBV against boys

CRIMINAL PROCEDURE CODE (*Official Gazette no. 72/2011, 101/2011, 121/2012, 32/2013, 45/2013, and 55/2014*)

- Particularly Vulnerable Witness, Article 103,
- The Rules of Questioning Particularly Vulnerable Witness, Article 104

FAMILY LAW (*Official Gazette no. 18/2005, 72/2011 and 6/2015*)

- Protection Measures, Article 198

⁵ *Multi-Sectoral Response to GBV An Effective and Coordinated Way to Protect and Empower GBV Victims/Survivors*. UNFPA Regional Office for Eastern Europe and Central Asia, 2015, eeca.unfpa.org/sites/default/files/pub-pdf/Multisectoral%20response%20to%20GBV.pdf.

and men and culturally, gender and age appropriate assistance. As mentioned by the NGO and UN and institutional partner's interview in Serbia, this does not necessarily mean additional particularization of topics and focuses, but rather development of the comprehensive training package, as well as to tailor services of all the actors involved to make them safe and supportive for male survivors, depending on their particular role in migrants' protection.

CRIMINAL CODE (*Official Gazette of RS, Nos. 85/2005, 88/2005, 107/2005, 72/2009, 111/2009, 121/12, 104/13, 108/14, 94/16*)

- Violation of Equality, Article 128
- Persecution, Article 138a
- Rape, Article 178
- Sexual Intercourse with a Helpless Person, Article 179
- Sexual Intercourse with a Child, Article 180
- Sexual Intercourse through Abuse of Position, Article 181
- Prohibited Sexual Acts, Article 182
- Sexual Harassment, Article 182a
- Pimping and Procuring, Article 183
- Mediation in Prostitution, Article 184
- Showing, procuring and possession of Pornographic Material and Juvenile Pornography, Article 185
- "Inducing a Minor to Attend Sexual Acts, Article 185a
- Abuse of Computer Networks and Other Methods of Electronic Communication To Commit Criminal Offences Against Sexual Freedom of Minors, Article 185b
- Forced marriage, Article 187a
- Cohabiting with a Minor, Article 190
- Domestic Violence, Article 194
- Human trafficking, Article 388

In addition, since the national legislation does not recognize a term gender based violence, it doesn't mean that it is not prohibited by the law nor that it doesn't exist and one of the basic points for understanding dimensions of the phenomenon is related to understanding Serbian legal framework and familiarizing relevant actors and service providers how to recognize GBV in all sectors (medical, psychosocial, legal (this only if the survivor wants)).

As female survivors of GBV, male survivors are highly unlikely to report GBV incidents. Professionals from Serbia stated from their experience that the boys and men would report GBV in two cases: 1. If they lose protection and support of male group leaders(s), most commonly the perpetrators themselves; 2. If the consequences of the violence are too severe. Otherwise, it's up to the staff in the Asylum Centers and field workers to violence and provide adequate support to survivors. Survivors GBV, UNHCR proposes the following list as behaviors that are not necessarily, but frequently present with male survivors⁶:

One of the most serious issues regarding survivors of GBV is the lack of adequate spaces for conducting individual interviews. Field workers interviewed in the process of this review development pointed that

INDICATORS FOR DETECTION AND IDENTIFICATION OF GBV SURVIVORS AMONG BOYS AND MEN

- Cannot sit comfortably; they will often sit on the edge of a chair or request to stand during an interview or meeting;
- Has cuts/scrapes bruises and defensive wounds;
- Has nightmares (small children)
- Recoils when in the physical presence of their abuser/perpetrator
- Engages in heave drinking or drug use
- Complain about lower back problems, signaling rectal problems;
- Rarely make eye contact;
- Show high levels of anger and irritability;
- Show high levels of homophobia;
- Show a strong gender preference in relation to who interviews them;
- Repeatedly discuss an apparently unrelated protection concern, even after this has been effectively addressed.

this infrastructural barrier could be seen as the precondition for all later inadequacies in reacting to the GBV.

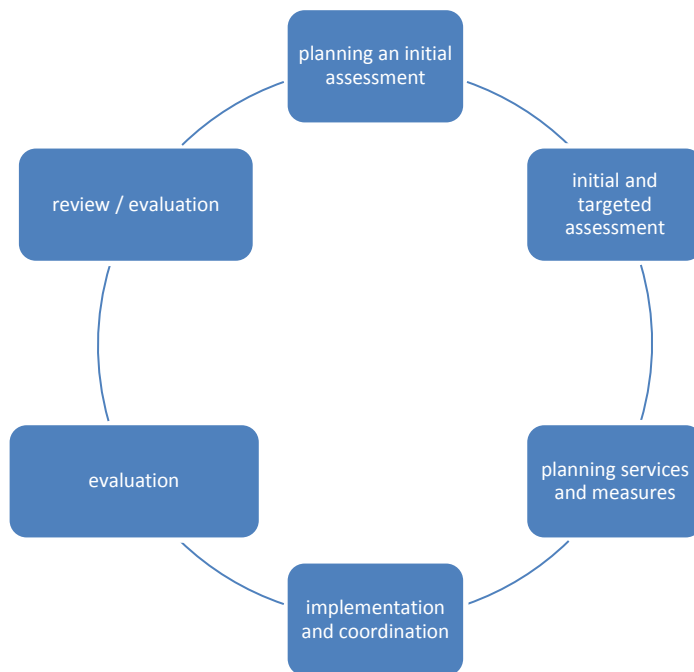
⁶ OPTIONAL MODULE GENDER-BASED VIOLENCE (GBV)." [Http://www.unhcr.org/4371faad2.Pdf](http://www.unhcr.org/4371faad2.Pdf), 2005, www.bing.com/cr?IG=DDDA56D649A846FBB0205741585170FD&CID=2AC247BADB5C62393DE04BAFDAA16321&rd=1&h=ilxOrDLF9CCtyIRDvFOSBHft_vSlpLFMRLik65sNAyU&v=1&r=http%3a%2f%2fwww.unhcr.org%2f4371faad2.pdf&p=DevEx.LB.1,5492.1.

Planning and Coordination

As already mentioned, since the urgent assistance and the referral pathways cannot differ from the ones proposed in the SOP, it would be important to emphasize the importance of adequate communication with the (potential) survivors, as well as the necessity for the implementation of regular measures prescribed for case management, including planning and coordination.

Although the centers for social work present the key protection mechanism in the Republic of Serbia, majority of field workers from the CSOs report obvious lack of centers' capacities to assist the (potential) survivors in a proper and comprehensive manner. It specifically goes for their roles as legal guardians and case managers. However, on one hand, centers for social work have to be the first point of contact in organizing (potential) survivors' protection, and on the other hand, legal framework in Serbia left a space for centers to actively coordinate all respective activities with other relevant service providers and actors.

The first phase in providing comprehensive assistance to survivors of GBV is adequate planning of the protection scheme. Case managers engaged in plans' development should be able to implement series of steps – from the assessment planning, to the evaluation of every particular individual protection plan. In addition, it is of crucial importance for them to be familiarized with various participatory methodologies, since the process should be implemented together with the survivors. Terms of national social protection systems and the Regulations on the organization, norms and standards of social welfare centers, cycle assessment could be presented a series of steps that are considered to be case management:



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Specific definitions and guidelines can be found in the definition of terms from the Regulations (Article 2, paragraphs 8-12):

"Assessment" means an organized process of collecting data, identifying and assessing problems, needs, strengths and risks, situations and involved people who are gradually developing in order to determine the goals of working with the user, the necessary services and measures;

"Planning" means a process in which, based on the information obtained during the assessment, a directed, systematic and time-limited plan is developed in cooperation with the user and the family and other involved professionals, services and persons;

"Service plan and measures" determines the basic set of services, measures, tasks and activities for achieving the desired goals of work and outcomes for the user, linking the results of the assessment with interventions, services and measures;

"Evaluation" means the procedure for assessing the adequacy of the assessment and the results of services and measures at a certain time interval, comparing the planned outcomes with the current state

⁷ Figure 5: Cycle of assessment in case management - the system of social protection of the Republic of Serbia

of the user and family, and to what extent the tasks set by the plan have been accomplished and the outcomes that lead to the work have been achieved;

"Re-examination" means a procedure in which the audit is carried out on the basis of the results of the evaluation, a reassessment of needs, strengths and risks and revises the work plan in order to adjust the services and measures to changes in the circumstances and functioning of the user and family. Usually, key groups of elements to be assessed are core vulnerabilities (violence, neglect, abuse, trafficking, UASC and FTR and immediate medical assistance and then comes care plan, such as basic needs (food, clothes, accommodation, etc.); safety, legal issues, health (including reproductive and mental health), education, economic status, family, partnership and peer relations, experience of discrimination and/or violence); capacities (vulnerabilities and risks, as well as resiliency strengths) and external factors (available resources within the community and camp). As already predicted by existing SOPs, comprehensiveness of the assessment and planning depends on the available protection services. This practically means that a Care Plan should reflect short and mid-term actions in regards to protection. Planning should involve all relevant actors, but the priority should, anyhow be, the protection of survivors' rights to privacy and all engaged actors have to be aware of their responsibilities against data protection, as well as ethical standards in care provision, which include confidentiality.

Furthermore, principle of client participation should be respected in all phases of the planning process, including preparation of the integration program and is especially important for children to be involved in their Care Plan after consent or assent is obtained.

Migrants in Serbia provide the information about themselves from the beginning of the asylum procedure. Since avoiding re-victimization should be one of the prior interests of the actors engaged, all available information should be shared between relevant stakeholders and the interviews should not be repeated.

Specifically important for the survivors' protection is The Law on Social Protection⁸, Law on Asylum and Temporary Protection, Instruction on the procedure for centers for social work – guardianship body for realization of accommodation of migrant/refugee unaccompanied children. Some of the basic principles of the reform include decentralization – devolution of certain responsibilities for social protection on local governments, development of community services that are oriented to the needs of beneficiaries, introduction of civil society organizations and private companies in the social protection system as the new providers, and so on. The objectives of social protection could also be the objectives of the protection schemes and are defined as: the preclusion of abuse, neglect or exploitation, or elimination of their consequences, and the creation of equal opportunities for independent living and encouraging of social

⁸ "Official Gazette of RS", No. 24/2011

inclusion. Some of the principles that underpin social protection are timeliness (timely identification of beneficiaries' needs, and the prevention of conditions that affect safety and social inclusion), integrity, availability and individualized approach. Beneficiaries of the law have guaranteed right to information concerning the exercise of their rights, the right to participate in the assessment of their situation and needs, and decide whether to accept the services, the right to free choice of services, to confidentiality of personal information and, ultimately, the right to privacy in the provision of services.

