**2022 Rapid Gender Assessment**

**CCCM Cluster – Somalia**

**Focus Group Discussion Guide & Tool**

**Purpose**

The purpose of the CCCM Cluster Rapid Gender Analysis (RGA) is to gather information about opinions and attitudes among women, men, girls and boys in select IDP sites in Somalia. The RGA is expected to provide insight to the perceptions of displaced women, girls, boys and men from the target communities concerning:

1. The effectiveness of camp management committees in facilitating inclusion, participation and access in the context of large numbers of new arrivals.
2. The role of women in camp management committees
3. Inclusion/exclusion of women/youth/minorities/PwDs in decision making
4. Protection of displaced people in IDP sites

**Methodology**

The RGA will be implemented through the use of focus group discussions (FGDs) in at least 30 IDP sites; at least 6 FGDs will be convened per site. Partners should select IDP sites on the basis of operational presence and close relationship with the site governance structure (CMC) at the site-level. FGDs should be held with the following groups: men, women, young men, young women and should include people with disabilities and minorities. Ideally, partners will also hold FGDs with members of minority communities. When possible, PwDs and persons from minority backgrounds who participate in FGDs should be informally pulled aside after FGDs to discuss in more depth their perception of the effectiveness and inclusiveness of CMCs. Each focus group should range in size from six to ten participants.

**Additional guidance**

* Plan and implement all sessions with a ‘Do No Harm’ approach
* Ensure that all facilitators are sensitive to the local context and be aware of the challenges and concerns of marginalized and minority groups, including women, youth, minorities and people with disabilities.
* Ensure that all facilitators are aware of the PSEA referral agencies and GBV referral pathways prior to executing the FGDs and that they attend all FGDs with the correct contact information available to share with any FGD participant.
* the PSEA referral agencies and GBV referral pathways prior to executing the FGDs
* Ensure that all FGD facilitators and translators are trained to strictly observe confidentiality and to avoid disclosure or discussion about any individual case of GBV/SEA.
* Facilitators are advised to work with researchers to map targeted IDP sites to ensure that all site locations, including furthest points and hard to reach areas, are adequately represented to ensure a good representation of groups
* Plan sessions at those times of day that accord with the varying responsibilities and commitments of different groups. For example, men may not be available during working hours if they have a job; women may not be available in the late afternoon or evening due to household responsibilities.
* Select FGD sites that are accessible to persons with disabilities.
* Depending on local context men should facilitate men’s groups and women, women groups. Minority clan representatives should facilitate FGDs with minorities.
* Facilitators should prepare a two-minute script to introduce the FGD to participants. The script should include the following:
1. Thank the participant(s) for their participation.
2. Explain the objectives and expectations of the discussion.
3. Outline the amount of time the focus groups will take (approximately 1.5-2 hours).
4. Obtain permission to write notes from FGDs
5. Explain confidentiality and how the information will be used and notes/recordings will be disposed of.
6. Establish ground rules for the discussion (ie, being respectful of others’ opinions, not interrupting, no mobile phones to be used, etc).
7. Encourage contributions of all participants and note that no participant is obliged to comment unless he/she wants to.
8. Explain that participation (or lack of contribution) in no way affects any benefits to which participants or their families are entitled.
* If during an FGD a facilitator observes people from a minority clan or marginalised group or with a disability, the facilitator should request a separate interview with them after the discussion. The request should be accompanied by an explanation of the purpose of the interview, the right of the interviewee to refuse the request, and a clarification that participation or the refusal to participate in an interview has no bearing on the interviewee’s humanitarian entitlements.
* Should there be any discomfort in answering questions included below, a facilitator should highlight this to the researchers during the orientation of facilitators (before the FGDs). Questions can then be tailored as agreed.
* If there is an issue or potential risk noted during the FGD with a particular area of questioning or the direction of discussion, the facilitator should work to manoeuvre the conversation with the aim to reduce any tensions (use a ‘do no harm’ approach) as needed.

**FGD Data**

Partners should collect the following demographic data for each focus group. All fields are required. This data should be entered into an online form at the following link: (To be sent)

|  |
| --- |
| **Partner Information** |
| **Name of facilitator:** | **Name of organization:** |
| **Email:** | **Telephone:** |
| **Geographic Data**  |
| **District:** | **IDP site name:** | **Location of FGD:** |
| **FGD Data** |
| **Date:** | **# of FGD participants:** | **Language:** |
|  |
| **FGD participants description:** | **Camp committee members** | **Community members** |
|  |
| **FGD was composed of:** | **Males** | **Females** | **Mixed sexes** |
| **(select all that apply)** | **Adults** | **Youth** | **Mixed ages** |
|  | **Minorities** |  |  |
|  |
| **FGD included:** | **PwDs** | **Yes** | **No** | **Not sure** |
|  | **Minorities** | **Yes** | **No** | **Not sure** |
|  | **Elderly** | **Yes** | **No** | **Not sure** |
|  |
| **PwDs and minorities were contacted for follow up interviews after the FGD:** | **Yes** | **No** |

**FGD Questions**

**Effects of crises on camp management (20 minutes)**

1. In general, in the past year, do you think services and access to services for everyone has improved in the site? Why do you think this to be the case? What changes have you noted for your own household in the last year? If you do not think services have improved, why do you believe this is so?
2. Do you think that camp management committees (CMCs) have helped improve access to services within the site for everyone (women, youth, minorities, PwDs)?
3. Given the number of displaced people who are arriving as a result of different crises, do you think any adaptations to camp management are needed to meet the needs of new arrivals and long term IDPs? What is working? What would you change to meet the new challenges?
4. **[[OPTIONAL DEPENDING ON TIME]]** Are there groups or networks that the CMCs can work with to support improved access of services and information about activities in the site for everyone?

**Inclusion, participation and influence of women and youth (45 minutes)**

1. Does the CMC in your community include women? If yes, what role(s) do women play in the CMC in your area? What is the most significant change in your HH/in your community since women have started engaging in CMCs?
2. Do you feel that the CMC listens effectively to the concerns and issues raised by women CMC members and other women leaders in the community? Why or why not?
3. Other than the CMC, are there other community groups or networks that facilitate meaningful participation and leadership opportunities for youth (including PwD and minority youth, and young women and men)?
4. Are there youth leaders in your community? What kinds of activities do you see young people leading? Do you participate in them? Why or why not?
5. Complete the statement: If young men/women participated in camp committees, what would change for you or others in your community…

**Protection (40 minutes)**

1. Are the safety concerns of women, men, boys and girls, including PWDs and minorities, discussed within the CMC or other community structures?
2. Do CMCs or other community structures help reduce protection risks? (If yes, how and if not, why not? What should or could they do to reduce protection risks?)
3. How do you protect yourself/your community from GBV/SEA risks? Which measures do you think are the most effective to protect you/your community from protection risks?
4. Are community reporting channels equally appropriate and safe for men, women, girls and boys, including PwDs and minorities? (If they are not safe, what makes them unsafe? How can they be made safer?)
5. Are you and the community aware that humanitarian aid is free of any fee or payment, including any exchange in-kind or any favour?
6. Do you know where to go in case you or a member of your family or of your community needs to report a case of SEA/GBV and receive services?

**Data organization and submission**

1. Demographic data collected from the FGDs (ie, number of participations, location, etc) should be recorded in Kobo: (link to be provided)
2. Data that is recorded during FGDs can be written down in either Somali or English however agencies will need to translate all FGD findings into English prior to submitting data to the CCCM cluster/GenCap Advisor. Photocopies of completed FGD questionnaires should be submitted in English to the CCCM Cluster/GenCap Advisor for executed group discussion in targeted IDP sites.
3. Data should be submitted by July 7 by close of business.