

Kit 3.3: Programming

# Tools – Building Accountability





# Stakeholder Mapping Tool

**Purpose:** To assist with mapping stakeholders in CRSV monitoring, survivor assistance, community protection and preventing perpetration.

**Part A: Steps in CRSV Actor Mapping**

**Part B: Actor Information Form**

## Part A: Steps in CRSV Actor Mapping

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### Step 1

#### Define the geographical area for the mapping.

Identify the geographical boundaries for the actor mapping. For example, decide if you are mapping actors nationally, sub-nationally, across a district, etc.

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### Step 2

#### Develop a list of all humanitarian, peace and security actors, organizations and groups in the select geographical area that have a role or responsibility in:

- CRSV monitoring;
- Assisting survivors;
- Protecting communities; and/or
- Preventing perpetration.

Develop a list of actors by role/responsibility. If there is **no existing information** on actors, consult with protection, GBV and CP clusters; UN peacekeeping or political mission staff; government authorities (where safe and relevant); civil society organizations such as human rights commissions; NGO peak bodies and NGO networks; CBOs, including human rights and women's and children's groups; and other relevant actors to gather information.

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### Step 3

#### Contact each actor on the list and document information about their specific role and responsibilities.

Collect and record detailed information about each actor's role and responsibility using **Part B: Actor Information Form**.

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### Step 4

#### Find out about and contact other actors, organizations or groups that may have a role in CRSV monitoring and response.

Ask each actor, organization and group that you contact about other organizations and groups they may know about that are involved in some aspect of CRSV monitoring and response. Contact these new organizations/groups and repeat Step 3 above.

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### Step 5

#### Ensure all actors are appropriately engaged in or informed about CRSV coordination efforts.



**Part B: Actor Information Form**

<b>1. Name of service/organization</b>	
<b>2. Type of agency and mandate, where relevant</b>	
<b>3. Role</b>	
<b>4. Specific activities</b>	
<b>5. Location</b>	
<b>6. Geographical area served</b>	
<b>7. Phone number</b>	<b>8. Focal point name and contact number</b>
<b>9. Target group</b>	
<b>10. Additional information</b>	



### Part B: Actor Information Form (continued)

#### Notes for filling in actor information form

1. Write the name of the actor.
2. Write whether it is an international, national or local humanitarian, human rights or security actor. Where relevant, note the mandate in relation to CRSV monitoring and response.
3. Write down the role of the actor from the following list: CRSV monitoring; survivor assistance; protecting communities; and/or preventing perpetration. If the actor has more than one role in CRSV monitoring and response, include all relevant roles on the form.
4. Using the list of activities identified within each role below, identify the specific activities performed by the actor and write them on the form. If the activity isn't included in the list, write 'Other' and give more information.
5. Write the physical location of the actor. *\*See note*
6. Write catchment area for the actor/service.
7. Write the phone number of the organization/agency. *\*See note*
8. Write the name of the focal point or main contact person who is able to provide information and coordinate with others.
9. For survivor assistance services, write the main target groups of the service and include as much detail as possible; for example:
  - Adult women 19+
  - Adolescent girls 13–18
  - Girls aged 0–12
  - Unaccompanied children
  - Females and males of reproductive age
10. Note down any additional information that is useful to know (for example, any exclusions from the service, etc.).

**\* Note: In the case of actors who deal with human rights documentation, safety, protection or other sensitive issues, DO NOT include detailed information in a service directory or other documents that will be distributed.**

For some services, it is very important that information about the location, contact details and contact people is NOT made publicly available or widely shared in order to protect survivors, their families and anyone else who may be at risk. This applies to shelters and safe houses, where disclosing people's locations can put survivors or staff at risk.

List of roles and activities for stakeholder mapping	
Role	Activities
CRSV monitoring	<ul style="list-style-type: none"> <li>• Collection and documentation of general human rights violations by UN trained personnel in line with human rights monitoring principles</li> <li>• Collection and documentation of child rights violations for MRM by UN trained personnel</li> <li>• Informal collection and documentation of primary source human rights testimony</li> <li>• Informal collection and documentation of supporting source testimony (e.g., witnesses, community leaders, health workers and/or human rights activists)</li> <li>• Protection monitoring</li> <li>• Collection of data related to case management on sexual violence (e.g., GBVIMS and anonymized medical, forensic or other data or records)</li> <li>• Other monitoring activity – give details</li> </ul>



Part B: Actor Information Form (continued)

List of roles and activities for stakeholder mapping (continued)	
Role	Activities
Assisting survivors	<p><b>Health</b></p> <ul style="list-style-type: none"> <li>• Comprehensive post-rape care for children, include injury management, STI treatment, EC, and PEP for HIV/AIDS</li> <li>• Partial post-rape care, which includes some components but not all</li> <li>• Forensic services</li> <li>• Treatment for chronic physical health outcomes</li> <li>• Reproductive healthcare</li> <li>• Fistula repair</li> <li>• Voluntary Counselling and Testing (VCT) for HIV</li> <li>• HIV treatment, care and support services</li> <li>• Crisis counselling and support for adult survivors<sup>1</sup></li> <li>• Crisis counselling and support for child survivors</li> <li>• Mental health assessment and management (e.g., psychological or psychiatric evaluation, treatment and care)</li> <li>• Other health service – give details</li> </ul>
	<p><b>Psychosocial Support</b></p> <ul style="list-style-type: none"> <li>• Crisis counselling and support for adults/children</li> <li>• Information and advocacy</li> <li>• Casework services</li> <li>• Individual counselling/support<sup>2</sup></li> <li>• Group counselling/support<sup>3</sup></li> <li>• Material support (e.g., clothing and food)</li> <li>• Financial support</li> <li>• Family outreach and education</li> <li>• Community outreach and education</li> <li>• Livelihoods/economic support</li> <li>• Formal and informal education</li> <li>• Traditional healing</li> <li>• Other psychosocial support service – give details</li> </ul>

<sup>1</sup> Crisis counselling and support is sometimes called 'psychological first aid' in the medical model; however, in a survivor-centred model, the terms 'crisis care' or 'crisis counselling and support' are preferred.

<sup>2</sup> Refers to culturally appropriate supportive counselling that aims to provide emotional and practical support, give information and solve problems.

<sup>3</sup> Refers to culturally appropriate and supportive group-based activities that aim to provide emotional and/or practical support to group members.



Part B: Actor Information Form (continued)

List of roles and activities for stakeholder mapping (continued)	
Role	Activities
Assisting survivors (continued)	<b>Safety</b> <ul style="list-style-type: none"><li>• Short-term shelter for adult women</li><li>• Short-term shelter for mothers and their children</li><li>• Short-term shelter for adolescent girls/children</li><li>• Medium-term shelter and accommodation</li><li>• Other safety service – give details</li></ul>
	<b>Child Protection</b> <ul style="list-style-type: none"><li>• Alternative care placement for children, including separated and unaccompanied children</li><li>• Family tracing and reunification</li><li>• Financial and other support to families</li></ul>
Protecting communities	<ul style="list-style-type: none"><li>• Physical protection measures (e.g., security patrols, transport, and military and non-military escorts for girls and women in high-risk areas when gathering firewood, collecting water or travelling to and from school)</li><li>• Early warning and response measures (e.g., community alert networks; rapid response safety plans for at-risk communities or populations; and other measures)</li><li>• Humanitarian assistance interventions to reduce vulnerability (e.g., fuel-efficient stoves)</li><li>• Community-based conflict management, violence prevention or peacebuilding interventions</li><li>• Other – give details</li></ul>
Preventing perpetration	<ul style="list-style-type: none"><li>• Formal/informal engagement, negotiation and dialogue with parties to the conflict</li><li>• Advocacy with parties to the conflict</li><li>• Awareness-raising and training of armed actors (e.g., on IHL and human rights)</li><li>• Other – give details</li></ul>



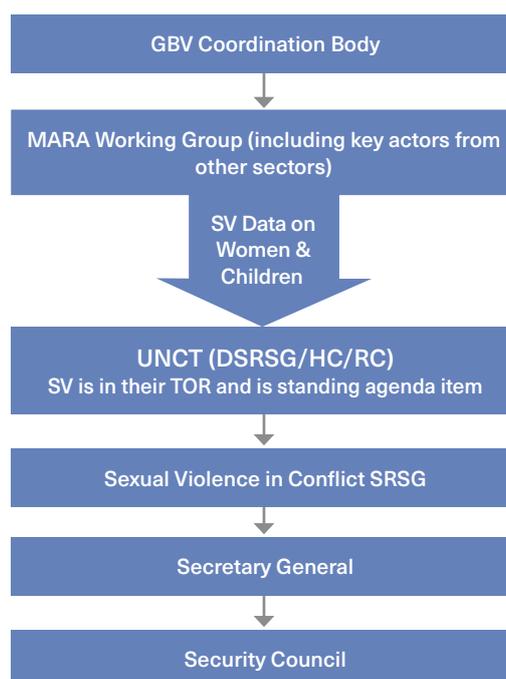
## Coordination Architecture Options

There is no 'one size fits all' approach to CRSV coordination. The three models below are examples only. The first is appropriate for settings where there is no 1612 MRM; the second and third may be appropriate in situations where a 1612 MRM has been established. There are, however, other approaches taken in different settings, and given the complexities in different conflict-affected countries, it is not possible to have a standard approach. Depending on each country context, all relevant actors should be consulted when determining the structure of the mechanism.<sup>1</sup>

As a reminder, SCRs 1612, 1882 and 1888 are related to the establishment of the MRM:

<b>SCR 1612 (2005)</b>	Establishes the monitoring and reporting mechanism (MRM) on six grave violations against children in armed conflict, including sexual violence.
<b>SCR 1882 (2009)</b>	Calls for listing of parties engaged in sexual violence and the integration of sexual violence into Action Plans.
<b>SCR 1888 (2009)</b>	Strengthens the efforts of the international community to combat sexual violence in armed conflict.
<b>SCR 1960 (2010)</b>	Establishes monitoring, analysis and reporting arrangements (MARA) on conflict-related sexual violence; mandates the Secretary-General to list those parties suspected of committing or being responsible for patterns of sexual violence.

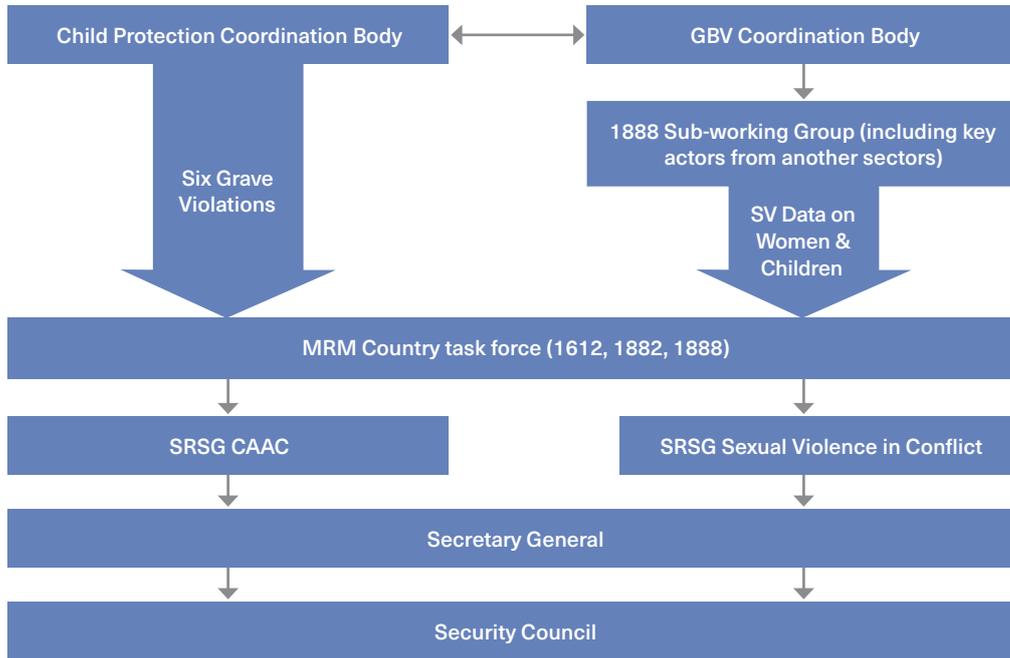
### Model 1: Standalone MARA Working Group



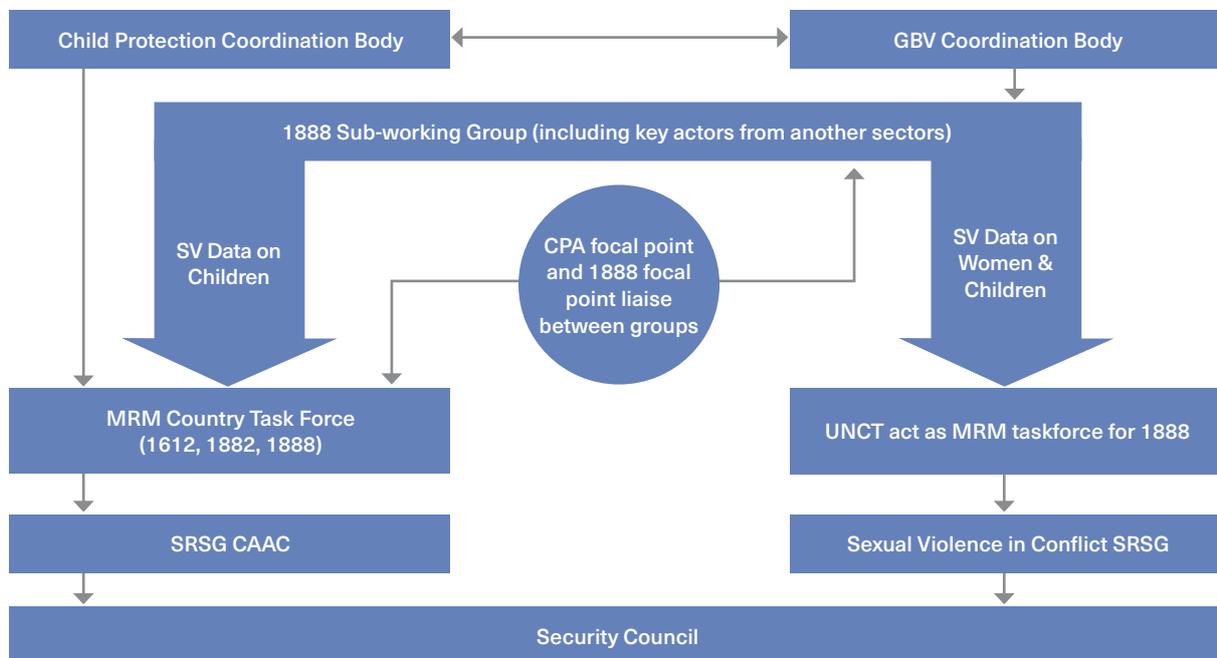
<sup>1</sup> Source for this tool: United Nations Children's Fund Proposal to Respond to *UN Security Council Resolution 1888 (2009)*, Operative Paragraph 26: *Strengthening UN Response to Sexual Violence in Conflict-Related Situations*.



**Model 2: Partial integration with 1612 MRM**



**Model 3: Full integration with 1612/1882 MRM**





### Pros and Cons of Coordination Architecture Models 2 and 3

Features	Model 2	Model 3
<p><b>Avoids duplication of monitoring &amp; reporting efforts</b></p>	<ul style="list-style-type: none"> <li>- Given that collecting and reporting information on rape and other forms of sexual violence remains a significant challenge for many 1612 MRM Task Forces, this is an opportunity to ensure the efforts related to SCR 1888 are streamlined with existing mechanisms and improve data collection on sexual violence perpetrated against both children and adults.</li> <li>- Efforts to collect, verify and analyse information on sexual violence may be duplicated. To some extent, this can be overcome by ensuring there is a GBV actor identified as a Focal Point who is engaged in the MRM Country Task Force, as well as a CP actor identified as a Focal Point who is engaged in the 1888 Working Group.</li> </ul>	<ul style="list-style-type: none"> <li>+ Avoids duplication between monitoring and reporting for SCR 1612 and 1888 by ensuring there is only one body responsible for monitoring and reporting on sexual violence.</li> <li>+ Makes use of the infrastructure already established for the 1612 MRM.</li> <li>- Potential for confusion between the mandates and requirements outlined within 1612 and 1888.</li> </ul>
<p><b>Engages senior UN staff in the implementation of the mechanism</b></p>	<ul style="list-style-type: none"> <li>+ Ensures senior-level leadership through the existing MRM Country Task Forces and the UNCT. To ensure sexual violence against women and children is appropriately addressed by the UNCT, sexual violence should be included as a standing agenda item of all UNCT meetings and should be in the Terms of Reference of the DSRSG and HC/RC.</li> <li>- Risk that sexual violence will not receive the attention it needs because the UNCT meetings are meant to address a range of issues. To some extent, this limitation can be overcome by ensuring that sexual violence is a standing item on the UNCT agenda and that it is part of the DSRSG/ HC/RC Terms of Reference.</li> </ul>	<ul style="list-style-type: none"> <li>+ Ensures senior-level leadership through the existing MRM Country Task Forces and the UNCT.</li> <li>- Compositing a high-level Task Force may preclude some actors relevant to 1888 from participating; however, membership could be expanded at the field level.</li> </ul>
<p><b>Upholds guidelines for safe and ethical information collection</b></p>	<ul style="list-style-type: none"> <li>+ Improves the likelihood of adhering to best practices and guidelines on safe and ethical information collection by engaging in-country GBV experts in information collection.</li> </ul>	<ul style="list-style-type: none"> <li>+ Improves the likelihood of adhering to best practices and guidelines on safe and ethical information collection by engaging in-country GBV experts in information collection.</li> </ul>



Pros and Cons of Coordination Architecture Models 2 and 3 (continued)

Features	Model 2	Model 3
<b>Improves coordination between key actors</b>	<ul style="list-style-type: none"> <li>+ Improves the flow of sexual violence information by bringing together national GBV actors, including in-country sexual violence experts, service providers, and other key peace and security actors (such as peacekeepers) through the 1888 Working Group.<sup>2</sup></li> <li>+ Promotes coordination of all actors working on sexual violence against both women and children.</li> <li>- The MRM for 1888 may not fully benefit from lessons learned implementing the 1612 MRM.</li> </ul>	<ul style="list-style-type: none"> <li>+ Improves the flow of sexual violence information by bringing together national GBV actors, including in-country sexual violence experts, service providers, and other key peace and security actors (such as peacekeepers) through the 1888 Working Group.</li> <li>+ Promotes coordination of all actors working on sexual violence against both women and children.</li> </ul>
<b>Leverages in-country expertise on sexual violence</b>	<ul style="list-style-type: none"> <li>+ Improves the level of expertise applied to sexual violence information collection and analysis in both the 1612 and 1888 mechanisms.</li> <li>+ Provides an opportunity for actors engaged in implementing SCR 1888 to build the capacity of 1612 Task Force members in relation to sexual violence.</li> <li>- The process will not be fully managed by entities with expertise on sexual violence, but rather by the broader UNCT, which must address a range of issues and which does not have specialized knowledge on sexual violence.</li> </ul>	<ul style="list-style-type: none"> <li>+ Assures in-country sexual violence experts are fully involved in and in control of all decision-making about information sharing related to sexual violence. For example, their engagement could ensure information is collected based on the principles enshrined in the GBVIMS.</li> <li>- It may be challenging to limit the number of agencies interested in participating in the MRM Country Task Force.</li> </ul>
<b>Expands sources of information</b>	<ul style="list-style-type: none"> <li>+ The entry point for the collection of information on sexual violence is from service providers who are members of the national GBV coordination structure.<sup>3</sup></li> <li>+ Will increase the data available to the 1612 MRM Task Force to address sexual violence against children, while keeping the integrity of the 1612 process.</li> </ul>	<ul style="list-style-type: none"> <li>+ The entry point for the collection of information on sexual violence is from service providers who are members of the national GBV coordination structure.</li> <li>+ Will increase the data available to the 1612 MRM Task Force to address sexual violence against children.</li> </ul>
<b>Improves the quality of response</b>	<ul style="list-style-type: none"> <li>+ Will promote informed recommendations at country level and Security Council level in relation to sexual violence against both children and adults by including sexual violence experts in information collection and analysis.</li> </ul>	<ul style="list-style-type: none"> <li>+ Will promote informed recommendations at country level and Security Council level in relation to sexual violence against both children and adults by including sexual violence experts in information collection and analysis.</li> </ul>

2 Notably, the global study on the 1612 MRM conducted by the Watchlist on Children and Armed Conflict calls for country-level task forces to increase collaboration among institutions and agencies addressing sexual violence in order to inform monitoring and reporting on violations targeting children.

3 Where National GBV Coordination Structures exist, the 1888 Working Group will be a sub-working group of this body. Where they are non-existent, the 1888 Working Group will be convened to work collectively on issue of sexual violence.

