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BOYS AND YOUNG MEN SAFE SPACES

A Guidance Note
based on the Humanitarian response
in Bosnia and Herzegovina



Impressum

BOYS AND YOUNG MEN SAFE SPACES: A Guidance Note based on the Humanitarian response in Bosnia and Herzegovina

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The list of abbreviations

B&H	Bosnia and Herzegovina
BYMC	Boys and young men center (synonym for Boys and young men safe space)
CRC	Convention on the Rights of the Child
GBV	Gender-based violence
NGO	Non-governmental organization
LGBT+	Lesbian, gay, bisexual, trans, questioning, queer, intersex, androgynous/agender/asexual/aromantic
MHPSS	Mental health and psychosocial support
SRH	Sexual and reproductive health
SOP	Standard operative procedure
TRC	Temporary reception center
WGC	Women and girls center

1. Introduction

1.1. Who are boys and young men 'on the move'

Boys and young men on the move is a population of males between 15 and 30 years of age who have left their country of origin for various often interconnected reasons, such as conflict, poverty or experiencing violence, that made them vulnerable.¹ Some of them are children who travel alone, also known as unaccompanied or separated children/minors. On their journey to reach their desired destination country this population usually suffers from different harmful experiences, including exploitation, violence, hunger and neglect of hygiene. As the number of days spent in transit increases so does their level of vulnerability.



Print screen:

The Shady Business of Trafficking Desperate Refugees | Lethal Cargo | Al Jazeera. 2016

¹ In this document the term 'boys' refers to children between 15 and 18 years of age and a population encompassed by the mandate of UNFPA.

² According to official reports, around 100,000 migrants registered in Bosnia and Herzegovina between 2017 and 2022 among which the men were predominantly young and single. See Cocco, E., "Where is the European Frontier? The Balkan Migration Crisis and Its Impact on Relations between the EU and the Western Balkans", *European View*, Sage, Thousand Oaks (2017). Available at <https://journals.sagepub.com/doi/full/10.1007/s12290-017-0471-5>.

³ TRCs in Bosnia and Herzegovina are divided into 1) TRCs for families, with a separate zone for unaccompanied children, and 2) TRCs for single men.

1.2. Mixed migration humanitarian response in Bosnia and Herzegovina

Since 2017, Bosnia and Herzegovina has become a country on the Western Balkans transit route for many boys and young men trying to reach Western Europe.² Most of them are officially registered at formally established temporary reception centers (TRCs), where competent institutions and organisations provide a range of services that target the entire population of irregular migrants.³

UNFPA has established boys and young men safe spaces within TRCs, locally called BYMC centers (Boys and young men centers).⁴ The functioning of BYMCs as part of the comprehensive referral mechanism implies strong cooperation with all partner institutions/organisations.

In the beginning, the migrant population in Bosnia and Herzegovina was mainly from middle eastern countries (Afghanistan, Syria, Pakistan and Iraq);⁵ however, the characteristics of the population have changed frequently over the years. This diverse population has arrived from more than 20 countries on three continents, namely Asia, Africa and the Americas. Since November 2022, the Ministry of Security of Bosnia and Herzegovina recorded the arrival of 106,090 migrants of which 68 per cent were adult men and 6 per cent were unaccompanied minors (almost exclusively boys).⁶ In addition to the different cultures and traditions with all their specific components, diverse educational backgrounds, habits and plans for the future create many challenges for humanitarian response programmes.

⁴ Taking into account the specific needs of girls and women, cultural norms as well as the applicability of programmes, UNFPA-a organised women and girls safe spaces separately. See UNFPA, *Woman and Girls Safe Spaces: Guidance note based on lessons learned from Syrian crises* (2014).

⁵ Conflicts in Syria, Iraq and Yemen between 2005 and 2015 caused the number of displaced migrants in the Middle East to grow fourfold, up from around 5 million to around 23 million. See more in Connor, P, *Middle East's Migrant population more than doubles since 2005* (2016).

⁶ See more in the International Organization for Migration (IOM) Situation Report 2022.

1.3. What are boys and young men centers (BYMCs)

BYMCs are suitable places where competent professionals assure the physical and emotional safety of boys and young men on the move, with the final mission to prevent, mitigate and respond to gender-based violence (GBV) and ensure accessibility and availability of sexual and reproductive health services (SRH). Through a wide range of needs based and participatory activities these centers give them a sense of dignity and help to eliminate the sense of helplessness that often occurs in this population.

BYMCs can be established in the form of two different operational models: 1) as independent/separate service centres in a selected community in a particular country and 2) as centres within a more extensive response mechanism (e.g., camps for a population affected by certain crises). Yet they must be established with the appropriate involvement of the relevant government institutions.

UNFPA has established BYMCs within TRCs as part of a broader migrant related humanitarian response in this country, officially led by the Ministry of Security of Bosnia and Herzegovina. Currently (end of 2022), they are functioning at full potential and bring new experiences on a daily basis. Since the opening of the first BYMC in 2020, almost 10,000 boys and young men have passed through these centres. Bearing in mind the trends within mixed migration humanitarian flows, sharing experiences and lessons learned would prove very useful for future interventions.

1.4. How to utilise this document

Bearing in mind that the global migrant population has never been larger (3.6% of the total population is migrating internationally), predominantly male (146 million or 3.7% of the entire male population);⁷ therefore, building knowledge on how to create an adequate response has never been more important. Especially if we consider that migrant crises are manifested differently in different countries.

Besides explaining the importance of creating safe spaces for boys and young men on the move the purpose of this document is to describe the main principles for establishing such centers, taking into account the good practice and lessons learned in Bosnia and Herzegovina. However, as each context of humanitarian response is more or less specific (different needs and backgrounds of the target population, the political situation, available resources, etc.), there are no universally applicable guidelines that should be followed strictly. When it comes spe-

As there is no available tool or manual that would provide guidelines for establishing safe spaces for boys and young men in a humanitarian crisis, this pioneering document represents a kind of precedent by creating guidelines through the presentation of the experiences of the humanitarian response in Bosnia and Herzegovina.

Box 1.
The pioneering document

⁷ See more in the International Organization for Migration (IOM) World Migrant Report 2022.

⁸ See, for example, UNFPA, *Woman and Girls Safe Spaces: Guidance note based on lessons learned from Syrian crises* (2014) and Dey, R. Mirjahan M.D, Smith. Valerio A and Zannat, R., "Establishing Women and Girls' Safe Spaces in Rohingya Response: A Guidance Note and Best Practice", *Cox's Bazar*. International Organization for Migration (IOM) Bangladesh (2022).

cifically to boys and young men there is no available tool or manual to provide guidelines for establishing safe spaces (see Box 1). This document has the potential to help and guide all those who will establish centres for boys and young men in the future in a crisis situation or as part of a humanitarian response.

The document is based mainly on the experiences of UNFPA teams and the teams of partner organisations that worked on the mixed migration humanitarian response in this country. It is enriched by the findings of desk review research. The structure of the document matches the format of similar guiding documents, which not only allows the reader to compare the differences between safe centres in different countries (e.g., Syria, Bangladesh and Bosnia and Herzegovina)⁸ but also the differences between safe spaces for men and for women.

The following chapter (Chapter 2) emphasises the different needs of boys and young men on the move that can be addressed through boys and young men centres (BYMCs). Chapter 3 offers solutions and examples of how to respond to the identified needs. Chapters 4 and 5 lead the reader through the process of establishing BYMCs, including the key guiding principles. In the final chapter (Chapter 6) the document offers useful stories and examples from Bosnia and Herzegovina.



2. Why BYMCs are needed

Boys and young men on the move as irregular migrants or refugees usually travel for months or years before they arrive in Bosnia and Herzegovina. The more time they spend on this journey and the more borders they cross irregularly only increases the probability that they will experience more unpleasant and harmful situations. Consequently, in general, they suffered more than the migrant population in countries at the beginning of the migration route such as, for example, Syria, Afghanistan and Pakistan. This means that the same boy or man has different needs at different stages of the 'migration journey'.

Box 2 opposite lists the following six subsections, taking into account the range of the needs of migrant men and boys as assessed by the competent professionals and the specific purpose of BYMCs in this country.

Box 2.
Purpose of BYMCs in Bosnia and Herzegovina

- 1. To make them feel safe and to provide services and assistance to the survivors of gender-based violence.**
- 2. To provide services for the protection of sexual reproductive health.**
- 3. To provide psychosocial support to the boys and young men.**
- 4. To organise informal education.**
- 5. To empower and build the competencies of the boys and young men.**
- 6. To fill the free time of the boys and young men with useful activities.**

2.1. To make them feel safe and to provide services and assistance to the survivors of gender-based violence

Staying in a foreign country, usually without identification documents and without language skills to communicate with the domestic people and authorities, is a general reason for the lack of safety among the migrant and refugee population. This feeling is deepened for those who have experienced or witnessed violence, especially by legal authorities (usually by the police). The very diverse population in the officially established reception centres adds to the sense of insecurity, which is further aggravated for some boys and young men. Boys and young men in TRCs throughout Bosnia and Herzegovina may have come, for example, from countries that are in armed conflict or traditional or cultural conflicts with each other. At the same time, men who display open animosity against the LGBTIQ population stay together with boys and young men from that population.

All of the causes of insecurity as well as many more must be considered when setting the preconditions for any successful intervention. Although following its mandate, UNFPA put special focus on gender-based violence (GBV) in order to provide an overall sense of security in BYMCs as a safe space.⁹ Hence, preventive sessions on violence and sharing information on the available referral mechanisms, including support for survivors, is an essential part of the entire intervention.

When it comes to the issues related to GBV identified through the BYMCs in this country the general impression is that the population of boys and young men on the move usually does not recognise it as a particular problem. Yet BYMC staff frequently identify GBV related issues, which can be classified into the following three categories.

> Violence against women: Many boys and young men that visited BYMCs demonstrated the indicators of acceptance of the cultural factors of GBV. These include gender stereotypes and prejudice (see, for example, Box 3) and sexist and patriarchal views as well as a general acceptance of violence as part of the public sphere. Consequently, there has been a significant number of cases involving GBV against women from the migrant population as well as sporadic violence against domicile women.

> Violence against the LGBTIQ population and their supporters: A certain number of boys and young men coming to the BYMCs were from the LGBTIQ population and were therefore at risk of or had experienced such violence. Furthermore,



“Women should not have managerial functions because they are guided by emotions and cannot make correct decisions.”

Box 3.
A young man
from Afghanistan

⁹ BYMCs in TRCs together with UNFPA partner organisations/institutions in Bosnia and Herzegovina provide protection for any boy or young man, including the relevant services and assistance they require. In order to ensure successful coordination in this field UNFPA has developed standard operational procedures (SOPs) that clarify the roles and responsibilities of all organisations and institutions. See, for example, UNFPA, Prevention and protection guidelines against GBV in crisis situations in the TRCs of Canton Sarajevo (2020) (unpublished document).

¹⁰ The important role in this relation is the different type of power, including physical strength of individuals, a group of supporters or a gang and their influential position resulting from their connection to smugglers.

Box 4.
A young man
from Cuba (23)

“I had no support. My parents gave me up. It was either going to a psychiatric facility or going to jail. I was in prison for several months in my country of origin. No one supports the LGBT community.”

the cultural backgrounds of the majority of migrants at TRCs does not recognise the rights of LGBTIQ persons. At the same time, the use of violence and conflict is usually a characteristic of the societies from which these migrants come. The combination of these characteristics together with the fact that many of them are religious people represents a significant threat in terms of an escalation of their intolerance towards those of different sexual orientation (see Box 4).

> Violence against boys and young men, mainly against unaccompanied and separated boys (see Box 5), is usually manifested by dominant and influential mature males.¹⁰ The most vulnerable survivors are unaccompanied or separated children and young men who lack physical and/or psychosocial maturity. According to their interpretations, it is all about “abuse of power.”¹¹ Yet the latter is not always based on threats (see Box 6).¹² As a frequently detected phenomenon among the population in BYMCs in Bosnia and Herzegovina this type of violence is seen as having at least three forms or root causes.

¹¹ See, for example, Žegarac N, Burgund Isakov A, Marković V, Husremović Dž and Trkulja A, *Wherever we go, someone does us harm: Violence against refugee and migrant children arriving in Europe through the Balkans*, Balkans Migration and Displacement Hub (2022).

¹² UNICEF, *Research on the Sexual Exploitation of Boys: Findings, ethical considerations and methodological challenges*, (2020).

¹³ See Annex 2 for more information on other harmful traditional practices identified among the population in Bosnia and Herzegovina.

(1) Traditional harmful practices: These often support the idea that “Boys and young men deserve physical punishment if they do not show obedience and submission to elders who should be worthy of respect and appreciation.”¹³

(2) Situational exploitation: This is manifested in the form of occasional requirements from a mature male requiring boys or young men to do something for him. These can be different requirements, ranging from the less serious (bringing some food or charging a mobile phone) to the most serious (sexual services or forced criminal activities). Those who refuse are punished. A typical example is abuse by a smuggler during the journey from one place to another.

(3) Systematic exploitation: This is planned and organised by those who have powerful positions, from the perspective of the migrant population, with the purpose of ensuring the long-term exploitation of boys and young men. The most frequent examples in Bosnia and Herzegovina are sexual exploitation. One example of this is ‘Bacha bazi’ or ‘dancing boys’ (a harmful traditional practice that is explained in Annex 2) and forced labour exploitation (usually in the form of street begging).

The especially vulnerable categories are unaccompanied and separated boys and girls. Without parental care, they are most likely to experience violence and exploitation. Their lack of economic certainty makes them even more vulnerable.

Box 5.
The most vulnerable

Box 6.

Contexts of exploitation in humanitarian responses

In addition to the widely known phenomenon of forced exploitation, those who work in humanitarian response have to understand the following two contexts of sexual exploitation:

- a) **survival sex** that involves engaging in sexual intercourse in order to secure basic human needs (food, clothing or shelter);
- b) **transactional sex** that involves exchanging sex and sexual favours for gifts, services, humanitarian goods, etc.

2.2. Provision of services aimed at protecting sexual reproductive health

Although issues related to sexual reproductive health (SRH) are expected and sometimes obvious among the population of irregular migrants, especially because of the hardship they experience during their journey, ensuring their participation in the programme of support can be very challenging.

There are several reasons that frequently appear in this respect:

- Conservative backgrounds nurture the value of men as the stronger gender and therefore the preconception that men should ‘suffer in silence’.
- Low levels of education are common and education on SRH in particular.
- There is the general understanding that shame is attached to sharing SRH related issues with others.
- Harmful traditions in their country of origin (See Annex 2 for more detail on the top five forms of harmful traditional practices experienced by boys and young men at BYMCs in Bosnia and Herzegovina).

¹⁴ See, for example, Ajduković, Bakić, Ajduković, *Psihosocijalna podrška u kriznim situacijama velikih razmjera* (Zagreb 2016).

¹⁵ See, for example, IOM *Bosnia and Herzegovina Situational Report 8-14 August 2022*.

2.3. Provision of necessary psychosocial support

While physical suffering is more visible, recognising and especially healing trauma takes time. Negative thoughts and emotions, flashbacks, nightmares and other negative feelings can appear suddenly months or even years after negative experiences. Boys and young men on the move do not always recognise or accept the fact that they need psychosocial support. On the contrary, they have many needs and often cannot distinguish those that are more urgent. This creates the challenge of motivating boys and young men to become involved in mental health and psychosocial support (MHPSS) activities.

Once the immediate needs and concerns have been determined it is critical to provide psychosocial first aid, because such interventions reduce stress related reactions and help people to cope with stress.¹⁴ There is no time limit to the healing process because it takes time.

The fact that boys and young men only stay for a relatively short period at the TRCs in this country makes the necessary implementation of psychosocial support extraordinarily challenging. According to official statistics for the five-year period, the approximate length of stay is between 20 and 100 days. Internal records for 2022 suggest that it is between 3 and 5 days.¹⁵ This leads to the risk that the healing process will not be completed successfully in cases where it is suddenly interrupted, namely the person left the TRC, and this in turn jeopardises the ‘do no harm’ approach. Therefore, competent BYMC staff have to find a way to prevent this (see Box 7).

2.4. Organise informal education

The low level of education enrolment rates among the migrant population broadens the gap between them and their peers, especially when it comes to higher levels of education where boys and young men should be included. Consequently, their general health and well-being is at the lower level and their social capital and independence is reduced. This is linked to the different daily life issues they face, including violence and exploitation.¹⁶

Many boys and young men registered at TRCs in this country have never had the chance to attend formal education or have left school too soon. This means that many of them have never had the opportunity to learn about the cultures and customs in Europe, the educational systems and related processes, the geography of Europe, the health systems and the many languages spoken in Europe.

“To ensure that process is appropriately closed and that appropriate support is provided, BYMC team members always agree (informally) with a boy or young man to announce his departure from TRC (whenever possible)”.

Box 7.

BYMC staff member

These facts lengthen the already large gap that exists between their desires and goals and what is achievable (see Box 8). Adjusted informal educational activities at BYMCs are intended to address those ‘gaps’ identified as potential risks. Agile and flexible programmes of informal education, based on identified needs and participatory application, provide a range of advantages in terms of achieving the overall goal of the BYMCs.

2.5. Empower them and build their competencies

The empowerment of boys and young men on the move is critical to giving them back their sense of dignity and responsibility for their lives. The various hard conditions they experienced in their country of origin and the circumstances and deprivation they experienced during the years they spent on the move (including, among others, violence and different forms of exploitation) means that it is not reasonable to expect them always to be able to make the right choices for themselves and/or socially responsible decisions.

¹⁶ See for example IOM (2022). *Bosnia and Herzegovina Situational report 8-14 August 2022*. Available at https://bih.iom.int/sites/g/files/tmzbdl1076/files/documents/01_IOM%20BiH%20External%20Sitrep_8-14%20AUG.pdf

Box 8.

A 24 year old man from Afghanistan

“I will learn Swedish, finish school and faculty and become a doctor.”



Boys and young men who travel through Bosnia and Herzegovina usually encounter many challenges within the following broad aspects:

- awareness of differences (hygiene and health issues, human rights, cultural diversity, etc.);
- life skills (communication, conflict avoidance and conflict resolution, critical thought, etc.);
- lack of trust and fear of the future (the psychological and physical impact left by their experience of violence).

In order to enhance their ability to overcome these issues in their future life, BYMCs offer diversified empowerment activities that take into account the needs and plans of individuals. A detailed overview of these empowerment activities is available in the document *'Empowering Boys and Young Men in UNFPA's Safe Spaces: Experiences from the mixed migration humanitarian response in Bosnia and Herzegovina'*.

2.6. Fill their free time with useful activities

Boys and young men at the TRCs have a significant amount of free time to spend and without control and/or strict activities different antisocial behaviour can easily appear, such as, for example, physical conflict, drug abuse and exploitation. In order to prevent this from occurring and at the same time preserve the mental and physical health of the boys and young men they are encouraged and motivated to get involved in different social and recreational activities.



3. Responding to 'their needs' through BYMCs

3.1. Activities and services at BYMCs

3.1.1. General consideration

In order to achieve the desired impact BYMCs provide a range of activities that can be grouped into the following categories: 1) empowerment activities, 2) protection activities and 3) assistance activities. Activities at BYMCs are adapted and applied depending on the identified needs of boys and young men as well as other relevant factors.

In the context of BYMCs in Bosnia and Herzegovina, the disproportion between the extent of the application of different activities is evident (see Illustration 1). Empowerment activities predominate yet assistance services require significantly less effort.

Illustration 1.
Types of activities at BYMCs

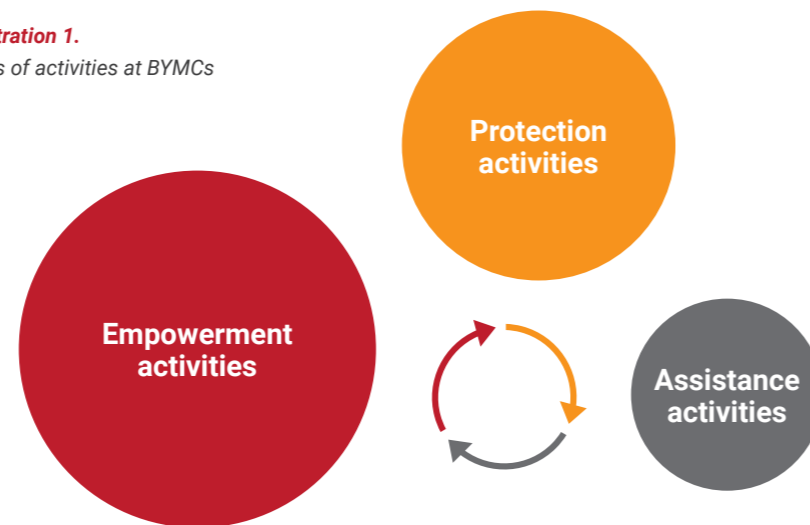


Illustration 2.
The purpose of empowerment activities at BYMCs

Purpose of the empowerment activities in BYMCs

'Now, in the BYMC' perspective

- > Create a supportive environment for boys and young man in which they feel safe and willing to share thoughts and express concerns (and expect feedback), share experiences (and expect support to overcome negative effects), and discuss plans for the future (and expect advice);
- > Inform and encourage them to take participation in relevant protection and assistance activities, with a special focus on GBV and SRH.

'Looking back' perspective

- > Strengthen boys and young man survivors of violence (especially GBV) and help to recover through empowerment activities;
- > Empower boys and young man who experienced violence and to "give them back" the feeling of responsibility for their lives as well as the ability for making choices and decisions.

'Looking forward' perspective

- > Empower boys and young men through awareness-raising, learning, and skills developed in the areas which could help them in their lives (taking into account their needs and plans);
- > Improve/maintain their mental and physical health through combination of different types of activities.

3.1.2. Empowerment activities

Empowerment activities refer to different groups of activities based on the specific needs of boys and young men on the move with the overall goal to empower them for their future life, with special focus on GBV and SRH. As shown below in Illustration 2, staff members create a safe and supportive environment for boys and young men through the perspective *'Now, in the BYMC'*. This allows for a 'dipper dive' into their past or the *'Looking back'* perspective, which includes their background and life experiences. Both of the aforementioned perspectives 'feed' the third one or the *'Look forward'* perspective, which targets positive plans for the future of the boys and young men.

Table 1.
Groups of empowerment activities applied in Bosnia and Herzegovina

'Pure' empowerment activities

1. Boys on the Move (BOTM) sessions
2. Informal educational sessions
3. Creative (social) workshops
4. Language classes
5. Thematic discussions
6. Sport and board games
7. Art sessions
8. 'Monthly events'
9. 'Social cohesion' activities
10. Info sharing and socialising throughout the TRCs (implies both empowerment and protection elements)

'Pure' empowerment activities

11. Empowering through SRH activities
12. Empowering through GBV activities
13. Empowering through PSS activities

A range of empowerment activities have been applied in BYMCs in Bosnia and Herzegovina in order to achieve the stated purpose (see Table 1). A detailed description of each particular activity is provided in the related document ‘Empowering Boys and Young Men in UNFPA’s Safe Spaces: Experiences from the mixed migration humanitarian response in Bosnia and Herzegovina’.¹⁷

3.1.3. Protection activities

In the broadest sense, protection activities implies “all activities aimed at obtaining full respect for the rights of the individual in accordance with the letter and spirit of the relevant bodies of law, namely human rights law, international humanitarian law and refugee law.”¹⁸

However, within the affirmed mandate of BYMCs in Bosnia and Herzegovina three groups of protection activities are implemented:

- 1) GBV prevention and support for survivors,¹⁹
- 2) MHPSS with the focus on survivors and
- 3) SRH related activities.

Support for survivors of Gender-based violence (GBV)

While GBV is caused by gender inequality and the abuse of power it does not recognise age or gender and anyone can experience it. There are many reasons why survivors do not report violence in general (deeming it to be trivial, not trusting the authorities, blaming themselves for what happened, fearing deportation and social stigma), while the indicators of GBV are not always visible. Consequently, the number of identified cases is usually just the ‘top of the iceberg’.

In BYMCs throughout Bosnia and Herzegovina 330 boys and young men were identified as survivors of different forms of GBV in the last two years (August

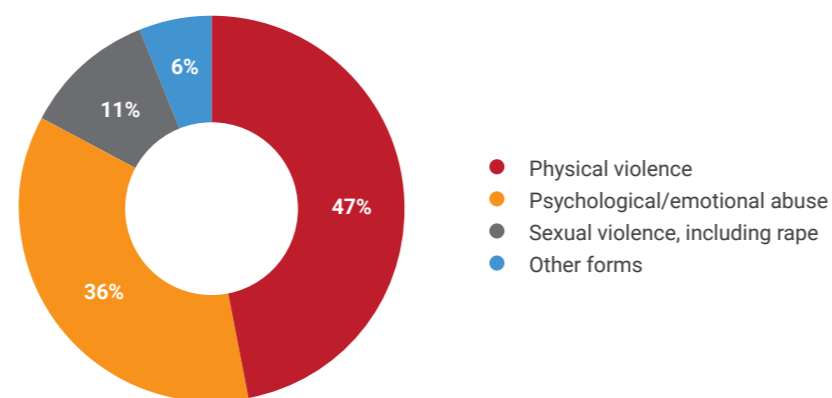
¹⁷ Please see the related document ‘Empowering Boys and Young Men in UNFPA’s Safe Spaces: Experiences from the mixed migration humanitarian response in Bosnia and Herzegovina’.

¹⁸ UNHCR Handbook for the Protection of Internally Displaced Persons (2010), p 7.

¹⁹ GBV prevention encompasses handling ‘other protection cases’ (the individuals most vulnerable to GBV, those with multiple vulnerability factors).

²⁰ See, for example, IASC, *How to support a survivor of gender-based violence when there is no GBV actor in your area* (2022).

Chart 1.
Forms of identified GBV cases in BYMCs



2020 - September 2022) (see Chart 1). Whether such cases are detected depends to a large extent on the time spent at a BYMC. Extending the stay makes it possible to neutralise the factors cited above and to finally identify such cases. Yet the short stay of boys and young men on the move at the TRCs in this country prevent the professionals at these centres from detecting more cases among this population.

All BYMC staff have to complete training on the identification of GBV and to understand the case management procedure for when such cases are identified.²⁰ It is critical to have a person in the team who is in charge of managing the case of a survivor of GBV (usually a GBV officer or GBV case manager). GBV case manager leads the case in accordance with the relevant procedure and in the best interests of the survivor. This usually implies coordination and cooperation with the competent authorities and organisations.

Good practice from Bosnia and Herzegovina

Since 2020, all BYMC in Bosnia and Herzegovina have been using GBVIMS (GBV management information system), with the aim to harmonize data collection on GBV, provide a simple method for GBV project managers to collect, store and analyse GBV-related data, and enable the safe and ethical sharing of reported GBV incident data.

GBV case managers at BYMCs in Bosnia and Herzegovina work at the individual and group level, not only to identify potential cases and run the referral mechanism but also to raise awareness about and prevent further occurrences of GBV. In both cases, the case manager provides psychosocial support to the survivor (The role of a BYMC in one such case is explained in Annex 3).

There is also a set of activities designed to prevent GBV by focusing on cases with the potential to result in GBV (also called ‘protection cases’ or ‘cases at risk’). At the very least the following three approaches should be applied in order to protect boys and young men of concern from GBV:

> **Reduce the risk** of GBV by implementing GBV prevention mitigation strategies from pre-emergency to the recovery stages of the humanitarian action.

> **Promote resilience** by strengthening national and community based systems that prevent and mitigate GBV and by enabling the survivors and those at risk of GBV access to specialised care and support services.

> **Assist the recovery** of communities and societies by supporting local and national capacity to create lasting solutions to the problem of GBV.²¹

In addition to GBV and ‘protection’ cases, boys and young men at BYMCs are exposed to different educational sessions and individual consultations regarding the prevention of GBV, identification, reporting, etc. Equally important are the sessions on ‘how to prevent becoming a GBV perpetrator’ and ‘how to support a GBV survivor.’ As the role of men working alongside women to support gender equality and the empowerment of women and girls is critical in preventing GBV and achieving gender equality²² these interventions have a broader impact.

Mental health and psychosocial support (MHPSS)

In general, MHPSS activities aim to treat and prevent psychiatric illnesses such as depression, anxiety and post-traumatic stress disorder. MHPSS is versatile since it supports one’s psychological well-being, overcoming daily struggles and issues and reducing psychological pain and stress.²³

Since the first contact with a survivor of violence is very often established by the GBV case manager, he/she is the one who provides the first psychological support or more precisely psychological support in a crisis situation. Then the survivor is referred to other necessary services either within the BYMC or to an-

other agency, depending on the service provider. Psychological support provided within the BYMCs has proven to be crucial as survivors of violence very often do not give their consent for referral to other agencies. There are a couple of reasons for their refusal: a) they do not want to repeatedly recount their traumatic experiences to different people, b) they have developed a level of trust in the BYMC personnel and expect them to provide them with psychosocial support.

It is for this reason that the focus of MHPSS activities within BYMCs is placed on the survivors of GBV. A psychosocial support (PSS) officer creates a specific individual support plan for each survivor, taking care of his priority needs but also his resources for resilience. Although boys and young men involved in MHPSS activities are usually willing to follow their individual plans the unpredictability of the length of their stay creates serious challenges and therefore this needs to be addressed as soon as possible.

Besides classical MHPSS activities, PSS is also provided through various activities at BYMCs (see Box 9).²⁴ Although the PSS officer is in charge of designing PSS activities at the group level all staff members can be involved in their implementation. It is crucial to follow the principles explained below in order to be successful.²⁵

> **Do no harm approach:** Boys and young men who take part in activities will not be subjected to social or psychological strain. When selecting and preparing PSS activities the facilitator should also use his/her own discretion. Activities need to be harm free and the participation of boys and young men needs to be voluntary. Participants should also be able to ‘sit-out’ of a particular activity without being stigmatised. Facilitators should also introduce the activity and its goals prior to its implementation.

²¹ GBV Guidelines, *Guidelines for integrating gender-based violence interventions in humanitarian action* (2022).

²² See, for example, Promundo and Plan International Canada, *Fathers’ Club Manual: Engaging men in MNCH and SRH* (2020).

²³ Government of the Netherlands, *What is mental health and psychosocial support (MHPSS)?* (2019). Available at www.government.nl/topics/mhpss.

²⁴ See, for example, UNICEF (MENA) *Psychosocial Play and Activity Book for Children and Youth Exposed to Difficult Circumstances* (2002), pp. 40-41 and the UNICEF, *Facilitator’s Manual for Psychosocial Support Activities* (2019). Available at <https://reliefweb.int/report/south-sudan/facilitator-s-manual-psychosocial-support-activities-child-friendly-spaces>.

²⁵ See also the UNRWA, *Psychosocial support recreational activities resource guide* (2017).

Box 9.

Types of PSS related activities at BYMCs

- > **Psychological first aid/support**
- > **Individual psychological support**
- > **Group psychological support**
- > **Group PSS education and discussions**
- > **PSS during crisis interventions**

> **Pay attention to your facilitation style:** The purpose of the facilitator should be to guide, inspire and help the boys and young men by setting a good example through his/her own actions. It is also important that the facilitator provides clear directions that are simple to follow. To make the approach more friendly, facilitators who work in safe spaces in Bosnia and Herzegovina often use examples or situations from their own life experiences in order to make a friendly environment and to engage the participants. This is quite important since some of the topics discussed are sometimes personal or taboo and by providing their own personal experiences the facilitators are better able to identify with the boys and young men.

> **Model the norms that you want participants to follow in their group interaction:** More often than not, the facilitator is seen as a role model by the participants and that is why it is important that during the implementation of the activities the facilitator expresses respect, tolerance, fairness, empathy, care and focus towards the boys and young men so that they exercise such behaviour to each other in the same manner. Moreover, the facilitator needs to acknowledge such behaviour and concentrate on the positive aspects whilst avoiding criticism. During the implementation of the activities, it is important that the facilitator encourages the participants to speak whilst paying close attention to each individual and respecting their opinion.

> **Take action on behalf of the participants:** Facilitators should always pay attention to any alarming behaviour such as, for example, psychological issues or any other behaviour that might endanger their well-being. With given consent and through the referral systems, it is the responsibility of the facilitator to protect and provide assistance in such cases.

Preventing SRH issues and supporting those affected

In general, there are four essential groups of sexual reproductive health (SRH) activities at BYMCs: 1) regular visits by a urologist to the BYMC and the holding of educational and preventive sessions on this topic, 2) identification of those who need an individual consultation with a doctor and provision of the same, 3) identification of those who need a medical examination and organisation of the same and 4) monitoring the person in case of further need.

BYMCs engage professional doctors (urologists) in order to maximise the effectiveness of preventing SRH issues. They provide educational sessions and relevant training for boys and young men, focusing on the most relevant SRH topics identified as the most needed for specific groups of the migrant population. Attendees of such sessions acquire elementary knowledge about the development, functioning and health of the male reproductive organs and the most needed measures of prevention in terms of SRH issues (maintaining hygiene, identification and timely reporting of alarming symptoms, risky sexual relations, etc.).



SRH sessions must be adapted to boys or more precisely to the phase of their physical and psychosocial development. This usually requires the organisation of separate age appropriate sessions. The topics concern sexual identity, knowledge of their own body and the reproductive system, establishment of intimate romantic relationships, masturbation, using condoms, awareness of urological examination, etc. In addition to the SRH sessions led by urologists, BYMC staff continuously share awareness raising messages and material as well as contraceptives.

Support for those affected by SRH issues is provided in cooperation with the relevant medical institutions (clinics/hospitals). However, identification of those that need this support may not be an easy job. Besides the above-mentioned sessions, other empowerment activities play an important role in encouraging the boys and young men to report SRH issues. Moreover, BYMC staff organise the proactive identification of potential symptoms of SRH related issues (see Box 11). After individual consultations, a BYMC officer accompanies a boy or a young man in need of a comprehensive clinical examination to the clinic.

More specifically, for GBV survivors (especially in the case of adolescents) an urgent urological examination is always organised to determine the condition of the subject and to check for potential sexually transmitted diseases.

Box 10.

Reflection of a BYMC staff member

“Most of them are in contact with a urologist for the first time and for the first time they have the opportunity to ask questions from the area of interest and, if necessary, a comprehensive urological examination is performed.”

Box 11.

A good practice from Bosnia and Herzegovina

BYMC staff organise an assessment by collecting information from all the boys and young men in the accommodation units, using a designed tool (asking them to answer a list of questions) that has the potential to identify symptoms of SRH issues.





Box 12.
Dignity kits for boys and young men - A good practice from Bosnia and Herzegovina

Although it was developed primarily to address the needs of women and girls through the UNFPA humanitarian response, 'Dignity kits' have been prepared and distributed to 3,500 boys and young men in TRCs in Bosnia and Herzegovina. According to the recorded feedback and monitoring results, it had a significant positive impact.

3.1.4. Assistance activities

At BYMCs there is a need to provide assistance on a daily basis and these activities are always related functionally to the above-mentioned protection activities. Hence, one of the most frequent activities is accompanying and assisting a boy or young man during transport to a public institution for the needed services. It includes, but it is not limited to the following:

- hospital (e.g., for a urological examination);
- police station (e.g., in some GBV cases);
- safe house (e.g., to support the survivor of GBV).

When accompanying the boy or young man, the role of the empowerment and GBV officer is to make sure that everything goes according to the previously arranged plan for the trip and the corresponding obligations. When needed, where possible, they also act as interpreters. Empowerment officers not only provide translation support to boys and young men for UNFPA supported activities but also during other situations and activities that could significantly impact their lives, such as during registration, accommodation, family separation, etc.

These activities also extend within the TRCs. When there is a need (prescription by a urologist for certain medication), the empowerment officer will escort a boy or young man to the TRC's chemists so that he can be provided with the prescribed medication. Moreover, the centre itself provides certain necessary items in the form of coffee, tea, candy and 'Dignity kits' (see Box 12).²⁶

These activities can also be in the form of informal open conversation with a boy or young man when they seek advice on certain matters. This can range from conversations about their daily life struggles to GBV, SRH and personal hygiene and the living conditions at the TRC, which stand out as the most important topics.

²⁶ Dignity kits are a hygiene and clothing package that is distributed to boys and young men who participate in certain activities. These packages can include toothpaste, a toothbrush, shampoo, shower gel, a razor, shaving foam, a shirt, undershirt, underwear and condoms.

²⁷ In accordance with the Child Rights Convention (CRC) dating from 1989, a child is defined under Article 1 as every human being below the age of eighteen years of age.

²⁸ At least the rights guaranteed by the CRC and other international law, but also the rights guaranteed by the national law.

3.2. What works for whom and under which circumstances

One of the most important criterion that determines which activity will be chosen and how it will be applied is age difference. Boys both as children²⁷ and as human beings with emotional and physical immaturity have different needs from young men, but also special rights.²⁸ There are enough reasons to keep the focus on these differences during the intervention.

To maximise the impact, BYMC staff take into account other criteria that have a significant influence on the needs and capacities of boys and young men to overcome the challenges they face. Family status is one of them. In that sense, Table 2 shows the important categories of boys and young men in BYMCs in Bosnia and Herzegovina.

There are also many other differences that must be considered during the design and implementation of activities. Seen through the experiences in Bosnia and

Box 13. Reflection of an UNFPA staff member

"An international organisation whose mandate in TRC is WASH approached the BYMC asking for our support to improve and prevent further misuse of the sanitary units by boys and young men. Empowerment officers at the BYMC prepared a PowerPoint presentation on the proper usage of the sanitary/hygienic units and applied it on many occasions (especially when new arrivals were admitted to the TRC). Besides the direct impact achieved, this activity indirectly contributed to the SRH component and general improvement in their living conditions."

Table 2.
Categories of boys and young men in BYMCs in Bosnia and Herzegovina

Category	Definition
Unaccompanied boys	Boys (also known as unaccompanied minors) who have been separated from both parents and other relatives and are not being cared for by an adult who by law or by custom is deemed responsible for so doing. ²⁹
Separated boys	Boys separated from both parents or from their previous legal or customary primary caregiver but not necessarily from other relatives. These can therefore include children accompanied by other adult family members. ³⁰ However, families with all male members (so called 'male families') are a particularly interesting phenomenon whereby boys and young men have an increased risk of experiencing different forms of violence. ³¹
Boys with families	Boys traveling with their families and with both parents or at least one parent (father, mother, adult sister/brother).
Men with families	Men traveling with wives and children or other family members. This also applies to men traveling only with their wife, only their children or with other family members.
Single men	Men aged 18 or above traveling without family members. They are usually registered as single when seeking asylum in Bosnia and Herzegovina, a process commonly known as a 'white paper'.

²⁹ International Committee of the Red Cross, *Inter-agency Guiding Principles on Unaccompanied and Separated Children* (2004).

³⁰ Ibid.

³¹ See, for example, Vujovic S, "All roads lead to Sarajevo: The capital of Bosnia and Herzegovina as a suitable place for trafficking of migrants", *Urban crime – An international journal*, 3(1) (2021), pp. 226-229.

Herzegovina, the most important are the literacy level, educational background, cultural differences, traditions, sexual orientation, disabilities, conflict between different nationalities, religion and race.

To achieve the maximum level of success it is sufficient just to adapt the activities to the specific group with whom you are working. However, there are also important universal circumstances and conditions that should be considered. Experiences from Bosnia and Herzegovina point to three important universal segments.

> **Participatory planning:** The plan of activities and services should be made in accordance with the needs and preferences of the boys and young men. This should be based on participatory assessments, but it should be noted that these might be made very quickly and informally. It is necessary when implementing services and activities to understand the cultural framework from which the boys and young men come and to implement activities and services in accordance with them.

> **Adaptability:** Although planned activities are always prepared ahead of time via a weekly schedule, working in a BYMC sometimes requires more 'rescheduling' than 'scheduling'. Obviously, the primary goal of the boys and young men in BYMCs established in the countries that are on their transition route, such as Bosnia and Herzegovina, is to continue on their journey and reach their chosen 'destination country'. Consequently, their priorities are focused on their personal agenda.

> **Building trust and social bonds:** Boys and young men deserve true and reliable information. They should be informed about their rights and obligations, including their clear expectations whilst they are at the TRC or in this country. Activities and services must be equally accessible to all of the boys and young men including persons with disabilities. Activities and services must be provided on a timely basis and in accordance with the schedule. When services depend on other organisations within the TRC they must be well coordinated. It is also desirable to inform them about the different cultural patterns in this country (but also the region and the world) in order to prepare them for life in multicultural environments. By acting professionally and respecting the boys and young men and their needs social bonds will become stronger and stronger. Consequently, many boys and young men are ready to help BYMC staff in engaging other boys and young men in activities. Moreover, these positive circumstances have led to unexpected achievements (see Box 13).

4. Guiding principles for establishing boys and young men safe spaces?

4.1. Leadership and the empowerment of boys and men

Boys and young men should accept a BYMC as a place where they have an opportunity to actively participate in designing and leading certain activities or processes. These centres represent the best way to match their needs as well as for them to gain a sense of empowerment and value. The working hours of a BYMC should be aligned with their needs and they should also participate in the remodelling of the BYMC premises and accommodation units (see Illustration 3). Bosnia and Herzegovina offers a good example of how to establish a functional body that represents the population/community in focus (see Box 14).



Box 14.
The example 'The Boys'
Voice'

4.2. Survivor centred approach

Everything you do in a BYMC has to be in the best interests of the boys and young men. Looking from the other side, nothing that could jeopardise their best interests can be implemented at a BYMC. This means that the boys and young men are at the centre of all processes in the BYMC. Hence, almost everything requires consideration, assessment and monitoring and crucially feedback from the boys and young men.

A survivor centred approach creates a supportive environment in which the rights and wishes of survivors are respected, their safety is ensured and they are treated with dignity and respect. A survivor centred approach is based on the following guiding principles.

> **Safety:** The safety and security of the survivor and his children is the primary consideration.

'The Boys' Voice' is a body that represents boys from all over the world that are currently in TRC in Bosnia and Herzegovina. It was formed by organising elections in which all present boys took part and democratically elected two representatives from each country of origin (this was organised with the support of other adolescent mandated organisations). This was followed by the holding of regular weekly meetings attended by representatives of the boys and representatives of organisations that, according to their mandates, work with boys. Now there is two-way communication and the boy representatives have the opportunity to advocate the opinions/ideas/proposals of the other boys in matters pertaining to solving significant challenges/difficulties/problems at the TRC, but also to give ideas and proposals for innovations in matters related to the activities and services themselves. Minutes are regularly written and delivered to other organisations and through the 'action points' work is done on what is pointed out through 'The Boys' Voice'. In addition to the development of leadership and advocacy skills and the realisation of changes at the TRC, this opportunity contributes significantly towards the boys getting to know each other and brings them together despite all of their differences.

> **Confidentiality:** Survivors have the right to choose to whom they will or will not tell their story and this information cannot be shared without the informed consent of the survivor.

> **Respect:** All actions taken should be guided by respect for the choices, wishes, rights and dignity of the survivor. The role of helpers is to facilitate recovery and provide resources to aid the survivor.

> **Non-discrimination:** Survivors should receive equal and fair treatment, regardless of their age, gender, race, religion, nationality, ethnicity, sexual orientation or any other characteristic.³²

Although BYMC team members are working with people in need, including vulnerable categories, they must be careful to avoid labelling the population such as *females from Afghanistan have a low level of education* or build certain stereotypes or generalisations like *the migrant population does not understand this or that*. The consequences could lead to discrimination.

4.3. Safety and accessibility

Since their establishment, all BYMCs in Bosnia and Herzegovina have been located within the TRCs. BYMCs for young men aged 18+ have been established in TRCs for 'single men', while BYMCs for children (aged 15-17) were established in TRCs for families in order to ensure a higher level of safety. Namely, although many of them are technically single males their vulnerability as unaccompanied and separated children means that they need to stay in a safer environment.

It is necessary to monitor the position of BYMCs within TRCs. It is always important, for instance, to consider how close the entrance gate is, how far from police premises, how many exit routes there are in case of an emergency and if there are any potential hazards that could adversely affect safety. Since these centres are located within the TRCs, only boys and young men registered as residents of the TRC are permitted to enter the BYMC and participate in its activities.

A safe space for boys and young men should be accessible to all of these boys and young men. This space must also ensure their safety and privacy. Their

“When we (migrants/refugees at the TRC) do something wrong or act out during a session UNFPA team calm us down and they talk to us and help us find another way to deal with our emotions and thoughts. No matter how I am feeling I know they will be understanding and respect me and I can come here at any time and I will be helped.”

Box 15.
A young man (19)

opinion should be taken into account when deciding where the safe space for boys and young men will be located. Although the safety regulations of one TRC meant that GBV specialists and experts from the UNFPA team made the final decision together with the management of the TRC, it is extremely important to provide all necessary evidence to explain and justify the choice of the best place to establish a BYMC and this includes the perceptions of the boys and young men themselves.

A good practice in Bosnia and Herzegovina is the conduct of regular 'safety audits'. In order to make possible improvements and to minimise the chances of GBV and other types of violence occurring, the safety audit aims to check the sur-

veillance video system, that toilets are separate for different categories of people present in the TRC (especially the most vulnerable), accessibility and proximity to key services, the proximity of the police to the TRC accommodation units, the location of the 'green zone', etc. As part of the safety audit, which includes a physical tour of the TRC and the recording of any identified shortcomings/challenges, the BYMC conducts focus group discussions with the vulnerable population in each TRC.

The aim of the focus group discussions is to include their perception and to identify any risk factors, patterns and causes that could make the affected population more susceptible and vulnerable to violence as seen from their point of view (see Annex 4 for an example of a participatory assessment exercise).

BYMCs also regularly conduct a 'GBV participatory assessment', especially when trends or the structure of people in the camp change or when there are any changes that could have an impact on the residents. The GBV participatory assessment carried out with the target group checks their viewpoint, experiences, challenges, ideas and recommendations regarding their personal feeling of safety and possible exposure to GBV at a particular TRC (see Box 16). Recommendations from above-mentioned documents are forwarded to the TRC management in order to improve the security situation and are also discussed with the broader audience during the GBV working group.

4.4. Community involvement

Depending on the situational context and operational model of the BYMC, the expectation of community involvement might be different. While those established in local communities require the involvement of local leaders and representatives of the relevant institutions, working in TRCs is more about creating a supportive environment inside. Experiences in Bosnia and Herzegovina underline the importance of community involvement in the following two directions:

1. Boys and young men should be involved in the processes in a BYMC in order to maximise the potential for addressing their needs. Namely, all different components of a 'community' (the target population in a TRC) and all communities coexisting in the territory, namely the TRC, should be engaged.

2. Their involvement in terms of peer support is extremely beneficial for newly arrived boys and young men. Acceptance and peer support for boys and young men at a BYMC/TRC has the potential to determine how much of an impact the

“After conducting the participatory assessment, the BYMC was placed in one part of the TRC. However, the boys and young men did not want to visit the centre for unexpected or unexplored reasons. After a follow-up assessment with young men, it was concluded that the BYMC should be placed in a different location within the same TRC. Therefore, participatory assessments sometimes need follow-up.”

Box 16.
Lesson learned
in Bosnia and Herzegovina

³² UNFPA, *Minimum Standards for Prevention and Response to Gender-based Violence in Emergencies* (2015). Available at www.unfpa.org/sites/default/files/pub-pdf/GBVIE.Minimum.Standards.Publication.FINAL_ENG_.pdf

interventions at the BYMC will have, particularly when it comes to unaccompanied and separated boys whose uncertainty is emphasised.

Therefore, community involvement can be considered as both 1) a process and 2) the impact that mental health and psychosocial support (MHPSS) programmes have in emergencies.³³

4.5. Coordinated and multi-sectorial

While operating with relatively small teams and providing different forms of protection and assistance activities, functional BYMCs have established multi-sectoral coordination. Working in the best interests of the boys and young men on the move implies cooperation with the centres for social welfare, police, health institutions, NGOs, etc. When BYMCs operate within TRCs multi-sectoral coordination is an essential part of daily and weekly activities.

To ensure successful coordination, it is crucial to have a GBV and other referral mechanisms, including the relevant SOPs, so that there is no overlap in the work of different organisations and to know at all times who is in charge of what. Staff familiarisation with these documents is critical not only for ensuring timely and successful support for a boy or young man in need but also for ensuring a safe and confidential process.

4.6. Tailored

A BYMC should appeal to all of the boys and young men alike. If it is to be equally attractive to everyone then it is necessary to consider different age groups, the different cultures from which the men and boys come, their different interests and skills and the like when organising and implementing activities. It is necessary to emphasise that this space must be accessible to people with disabilities and that it is necessary to provide appropriate activities for these people.

4.7. 'Catchy'

Significant efforts should be invested in order to attract boys and young men to visit and become involved in the BYMC. It is always good to ask yourself 'why

should they decide to visit us?' The right answer should usually be 'to meet their needs', especially their short-term needs such as to charge a mobile phone, get the right information, etc. To familiarise boys and young men with the long-term benefits of participating in BYMC activities and to enhance their sense of empowerment info-sharing activities should be performed on a daily basis. Whether door to door info-sharing or simply walking within the compound of the reception centre, the empowerment officers need to motivate the boys and young men to participate. This can also lead boys or young men to reveal violent experience and allow BYMC personnel to identify cases of GBV. It is also a good way to share attractive material such as brochures.

Presenting 'catchy' activities at the BYMCs should be done at the right moment. Although it is expected that boys and young men are informed about such activities shortly after their arrival at a TRC, it should not be applied if they are in a poor physical or emotional condition (e.g., exhausted, injured, emotionally unstable, etc.).

Innovative and attractive methods of presentation are helpful. Short documentaries, PowerPoint presentations, newspaper articles, etc. are very often used to evoke interest in and the success of these activities.

Box 17.
BYMC staff reflection

“Experience shows that some participants are shy at the beginning of the activity and avoid conversation. Probably, it is the right time for ‘ice-breaking’ activities.”



5. How to establish and run a boys and young men safe space?

5.1. Initial assessment

The first step in establishing a BYMC is to explore the needs and potential as well as the resources and limitations in terms of resilience. The obtained results should inform all decisions during the process. Yet given the complex humanitarian accommodation settings for extremely vulnerable categories, including boys and young adults, the situation can change rapidly. Therefore, these participatory assessments should be conducted regularly. That is the only way to regularly explore and examine more closely the risk factors associated with GBV.

The initial assessment should also include an assessment of other partner organisations in the field so that there is no overlap in activities and services. Such an assessment would also contribute to the establishment of referral mechanisms and SOPs.

There are no strictly prescribed standards in terms of the methods and tools for conducting the initial assessment, which mostly depends on the context and the needs in the field. It is important that the assessment is led by experts.

Some UNFPA centres in Bosnia and Herzegovina were set up before the migrants and refugees were accommodated in TRCs and in those cases GBV experts, without the possibility of including the boys and young men, carried out the assessment. In other situations, UNFPA centres were established after the population had been located and it was therefore possible to include the opinions and perspectives of the boys and men in the pre-establishment assessment.

³³ See also IOM, *Manual on Community-Based Mental Health and Psychosocial Support in Emergencies and Displacement* (IOM, Geneva 2021).

Box 18.

The characteristics of a good initial assessment:

- > **it should be participatory,**
- > **actively engage boys and young men be led by an expert,**
- > **contain interpretable results for each relevant boys and young men category,**
- > **be updated regularly.**

**5.1.1. Safety and security**

In Bosnia and Herzegovina BYMCs are located within temporary reception centres (TRCs), which are always secured by either a domestic security company or the police. In case of an emergency or if a certain vulnerable individual needs to be moved or protected the security guards or police officers on duty, in coordination with other organisations, ensure the safety of the boys and young men.

In order to better understand the safety risks for boys and young men it is necessary to consult with them. It is also necessary to better investigate their cultural patterns in order to organise the work in the safe spaces in an appropriate manner. To better understand what the potential risks are for this population it is necessary to consider the environment from which they originate. Such centres in Bosnia and Herzegovina bring together boys and young men from different countries and cultures. This fact is also crucial when it comes to safety and must be taken into consideration when establishing a safe space for boys and young men in line with child safeguard standards,³⁴ especially when it comes to emergencies.³⁵

5.1.2. Location

It is necessary when determining the location of a safe space for boys and young men to, whenever possible, take into account the opinions of the boys and young men as well as the resources of the TRCs in which the centre will be opened.

³⁴ See more in *Keeping Children Safe Coalition, Keeping children safe: How to implement the standards?* (2020).

³⁵ See more in *Keeping Children Safe Coalition, Closing Child Safeguarding Gaps in Emergencies* (2022).

Sometimes there is no need to build such rooms from scratch, because there may already be suitable rooms in the TRC that correspond to the 'safe space' concept. There have been cases in Bosnia and Herzegovina where TRCs were created from former hotels and safe spaces for boys and young men were established within those premises. It is important that these spaces have a certain physical distance that ensures privacy when performing activities. It is also necessary to provide a room for individual consultations. When determining the location, it is necessary that this room be accessible to people with disabilities. The secure room should provide at least 20 places for participants in the activities. It is essential that a BYMC is located in a place that is comfortable for boys and young men and that these premises are away from any disruptive entities.

5.1.3. Time

It is important to harmonise the working hours of the safe space for boys and young men with their daily routine and habits and this matter should also be discussed with them so that the full potential of the safe space can be fulfilled. Moreover, a person working in the position of a gender-based violence case management officer or similar position who is in charge of working with survivors of GBV must always be available and ready to go out into the field and outside of agreed working hours. In its humanitarian response in Bosnia and Herzegovina UNFPA established a 24/7 GBV response, because violence has no working hours.

Activities within a boys and young men safe space must also take into consideration all relevant factors such as sleep patterns, distribution of meals and other

obligatory events within the temporary reception centre (TRC). The time schedule of the safe space will be adjusted in order to reach as many boys and young men as possible. A good example of this time adjustment in Bosnia and Herzegovina occurred after the closure of TRC Miral in Velika Kladusa when all persons on the move were transported to TRC Lipa. Since the number of people on the move at TRC Lipa suddenly expanded it was decided that the safe space would work in two shifts. The first shift had a working schedule from 8 a.m. until 4 p.m., while the second shift had a working schedule from 2 p.m. until 10 p.m. From 2p.m. until 4 p.m. the teams of both shifts worked together and had time to exchange information and agreed on the cases that should be followed up. The work load was divided between the shifts and during that period a record breaking number of newly registered attendees was recorded at the safe space.

5.1.4. Partnership

Establishing a BYMC means complex and context specific risks. Approaches to safe spaces should be organised and managed in consultation with communities.³⁶ The operational model of the BYMC is crucial when determining the best ways to deliver the intervention. In most instances, the model will be implemented through collaboration with a regional institution, a local or international NGO or through a joint project with a United Nations agency. Collaborating with an organisation that possesses a different area of expertise is also something that can be quite useful. To improve and ensure accessibility to the centre for people with disabilities, specialised organisations working with such categories should also be engaged.

The same rules are applicable in the context of the humanitarian response to the migrant crisis in Bosnia and Herzegovina. When it comes to partnerships or relationships between UNFPA/BYMCs and other organisations there is direct contact with most organisations whose work is also implemented within the TRCs (government institutions, other United Nations agencies, international and local NGOs, etc.). Police and emergency medical centres are also part of the referral pathways and are included when necessary. Since all of the organisations

³⁶ See also UNFPA, *Woman and Girls Safe Spaces: Guidance note based on lessons learned from Syrian crises* (2014).

³⁷ ICRC, *That never happens here: Sexual and gender-based violence against men, boys and/including LGBTIQ+ persons in humanitarian settings* (2022).

³⁸ See, for example, Parsons G, *Masculinity and humanitarianism* (2019).

present in the field have different scopes of work it is important that cooperation between them is run through established referral systems as this is crucial for ensuring the provision of the necessary service for people on the move or the inhabitants of the TRCs.

In addition to the aforementioned organisations, UNFPA employees also cooperate with the Ministry of Security of Bosnia and Herzegovina, the Service for Foreigner Affairs (employees of the TRCs) as well as the competent ministries of health. Partnership with other organisations is something that is practiced on a daily basis, either through the referral systems or through oral communication.

5.2. Advocacy and partnering

The multifactorial vulnerability of women, adolescent girls and young children is usually widely accepted and well documented. Consequently, humanitarian responses have historically targeting these categories.³⁷

In social sciences adolescent boys and young men are more frequently considered as a subject (or source) of socially unacceptable behaviour than as a vulnerable category, especially in the context of victimisation. Moreover, during the armed conflicts that always lead to humanitarian crises the population of young men is considered rather as soldiers than as people (civilians) in need.³⁸

Taking into account the above-mentioned facts, it is not reasonable to expect that the needs of adolescent boys and young men will always be recognised and prioritised in a humanitarian response in which governmental institutions always play a key role. Evidence based and strong advocacy at different levels is critical for establishing and leading BYMCs. Building a partnership coalition to advocate for their establishment and their broader impact is always recommendable.

Advocacy activities in Bosnia and Herzegovina play a critical role not only in establishing BYMCs but also for their daily functioning and transformation. Without focused advocacy activities, such as the establishment of the 'green zone', (explained in sub-chapter 5.5. Adapting and transforming) this would not be possible.

5.3. Staffing: Roles and capacity development

The organisational structure of a BYMC depends on the chosen operating model (an independent centre or a part of a comprehensive response), which is always reflected in the types of activities that are to be implemented. The BYMC model applied in Bosnia and Herzegovina meant that it was appropriate to have relatively small but very agile and well-coordinated teams. The core positions in these teams, with related responsibilities, are listed below in Table 3.



Table 3.
Core structure of BYMCs in Bosnia and Herzegovina

Position	Main responsibilities and expected competencies
BYMC Coordinator	<ul style="list-style-type: none"> > Daily supervision of BYMC staff and regular evaluation of the implementation of activities, with the aim to improve BYMC services. > Support and advise the team members during the implementation of activities, not only in terms of the relevant procedures but also on the subject matter of activities. > Coordinate activities with other organisation in the TRC. > Ensure regular communication and reporting at different levels. > Conduct administration related to staff. > Attend community and management meetings.
Empowerment Officer	<ul style="list-style-type: none"> > Design and lead the implementation of different empowerment activities, including informal education, sports activities, creative workshops and language classes. > Lead the implementation of the Boys and Young Men on the Move Programme. > Conduct info-sharing and socialising outside the BYMC. > Issue GBV screening/referrals to the GBV officer and follow-up on the cases, cooperate with other organisations in the field. > Provide assistance/translation during SRH and PSS sessions and other activities. > Assist (accompany) boys and young men who are referred for an examination at a hospital (SRH related), to the police, the prosecutor's office and the like.

Position	Main responsibilities and expected competencies
GBV Case Manager	<ul style="list-style-type: none"> > Provide GBV education, support to GBV survivors and follow up on these cases. > Lead GBV case management and coordination of GBV cases and ensure the provision of health and psychosocial support for survivors. > Act as the focal point for GBV cases (24/7). > Organise case conferences, participate in the GBV working group and revise GBV referral pathways when needed. > Assists empowerment officers when needed. > Info-sharing and socialising outside the BYMC. > Cooperate with other organisations in the field.
PSS Officer	<ul style="list-style-type: none"> > Provide psychosocial support for boys and young men, focusing on GBV survivors. > Prepare group educational session on PSS and provide individual consultations. > Provide the first psychological aid in accordance with the identified needs.
BYMC Sexual and Reproductive Health Expert (Urologist)	<ul style="list-style-type: none"> > Deliver SRH prevention sessions and provide information on health topics. > Provide sessions on contraception for the young men and adolescent boys. > Visit the accommodation units of the boys and young men for the purpose of informing them about the available services and to check their health status. > Identify any potential need for individual consultations or additional support by other professionals. > Provide medical check-ups and if necessary further treatment at the health centre.

Although the BYMC and WGC were relatively closely positioned in Bosnia and Herzegovina, because of the specifics of work in both centres cooperation between staff members could have been better than it was. Consequently, some opportunities to share good practice and lessons learned and to explore the potential for joint implementation of the activities dropped. This lesson will be used to improve the future work of both centres.

Box 19.
Lesson learned
in Bosnia and Herzegovina

Although other organisations in the TRCs also provide MHPSS for all males, the identified needs and gaps of GBV survivors clearly suggested and later confirmed the justification of having a PSS officer within the core structure. At the same time, there was also one urologist in the team but the responsibilities of this position usually only required his presence one or a few times per week.

Staff working in safe spaces must primarily possess adequate knowledge and skills for working with people. Yet it is extremely important that staff working with vulnerable categories of people, such as refugees and migrants, possess

Box 20.
Reflection by a UNFPA staff member

“Even though these group psychological sessions are helpful, one drawback that they have is that there is no chance for individual consultation where an employee could speak more openly and freely. When speaking in a group people tend to hold their thoughts and more often than not keep silent on matters they may speak openly about during an individual consultation.”

other qualities such as empathy, understanding, trust, active listening, tolerance and non-discrimination. When it comes to refugees and migrants living in Bosnia and Herzegovina it is important to emphasise that these are populations that come from cultures where gender equality is at an unenviable level or even non-existent.

The gender of BYMC staff is also an essential dimension for the successful implementation of the activities. Bearing in mind the nature of the activities, male members of the team are usually preferable. However, experience from Bosnia and Herzegovina suggests the importance of the involvement of female team members. Ideally, for practical reasons, female staff members from women and girls centres (WGCs) can support relevant activities in the BYMCs. Colleagues from BYMCs could also potentially support the implementation of certain activities at WGCs (see Box 19).

Staff must be supported by their supervisors. Supervisors must devote time for staff and hold individual and group discussions so that the staff can more easily cope with the problems and difficulties they encounter at work. In addition to the support of their supervisor, it is necessary to provide other incentives for the staff. Material incentives are important, but not the most important. Education and training for staff are very important because in this way they upgrade their knowledge and this ultimately leads to an improvement in the services provided in the field.

Another important aspect in regard to staff at the safe spaces is ‘psychological supervision’. The latter is performed by a psychologist via online or live meetings. Supervision is an activity that is conducted once a month by a psychologist whose purpose is to speak to the staff (safe space and other UNFPA employees) about their work, difficulties, state of mind and general well-being.

These sessions are also divided into groups, i.e., empowerment officers, GBV case workers, etc., who have separate sessions with the psychologist engaged in this supervisory process (see Box 20). It is desirable that each employee has individual conversations with the supervisor, because practice in Bosnia and Herzegovina has shown that during group supervision employees do not feel completely free to speak honestly about their problems and difficulties at work. In this way, the mental health of the staff working in safe spaces for boys and young men is preserved. Individual supervision of UNFPA staff in this country is carried out as needed but is not mandatory. However, this type of support is necessary if the quality of work and services in safe spaces for boys and young men

is to be assured in Bosnia and Herzegovina. This type of support also prevents professional burnout of staff.

The following guidelines can prove helpful³⁹

- > **Staff and volunteers should be carefully selected and trained in the basics of GBV, communication skills, referral pathways and the ways to organise group activities. It is advisable to remember that case managers and response officers will need much more in-depth training as well as constant supervision.**
- > **It would be advisable to implement a system for engaging ‘activity specialists’ who could visit the safe space solely for their specific activity and general supervisors who stay throughout the day.**
- > **Weekly follow-up visits by experienced workers should be arranged to observe the situation and activities, help animators and community members to reflect on what is or is not working and to advise on how to strengthen activities and handle challenges.**
- > **It is critical to recognise that some workers may themselves have been affected by the emergency and that they too would benefit from group discussions.**
- > **More experienced BYMC workers should be brought in to mentor less experienced ones.**
- > **A manager should be appointed for supervision and support.**
- > **Resources such as books and training manuals that enable on-going learning should be built up.**
- > **All staff should be trained and should sign a code of conduct, including one on the Prevention of Sexual Exploitation and Abuse (PSEA).**

³⁹ UNFPA, *Women and Girls Safe Spaces: Guidance note based on lessons learned from Syrian crises* (2014).

5.4. Monitoring and evaluation

Collecting evidence during the work of the BYMCs is essential for ensuring adequate support for the boys and young men. It is also critical for the governance of the BYMCs and their sustainability, including potential adaptations. As humanitarian contexts are always unpredictable, strong and agile monitoring systems mitigate the risk of potentially harmful and wrong decisions. Together with monitoring related processes, evaluations ensure reliable evidence on the impact of the intervention.

In the BYMSs established in this country, besides regular monitoring of the activity implementation, monitoring the safety of BYMCs is also conducted regularly. A BYMC coordinator is in charge of planning and conducting monitoring field visits. Additionally, the project manager, sometimes together with relevant experts, conducts regular and ad hoc monitoring visits. Professionals at the BYMCs use different tools to ensure all of the necessary evidence and report to supervisors on a daily, weekly or monthly basis. This is, for example, a way to record the number of GBV, SRH and MHPSS interventions and adjust the intervention to meet the needs of the boys and young men.



To ensure impactful monitoring and evaluation of BYMCs, the following questions should be considered:

- Are the monitoring and evaluation plan and the relevant tools well designed?
- Is the plan explained to the relevant BYMC staff and managers?
- What are the staff capacities for delivering strong monitoring?
- Is multisource feedback captured well?
- How is the participation of the boys and young men in these processes ensured?

5.5. Adapting and transforming BYMCs

Adopting and transforming safe spaces within humanitarian actions depends on different contextual changes.⁴⁰ BYMCs, such as those in Bosnia and Herzegovina, can be transformed from the core model into more sophisticated functioning models.

A good example, that had a great impact in Bosnia and Herzegovina, is the establishment of protection sensitive accommodation or a so-called ‘green zone’ that is categorised for ‘single men’ in the TRCs. The establishment of the green zone started as an UNFPA initiative when the BYMCs recognised that a higher number of young men were in need of specific services. This is a separated accommodation unit for young men (aged 18-21), including those categorised as the most vulnerable (LGBTIQ) within TRCs that only accommodate single males. They were established with the aim to prevent cases of GBV and to provide support to the survivors of GBV in all of the forms described in the above sub-chapter (2.1.) The green zone effectively prevents other ‘protection cases’.

When unaccompanied and separated boys accommodated at a TRC for families turn 18 they lose the right to live in a family/minor centre and no longer need a legal guardian. They are then relocated to a Single Men TRC and hence potential safety issues can arise as they are no less vulnerable than they were a few days

⁴⁰ See, for example, the possible transformation of child friendly spaces in Grazia M, Cheung J and Mwebe F, *Reframing Child Friendly Spaces within a broader approach to Child Protection in Humanitarian Action*, positioning paper (World Vision 2022).

⁴¹ See UNICEF, Woman Refugee Commission, *Supporting young male refugees and migrants who are survivors or at risk of sexual violence* (2021).



before when they were still minors.⁴¹ A green zone should be located in close proximity to the BYMC in order to ensure that its residents can easily access services within the BYMC. In addition, personnel engaged at the BYMC are the same ones that provide support and monitoring for residents in the green zone (For more detail see the story ‘Green zone’ in subchapter 6.1).

Another aspect of BYMCs that should be taken into account when considering the mixed migration humanitarian response in Bosnia and Herzegovina is their transformation into independent centres outside the TRCs and within communities. Such centres can achieve a significant level of independence and become self-sustainable, namely the boys and young men themselves become involved in the running and sustaining of such a centre. The conditions that can aid the development of such centres include when the migrants and refugees currently located in Bosnia and Herzegovina decide to stay in the country and assimilate into the society.

5.6. Phase-out

Depending on the decision made regarding a BYMC, the ‘phase out’ process can be understood twofold:

- (1) Phase-out due to the closure of one BYMC in order to relocate it from one place to another or transform it into the new model.
- (2) Phase-out due to the closure of the programme in the country.

In the case of the first scenario, the most important step is to develop a plan for the ‘phase-out’ implementation. This should be done together with all relevant stakeholders (government institutions, partners, local leaders, NGOs, etc.), but also representatives of the boys and young men. It implies, among others, the need for reliable communication channels, agreed deadlines and safety and security measures. During the process, it is imperative to pay special attention to the needs of the most vulnerable categories such as GBV survivors and unaccompanied or separated boys.

There is not always that much time for the phase-out. The decision, for example, to close one TRC in Bosnia and Herzegovina means that there are about two weeks for the phase-out and at the same time the preparations to receive the boys and young men at the new one.

In the case of the closure of the programme in the country, services will be gradually reduced in such a way that allows for key services to be closed last during the phase-out process. It is most important to ensure a clear transfer of responsibility for key services provided by the BYMC (usually by preparing domestic institutions and communities to take over specific services), but also to ensure that the process is as straightforward as possible for the boys and young men on the move.

6. Stories from Bosnia and Herzegovina

6.1. Green zone

Olivier (19) described his life growing up as the only member of his family who went to school. His mother was a housewife and his three sisters and younger brother worked from a young age because their economic situation was quite difficult. The situation worsened when conflicts escalated and violent fights broke out between tribes, one of them being the tribe to which they belonged. He said that his parents sent him to Europe to seek safety, while the rest of the family stayed in their homeland.

“I dream about my mother and our family home. I even sometimes think about returning to my homeland, despite the dangerous situations there.

I often come to the UNFPA centre to talk and redirect [my] thoughts towards more positive emotions. I can openly talk about anything with the UNFPA team and openly express my emotions without worrying that anyone will make fun of me or underestimate me.”

Olivier continues to express his gratitude for being placed in the green zone, which is protection sensitive accommodation established at the initiative of the UNFPA. He says that it is a place where he feels protected, a place where he can spend time with his peers without fear that something bad will happen to him. For migrants and refugees who have spent their teenage years on the move, unable to focus on themselves, their education and their hobbies like other teenagers do, the green zone provides an additional sense of safety to them. It allows them to focus on their individual growth and seek psychological support but also attend various activities within the Boys and Young Men centre.

As a young adult, it is important for Olivier to have the chance to learn about different opportunities in life, different career choices, necessary education for different things, general knowledge about the state of the world and variety of cultures, but also vital information about one’s health, types of violence, preven-



tion and timely action in possible life threatening situations and more.

“I and many of my friends in the green zone really appreciate the work of the UNFPA team and their support is priceless for every person who perhaps went through what we went through in our lives. Feeling protected is really important but [the] feeling of being understood and respected is sometimes even more crucial.”

6.2. “Timely reaction saved my life ... and my dignity.”

Hassan enters the Boys and Young Men Centre with a big smile on his face and great confidence as he greets the UNFPA team and other migrants and refugees. He was at the Temporary Reception Centre Miral before arriving at Lipa. He says that the UNFPA doctor and team have helped him greatly.

“Six or seven months ago, when I was in Miral, the UNFPA urologist told me that I have a health issue and that I had to go to surgery.”

When a migrant or refugee is in need of such an intervention, when their health is at risk, UNFPA cooperates with other agencies from that Temporary Reception Centre to resolve the issue quickly. Due to external factors, Hassan’s surgery was delayed several times until UNFPA in collaboration with the local health centre organised a procedure for him and the surgery was done the next week.

“If I hadn’t met the UNFPA team I would probably still be in pain. I want to thank them for caring and helping me, because my health is most important. I am instructed to still be patient and not do any difficult activities, but I always find strength to visit UNFPA Centre as I like to spend my time here. Now I know how to recognise health risks and what to do to prevent certain health issues. That is the concrete knowledge you get; it can save your life.”



6.3. “Who wants will find a way, who does not want will find an excuse.”

A.A, an 18-year-old young man from Pakistan, is a person on the move who is currently staying at a temporary refugee centre (TRC) in Bosnia and Herzegovina. This exemplary young man is a regular participant in the activities of UNFPA at this TRC. He has many characteristics that distinguish him from his peers on the move, but one of the most interesting differences is that although he stays at the TRC he regularly attends online lectures at the University of Pakistan Mandi Bahwaldian Helan Al. Noor Educational Centre in Lahore.

A.A says that he always loved to study and that he started school when he was six years old. While his peers spent time hanging out he read books. When he was in the ninth grade he had individual lessons. Then, as he told us, one girl fell in love with him, but he did not pay attention to her because he was busy reading and learning. Still, he started to notice her and a year later he started to like her. According to him, he fell so much in love that he decided to marry her. He asked

his parents to ask her family to give her permission to marry him, but since they are from different castes her family did not give permission for that marriage. He said that at that time he was very sad, so his family sent him to Kashmir to spend some time. While staying in Kashmir he decided to go on a long journey, a trip to Europe. He said that along the way he met many new people and learned many life lessons. However, this young man wanted more. While staying in Greece he tried to enrol in college but for financial reasons he could not.

“When UNFPA opened the centre here I started coming to the activities. That’s when I realised that I can learn a lot from these activities and that it’s very nice when someone has knowledge and teaches other people. That motivated me to try to re-enrol in college. I talked to my teacher from Pakistan and explained the situation to him. He said he would help me. I enrolled in college and started attending online lectures. The college lasts for four years and when I graduate I will have a BA in Islamic Studies. I want to be a social work and a psychologist. I have previously attended social management education in my country.”

When asked how he manages to fulfil all his obligations to the faculty A.A. answered “During the day I have lectures that I listen to over the phone. Sometimes I don’t sleep at night so I can study or do homework. I usually get up at three or four in the morning so I can study. I make presentations and seminar papers on the phone because I don’t have a laptop or computer. Sometimes I am bothered by noise, but I am used to it. Conditions are difficult but schooling gives me motivation and hope for a better future. One day I want to write books and be a speaker. I would like to improve the education system in Pakistan, because I do not agree with the current system.”

A.A. says he is motivated by the support and trust his parents give him. He says that his family does not need his financial support and that finances are not the reason for his arrival in Europe, but rather education. The young man also says that his father is very proud of him and that he told him to dedicate himself and his education.

In the past A.A won awards for public speaking and newspaper articles. He was also given space and time at the UNFPA Centre to present the topic ‘Marriage’ to the other participants. In preparing this presentation the young man used the knowledge and skills acquired through his young life but also through his education. A.A is one of the best examples of someone who wants to achieve something. He always finds a way to achieve his goals. There is no doubt that this young man will achieve great success throughout his life, which we all wish him.

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8. Annexes

8.1. Annex 1. Harmful Traditional Practices identified among the Population in Bosnia and Herzegovina

Harmful traditional practices are not unique to a particular culture or religion. They occur in all societies, across all sexes, sexual identities and genders. However, the following five forms have been identified during the humanitarian response in Bosnia and Herzegovina.

I. Early child marriage

“Child marriage refers to any formal marriage or informal union between a child under the age of 18 and an adult or another child.⁴² Although girls are disproportionately affected by the practice, it is not exception that also boys being married as children. Namely, every sixth child marriage involves a boy.⁴³ Globally, an estimated 115 million boys and men were married as children and 23 million were married before the age of 15.”⁴⁴

II. Forced marriage

Forced marriage is a marriage in which one and/or both parties face physical or emotional and psychological pressure to marry and have not personally expressed their full and free consent to the union. Many boys and young men have experienced this harmful traditional practice and cite this as their main reason for leaving their country. This phenomenon has also increased in developed countries in the last five years.⁴⁵

III. Scarification

“Scarification is the cutting, burning, or branding of the skin to create scars in a set pattern or design. Some indigenous cultures have used scarification for centuries as a ritualistic practice. People in western practices may choose the practice as a body modification method for aesthetic or self-expression reasons. Risks of scarification include keloid scars, infection, and inconsistent results.

Regulation of scarification procedures varies from state to state, so people will need to search for reputable artists and check their hygiene and safety measures.”⁴⁶

IV. Bacha bazi

Historically present in Afghanistan, ‘*Bacha bazi*’ or ‘dancing boys’ is a slang term for a harmful traditional custom that includes the sexual abuse of boys by older men. Young adolescent men, usually those perceived as ‘handsome’, are forced to dress up like women and dance at men only parties. The boys twirl and shimmy while the men clap and laugh and enjoy the private show.⁴⁷ After the party it is customary for the adult men to choose their favourite boy with whom they want to have sex. These young boys are called ‘*Bacha Bareesh*’ or beardless boys and the practice itself is called ‘*Bacha Bazi*’. Although this practice is officially forbidden, powerful men organise hidden private events. Some of these boys are taken from their families through the promise of work, education or a better life. They serve as ‘*Bacha bazi*’ for a long time, usually until they are ready for their own family. The psychological damage caused by years of sexual abuse and social isolation makes it difficult for them to reintegrate into society.⁴⁸

⁴² UNICEF, *Child marriage* (2022).

⁴³ Ibid.

⁴⁴ UNICEF, *115 Million boys and men around the world married as children* (2019).

⁴⁵ See, for example, Dutt A, “Seeing the Unseen: Male Victims of Forced Marriages”, in the book *Men, Masculinities and Honour-Based Abuse*. (Routledge 2019). DOI: 10.4324/9780429277726-2.

⁴⁶ Medical News Today, *Everything to know about scarification* (2022).

⁴⁷ See, for example, the documentary by Jean R, *They Don't Just Dance: The Afghan tradition of recruiting young boys for sex* (2016).

⁴⁸ See more in Geopolitical Monitor, *Shame and Silence: Bacha Bazi in Afghanistan* (2020).

V. Female genital mutilation

Female genital mutilation (FGM) is a procedure that involves the partial or total removal of external female genitalia and other injury to the female genital organs for non-medical reasons. The practice has no health benefits for girls or women. It is also known as female circumcision or cutting as well as by other terms. More than 200 million girls and women alive today have undergone FGM in 30 countries in Africa, the Middle East and Asia where FGM is practiced.⁴⁹ Men of African origin speaking on this topic pointed out that it is essential that women are ‘circumcised’; otherwise, they would not marry them.

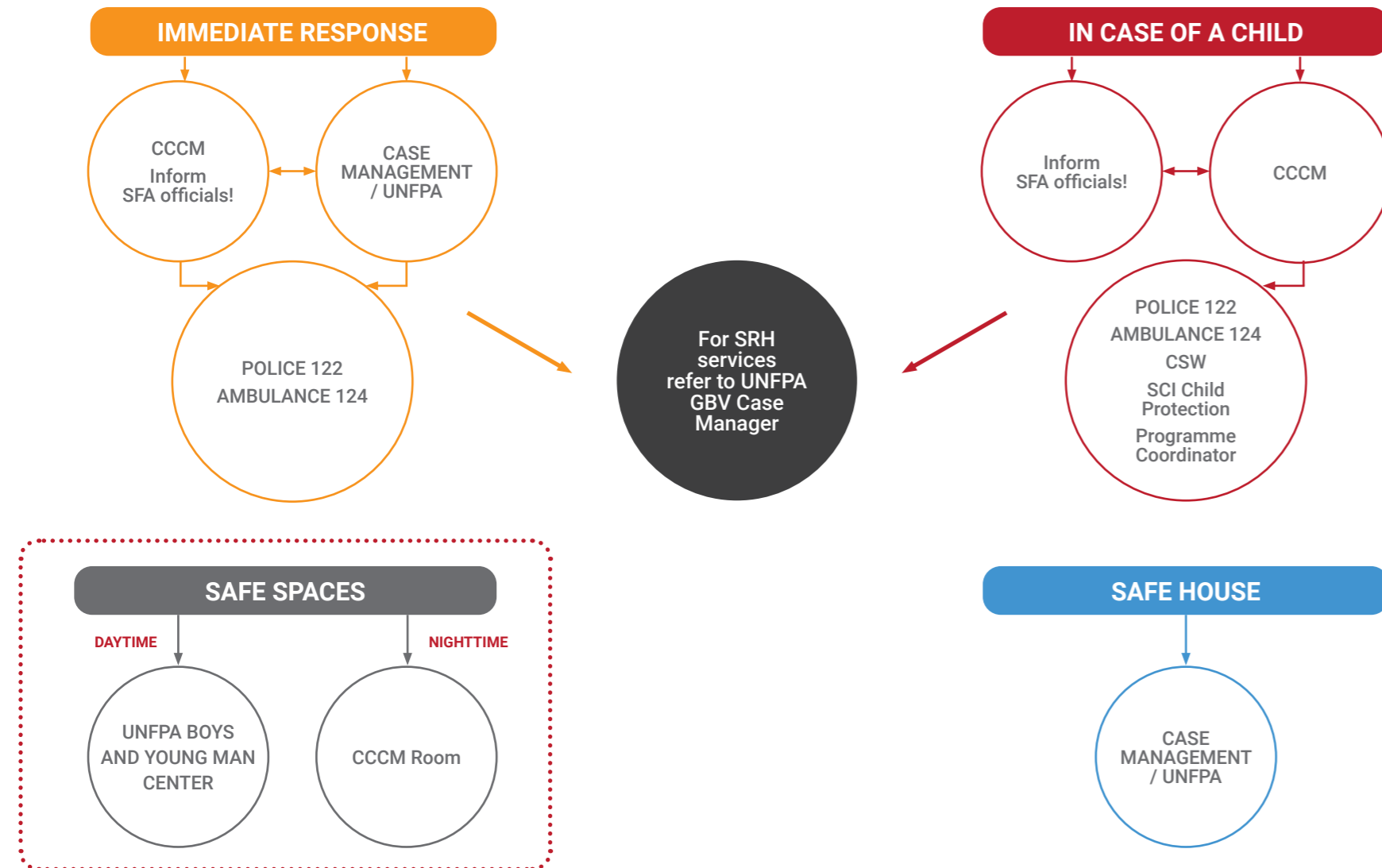


⁴⁹ UNICEF, *Female Genital Mutilation/Cutting: A global concern* (2016). Available at <https://data.unicef.org/resources/female-genital-mutilationcutting-global-concern/>.



8.2. Annex 2.

The place of BYMCs in the GBV referral pathway
(An example from TRC Blazuj)



8.3. Annex 3.

An example of a participatory assessment exercise



8.4. Annex 4.

An example of a Gender Based Violence Risk Assessment of Adolescent Boys and Young Men in TRC in Bosnia and Herzegovina - recommendations

Recommendations

- > An urgent solution is needed for adequate accommodation of adolescent boys identified in TRC Blazuj as they represent the population most exposed to the various risks of GBV.
- > Since TRC Usivak is often operating at full capacity, temporary accommodation capacities need to be increased which will be intended for adolescent boys in TRC Blazuj, enabling young boys, currently sharing sleeping premises with adult males, to be provided with suitable age-appropriate accommodation with their peers; until their relocation to TRC Usivak is made possible.
- > Increased protection and guidance facilitating integration of boys who transition into adulthood, as a specifically sensitive group, in face of relocation to adult male camps and life in different accommodation settings.
- > Access to needs-based services in TRC Blazuj with dedicated session timeslots exclusively for young boys need to be ensured, in order to avoid/minimize mixing minors and adults (whenever possible).
- > Awareness of adolescent boys and young men needs to be raised to recognize violence and know what to do if they experience violence.
- > Security measures to prevent and mitigate GBV need to be instituted; Humanitarian actors should regularly monitor potential risks of GBV vulnerabilities of the affected populations, especially, in this case, of young boys and adolescents who have been relocated to TRC Blazuj following transition to adulthood.
- > Sensitization of humanitarian personnel to GBV and how to recognize and identify child protection risks, concerns and timely reaction, need to be ensured.
- > GBV Referral mechanism in place needs to be understood by humanitarian actors and applied in appropriate manner.
- > Provision of more occupational content and activities for young men that will adequately occupy their time need to be ensured.
- > A standard set of vulnerability criteria to ensure that all actors engaging in the response identify, prioritize and respond to individuals who have heightened protection risks needs to be developed, standardized and used.
- > The use of identifiable insignia by humanitarian actors on outer clothing needs to be ensured throughout and consistently as possible in all reception facilities.

8.5. Annex 5.

An example of a Safety Audit conducted in TRC in Bosnia and Herzegovina - example of Safety Audit focus group discussion findings

Number of FGD participants (young men): 12

Age of participants: 18-23 years

Young men focus group participants regard the security situation in the reception facility as generally good; however, there are areas, which can be further improved. The key places that the participants consider high risk are primarily those outside the TRC grounds (access to the camp, crossing the railway, etc.). When it comes to TRC, FGD participants claim that during the day they feel safe throughout most of the reception facility, however, they opt not to venture into certain accommodation units (such as hangars) during the night, due to potential risk of violence, petty theft etc. During the night, they mostly feel safe in their accommodation units within the Green Zone because they are physically separated from the other adult male residents, and they are gathered closely in one place (in 5 containers located near all service providers and services). Also, the fact FGD participants do not cause any problems contributes to their sense of security and safety.

In cases of security problems or other immediate needs, most participants stated they would contact Boys and Young Men Centre's (BYMC) officers during the day. They would report the problem during the regular visits of UNFPA officers in the Green Zone, and if it were urgent then they would come to the BYMC themselves and report the problem. Some also stated that they would refer the problem to IOM, and if something happened during the night then most would go to the IOM to report the problem.

Generally, the most vulnerable groups are those who have just arrived to TRC, because they need some time to adjust, establish friendships, get acquainted with the TRC and available services. Besides, other vulnerable groups are also those who are in the numerical minority in the TRC, and these are currently residents of African origin. Minority groups automatically stand at increase of GBV by other numerically dominant national groups in TRC. The most common problems these vulnerable groups may face are petty theft. Conversely, representatives of groups that are numerically dominant in the TRC feel safer, because, as they

say, they are less likely to be attacked. Participants also explain that attempted theft can happen to all residents, usually during the night when unknown or well-known older residents come in front of their accommodation units in an effort to steal their personal belongings. It was explained to participants it should be reported to BYMC in order to provide better monitoring at night in cooperation with the IOM. They were also re-introduced to the complaint mechanism, through which they can anonymously report a specific person, if there is a need for it.

Young men focus group participants regard the security situation in the reception facility considered as generally good, however, there are areas which can be further improved. Participants stated it is necessary to increase the frequency of day and night monitoring throughout the TRC from all organizations. Focus group participants believe that additional lighting of the TRC and the installation of additional surveillance cameras would contribute to improved security. Some participants believe that the possibility of locking the containers would contribute to increased sense of safety and greater protection of their personal belongings (explained that this procedure has both positive and negative impacts).

In order to protect themselves, participating residents stated that they usually associate with other people from their countries, thus expanding their circle of friends. They observe their behaviour and avoid problematic people. When they go outside the TRC they move in groups and avoid moving alone. Participants claim to feel quite safe in the Green Zone, although sometimes older residents come in front of the zone or open the container door during the night. When it comes to the types of problems that boys or young males may face, they state that sometimes older residents put pressure on younger males not to stay in the Green Zone, but rather to stay in hangars with them.



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