***Note:*** *This is mainly an observation tool, which means individual(s) collecting the data in every site must answer all of the questions labelled “Observation (mandatory)” based on what they see.*

*However, speaking with the community, particularly women and girls, is also an important element of understanding the safety concerns in displacement sites. Where possible, partners are also encouraged to answer the questions labelled “Discussion (recommended)” based on the answers provided by the community.[[1]](#footnote-1)*

*In areas of insecurity, the individual(s) gathering the information should not fill in the questionnaire while walking around the site/community; instead, it is recommended to take mental notes of questions and observations and fill in the form later, after leaving the site/community.*

**Organization(s) conducting the safety audit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Focal point and contact phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Region/District: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**GPS Coordinates of Site (Longitude and Latitude):\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **CAMP LAYOUT/DESIGN** | **Yes** | **No** | **Notes** |
|  | Is there space to easily walk between shelters and other structures? |  |  |  |
| Is there **any** public lighting in the site/community (street lights, etc. – either solar or electric)? (If, “no”, skip the next question) |  |  |  |
| Is there **sufficient** lighting in the site/community? |  |  |  |
| Is there a designated space where women and girls can gather to socialize, learn new skills and support one another (women’s centre, women’s and girls’ safe space, child friendly space etc.) located in or near the site? |  |  |  |
|  | Is there drainage to drain out rainwater and greywater safely? |  |  |  |
| Discussion (recommended) | Are vulnerable households located in safe locations in the site (eg. not isolated/exposed, close to services)? |  |  |  |
|  | *Any additional comments/observations related to the general layout of the site?* | | | |
|  | **SHELTER** | **Yes** | **No** | **Notes** |
| Observation (mandatory) | Do shelters have walls built of solid material (wood, metal, brick, mud etc.)? |  |  |  |
| Do shelters have secure doors with locks? |  |  |  |
| Do shelters provide privacy? |  |  |  |
| Discussion (recommended) | Are some shelters housing more than six people? |  |  |  |
| Are there multiple families sharing the same shelter? |  |  |  |
| Are there reports of breakages, breaches or thefts in the shelter? |  |  |  |
|  | Do people cook inside shelter? |  |  |  |
| Has there been fire incident in the site? |  |  |  |
|  | *Any additional comments related to shelters?* | | | |
|  | **NUTRITION** | **Yes** | **No** | **Notes** |
| Observation (mandatory) | Are there Nutrition services located within walking distance of your shelter? <30 Minutes, 30-60 minutes, >60 minutes? |  |  | If Yes, what type outpatient therapeutic programs (OTP), stabilization center (SC), targeted supplementary feeding program (TSFP), infant and young child feeding (IYCF), maternal child health nutrition (MCHN) |
| Are you aware of how to access Nutrition support in your community? |  |  |  |
| At the Nutrition center, is there a private consultation room for mothers/ caregivers? |  |  |  |
| Are there safety risks associated with the distance and/or route to be travelled to access nutrition services? |  |  |  |
| Discussion (recommended) | Are the locations & times of nutrition services safe and accessible for women and other at-risk groups? |  |  |  |
|  | *Any additional comments related to nutrition services?* | | | |
|  | **HEALTH** | **Yes** | **No** | **Notes** |
|  | Do women/girls have a serious problem because they are not able to get adequate health care treatment? |  |  |  |
| (If respondent indicates a yes) Why are women/girls unable to receive adequate health care treatment? |  |  |  |
| Are there health facilities located within walking distance of your shelter? |  |  |  |
| (If respondent indicates a yes) How long does it take to walk to health facilities? <30 Minutes, 30-60 minutes, >60 minutes? |  |  |  |
| Are there female security guards in the facility? |  |  |  |
| Are there private rooms in health facilities where survivors of gender-based violence (GBV) can receive confidential treatment? |  |  |  |
| Can child survivors of gender-based violence (GBV) also seek help in that place? |  |  |  |
| Are there latrine facilities for males and females in the health facilities? |  |  |  |
| Are facilities built/design to ensure accessibility for all persons, including those with disabilities? |  |  |  |
| Is there a health facility nearby that has the capacity (trained staff and available supplies) to provide clinical management of rape treatment? |  |  |  |
| Discussion (recommended) | Are there safety risks associated with the distance and/or route to be travelled to access health services? |  |  |  |
| Are referral pathways for Child Protection and gender-based violence (GBV) survivors in place in the health facilities? |  |  |  |
| Are there agency-specific policies or protocols in place for the clinical care of sexual assault and other forms of gender-based violence (GBV)? |  |  |  |
| Is there a health facility nearby that can provide emergency care during the night? |  |  |  |
|  | *Any additional comments related to health services?* | | | |
|  | **WASH** | **Yes** | **No** | **Notes** |
| Observation (mandatory) | Is the water point located inside the site? |  |  |  |
| Is the water point located more than 500 metres from shelters? |  |  |  |
| Are there physically separated and clearly marked latrines/bathing facilities for males and females? |  |  |  |
| Do latrines/bathing facilities have locks on the inside of the doors? |  |  |  |
| Are the latrines/bathing facilities well lit? |  |  |  |
| Are latrines located more than 50 metres from shelters? |  |  |  |
| Are latrines and bathing facilities built of solid material (wood, metal, etc.)? |  |  |  |
| Do women and girls have to pass by the men’s latrine to reach theirs? |  |  |  |
| Discussion (recommended) | Is the average wait for water longer than one hour? |  |  |  |
| Do people queue for water before sunrise or after sunset? |  |  |  |
| Is the average wait time for the latrines more than 10 minutes? |  |  |  |
| Are water points/latrine paths accessible (wide enough with a minimum of 90cms for people with wheelchairs to easily pass)? |  |  |  |
| Are beneficiaries consulted and able to participate in the design, location and overall delivery of WASH services? |  |  |  |
| Are families washing clothes in a location other than the home? |  |  |  |
| If washing clothes outside of the home, does the route to the location have any safety risks? |  |  |  |
|  | *Any additional comments related to WASH?* | | | |
|  | **EDUCATION** | **Yes** | **No** | **Notes** |
|  | Are there schools/temporary learning spaces located within walking distance of your shelter? <30 Minutes, 30-60 minutes, >60 minutes? |  |  |  |
| Within the schools, are there toilets available, adequate in number and separated for males and females? |  |  |  |
| Are school/TLS built/design to ensure accessibility for all persons, including those with disabilities? |  |  |  |
| Are the distances and routes to be travelled to school/TLS safe for all students—particularly girls? |  |  |  |
| Is there a school counsellor or a female student that can be reached in case of GBV related incidents at school? |  |  |  |
| Discussion (recommended) | Are sanitary supplies available in schools for female students and teachers of reproductive age? |  |  |  |
| What is the ratio of male to female education staff, including in positions of leadership? |  |  |  |
| Do the teachers know the referral pathways to CP/GBV services in the IDP site? |  |  |  |
| Are there children – specially girls not attending or face barriers to attending school? why? |  |  |  |
| Are there armed actors visible in the vicinity of schools? |  |  |  |
| Are there armed actors using the school? |  |  |  |
|  | *Any additional comments related to Education?* | | | |
|  | **SECURITY & OTHER SERVICES** | **Yes** | **No** | **Notes** |
| Observation (mandatory) | Are there armed individuals in/around the site who may be a threat to the community’s safety? |  |  |  |
| Does the site have any sort of security personnel responsible for protecting the residents? |  |  |  |
| If yes to the above – what is the ration of male to female security staff? |  |  |  |
| Is there a formal mechanism through which the community can provide feedback on services, safety concerns, etc.? |  |  |  |
| Discussion (recommended) | How far is it to the nearest market? <30 Minutes, 30-60 minutes, >60 minutes |  |  |  |
| Does the nearest market have enough commodities? |  |  |  |
| Have service providers created any community protection or child protection/GBV focal points in the site? |  |  |  |
| Is there an NGO or other group providing child protection /gender-based violence (GBV) services on site (case management, psychosocial activities, etc)? |  |  |  |
| Who retrieves firewood from the family and how do they get it? |  |  |  |
|  | *Any additional comments related to security and other services?* | | | |

Following Steps to be taken by Partners

1. Involve responsible partners and stakeholders in the creation of the action plan: this is preferably done in ad hoc meeting or workshop. It is important to involve in the creation of the action plan colleagues that have, in their respective organization, decision making power to commit to the implementation of specific activities that might require resource allocation.
2. The plan should clearly outline the action(s) to be taken to address a certain recommendation, the responsible organization and focal point within the organization, timeline for implementation and a column for updates and follow up. An action plan template is available on the CCCM toolkit for Somalia as well as CP and GBV AoR dropbox/humanitarian website.
3. Once the action plan is ready, it is responsibilities of the CCCM partner to regularly follow up on its implementation with partners.
4. Even when partners cannot agree on an action plan or commit to any mitigation measure, Camp Management team should still regularly follow up on the recommendations and monitor possible mitigation measures that might have be taken by actors in the sites. CCCM should also continue using reports for pushing and advocating for a safer site environment in all relevant forums, including CCCM coordination meeting, other sub national or national cluster meetings, meetings with local authorities etc. It is essential that plans and recommendations are submitted to the CCCM cluster IMO and coordinators at this stage.
5. Be the standard bearer! It is important that the CCCM team is the standard bearer for GBV risk mitigation activities in the sites and that the recommendations related to CCCM activities are implemented as soon as possible.
6. Particularly, GBV risk mitigation activities related to site maintenance should be included in the site maintenance plan for the sites and incorporated in site maintenance activities carried out by site maintenance committees.

1. For more in-depth, qualitative analysis of potential safety risks in IDP sites and host communities, the Somalia GBV sub-cluster and Child Protection AoR has also developed a comprehensive safety audit tool and participatory child led safety walk mapping tools. [↑](#footnote-ref-1)