Creating safety and belonging:

Lessons from women and child friendly spaces in four country offices

"I was afraid to talk to anyone, but when we play and chat together, I learned how to express myself without fear."

Child participant, Syria

Acknowledgements:

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Acronyms

CEDAW: Convention on the Elimination of All Forms of Discrimination against Women

CFS: Child-friendly spaces

CRC: Convention on the Rights of the Child

GBV: Gender based violence

IASC: Inter-Agency Standing Committee

MHPSS: Mental Health and Psychosocial Support

PSS: Psychosocial support

UN: United Nations

U**SAID:** United States Agency for International Development

WASH: Water, sanitation and hygiene

WFS: Women-friendly spaces

Context and background

In times of conflict, disaster or displacement, women and children face multiple, overlapping risks that threaten their safety, dignity and long-term development. Many children become separated from their families, witness violence, or live in prolonged uncertainty and trauma. Women, often the primary caregivers and protectors of children, experience heightened vulnerability to gender-based violence (GBV), exploitation, and economic hardship. Yet they also hold extraordinary potential as agents of protection and resilience within their families and communities[1].

Children who are uprooted from their homes face a distinct mental health burden. Their development is disrupted at a critical stage by layers of instability: the violence and deprivation they experienced before leaving, the stress and uncertainty of the migration journey, and the pressure of adapting to a new environment afterwards. These overlapping shocks stack up, increasing the likelihood of problems across their emotional, social, and physical development[2]. Women and girls are more likely to face high levels of disruption; when systems collapse, they are pulled out of school first and pushed into early or forced marriage as a negative coping mechanism. Lack of community support structures exposes women and girls to physical and sexual violence at levels that skyrocket compared to non-crisis settings. These risks compound over time, stripping them of education, autonomy, safety, and long-term opportunities, and trapping them in cycles of dependence and harm[3]. These harms intensify when factors such as disability, poverty, minority identity or caregiving responsibilities intersect, creating layers of exclusion that make such individuals far more likely to be overlooked and disproportionately affected[4].

The 1989 UN Convention on Rights of a Child (UNCRC) provides the legal and moral foundation for child-friendly spaces, affirming every child's right to protection from violence, opportunities for play and participation, and access to environments that support their recovery, dignity, and overall wellbeing[5]. At the same time, the 1979 Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), provides the rights-based foundation for women-friendly spaces (WFS), affirming women's right to equality, safety, and participation. It calls for eliminating discrimination, expanding access to education, work, and community life, and transforming social and cultural norms that perpetuate gender inequality[6].

The Inter-Agency Standing Committee (IASC) GBV guidelines[7] and Child Protection Minimum Standards[8] translate these rights into practical programming. By defining safe spaces as community-based environments that offer protection, psychosocial support, and empowerment for women and children, while ensuring confidentiality, accessibility, participation, and strong referral pathways across sectors. In addition, according to the IASC guidelines on mental health and psychosocial support in emergency settings, "good programming specifically includes the provision of relevant supports to the people at greatest risk, who need to be identified for each specific crisis". This suggests that WFS and child-friendly spaces (CFS) are essential because they provide a targeted, safe entry point to identify those at highest risk and deliver the specific protection, psychosocial support, and referrals they actually need.

Together, these frameworks and guidelines highlight that establishing WFS and CFS is not optional but essential to quality programming and that embedding these spaces within our programmes strengthens protection outcomes, builds community trust, and aligns our work with international best practice.

[1] Charlotte Brown, Nigar Kacaba, Kendra Shields, The Human Cost of Disasters: An Overview of the Last 20 Years 2000–2019 (UN Office for Disaster Risk Reduction (UNDRR) and Centre for Research on the Epidemiology of Disasters (CRED), 2019).

[2] Ruth V Reed; Mina Fazel; Lynne Jones; Catherine Panter-Brick; Alan Stein. (2012). Mental health of displaced and refugee children resettled in low-income and middle-income countries: risk and protective factors. , 379(9812), 0–265. doi:10.1016/s0140-6736(11)60050-0

[3] Lindsay Stark;Mackenzie V. Robinson;Ilana Seff;Alli Gillespie;Jonathan Colarelli;Debbie Landis;. (2021). The Effectiveness of Women and Girls Safe Spaces: A Systematic Review of Evidence to Address Violence Against Women and Girls in Humanitarian Contexts . Trauma, Violence, & Abuse, (), –. doi:10.1177/1524838021991306

[4] Islamic Relief Worldwide (2019) Leave no one behind in humanitarian programming: An approach to understanding intersectional programming. Birmingham: Islamic Relief Worldwide.

[5] What is the UN Convention on the Rights of the Child?" (UNICEF UK, accessed 29 October 2025) https://www.unicef.org.uk/what-we-do/un-convention-child-rights

[6] United Nations, "Convention on the Elimination of All Forms of Discrimination Against Women" (adopted 18 December 1979, entered into force 3 September 1981) https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-elimination-all-forms-discrimination-against-women accessed 29 October 2025

[7] Inter-Agency Standing Committee, Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing Risk, Promoting Resilience and Aiding Recovery (2015) https://interagencystandingcommittee.org/working-group/iasc-guidelines-integrating-gender-based-violence-interventions-humanitarian-action-2015 accessed 29 October 2025

[8] The Alliance for Child Protection in Humanitarian Action, Minimum Standards for Child Protection in Humanitarian Action, 2019 Edition (2019) https://alliancecpha.org/sites/default/files/technical/attachments/cpms_2019_final_en.pdf accessed 29 October 2025.

Islamic Relief's experience with women and child friendly spaces

Islamic Relief has integrated women and child friendly spaces into its humanitarian and development programming as practical expressions of our faith-based commitment to dignity, compassion, and justice. Across different country offices, these spaces serve as safe environments where women and children can access psychosocial support, learn new skills, and rebuild confidence after crisis. They reflect our belief that caring for the most vulnerable is both a moral duty and an act of worship. Moreover, this approach directly supports the Islamic Relief Worldwide Global Strategy, which prioritises protection and inclusion as cross-cutting themes and emphasises empowering families and communities to achieve sustainable wellbeing.

In October 2025 a short questionnaire was completed by 19 Islamic Relief country offices, providing a rapid snapshot of how women and child friendly spaces are currently being used across different contexts. The findings are indicative rather than comprehensive, but they highlight clear patterns in availability, scale and functionality. Seven country offices reported operating both WFS and CFS, including Syria, South Sudan, Lebanon, Bosnia and Herzegovina, Morocco, Indonesia and Jordan. Somalia also operates both types of spaces when considering the full country office[9].

Three countries operate only CFS, specifically Palestine, Albania and Mali. Due to the ongoing crises in Palestine, the nature of the CFS is varied and changing. Only one country office operates WFS alone in its main geographic area, although Somaliland's presence broadens the overall Somalia profile[10]. Eight country offices, Afghanistan, Ethiopia, Niger, Iraq, the Philippines, Yemen and Kenya, reported having no safe spaces currently operational, often due to funding constraints, restricted programming environments or shifts toward mainstreaming protection into other sectors.

Purpose

The purpose of this paper is to reflect on key lessons emerging from country experiences implementing WFS and CFS safe, structured environments designed to promote healing, participation, and empowerment. By reflecting on these experiences, the paper aims to facilitate further understanding on how such spaces can effectively respond to protection, psychosocial, and inclusion needs in both humanitarian and early recovery settings.

Methodology

The methodology for this paper was based on structured conversations with staff from the four country offices, guided by a simple questionnaire designed to extract core lessons, practical challenges, and examples of what worked and what failed in their women and child friendly space programming. These discussions provided the primary qualitative data for this paper, grounding the insights in real operational experience rather than theoretical assumptions. It offers a general reflection on the use of women and child friendly space across four country offices: Sudan, Syria, Lebanon and Pakistan. It captures lessons and challenges drawn from a limited set of experiences, rather than presenting a comprehensive evaluation. The insights shared here are intended to stimulate reflection, learning, and adaptation across programmes, recognising that each context is unique and that the design of friendly spaces must remain flexible and community driven.

[9] While the main Somalia programme currently runs two WFS, the Somaliland programme operates fewer than five mixed spaces offering child recreation, psychosocial support and awareness activities. Because Somaliland sits within the Somalia country office, these models are treated as a single combined entry.

[10] See footnote 9.

What is a women's and child friendly space?

WFS are environments established to ensure women and girls are emotionally and physically safe. It could be formal or informal space, in humanitarian or post crises contexts, where women and girls can be away from harm and harassment. They also offer chances to learn, build skills, receive support for GBV or other services, and connect with one another in ways that strengthen confidence, solidarity, and collective action in their communities[11].

A CFS is a dedicated environment created to protect children and support their wellbeing in difficult settings. It offers a secure place to play, learn, and interact, provides guidance for parents, respects local culture, welcomes every child without discrimination, and delivers psychosocial support through trained staff[12].

WFS have long been a core tool for GBV teams in emergencies, giving women and adolescent girls a place to speak about their protection concerns and say what they need[13]. Women and child friendly spaces are not single purpose initiatives. They are complex, multi layered hubs that can combine protection services, psychosocial support, skills building, legal and health referrals, case management, safe social connection, and structured programming for adolescent girls and caregivers. Different contexts demand different mixes of these functions, which is why women and child friendly spaces can look entirely different from one setting to another.[14]

Why are spaces sometimes merged?

Overlapping or combined spaces are used because running separate centres for women, girls, and children often duplicates staff, rent, and resources, while integrated spaces are cheaper and more efficient in long emergencies. Furthermore, evidence from both conflict affected and non-conflict settings shows that the mental health of children is tightly linked to the wellbeing of their caregivers. Even though research in low and middle-income countries is limited, the studies we do have make it clear that a child's psychological recovery is heavily shaped by the stress, coping capacity, and emotional stability of the adults looking after them. This interdependence strongly supports integrating or co-locating spaces for women, girls, and children, since separating services ignores one of the most influential factors in a child's mental health[15].

[11] International Rescue Committee. 2020. Women and Girls Safe Spaces Toolkit. GBV Area of Responsibility. Available at: https://gbvaor.net/sites/default/files/2020-02/IRC-WGSS-Toolkit-Eng.pdf (Accessed 19 November 2025).

[12] International Rescue Committee. 2024. Child Friendly Spaces Curriculum. Available at: https://www.rescue.org/sites/default/files/2024-08/CARE_D2.4_CFS%20Curriculum_EN_UPD.pdf (Accessed 19 November 2025).

[13] International Rescue Committee. 2020. Women and Girls Safe Spaces Toolkit. GBV Area of Responsibility. Available at: https://gbvaor.net/sites/default/files/2020-02/IRC-WGSS-Toolkit-Eng.pdf (Accessed 19 November 2025).

[14] Lindsay Stark;Mackenzie V. Robinson;Ilana Seff;Alli Gillespie;Jonathan Colarelli;Debbie Landis;. (2021). The Effectiveness of Women and Girls Safe Spaces: A Systematic Review of Evidence to Address Violence Against Women and Girls in Humanitarian Contexts . Trauma, Violence, & Abuse, (), –. doi:10.1177/1524838021991306

[15] Ruth V Reed; Mina Fazel; Lynne Jones; Catherine Panter-Brick; Alan Stein. (2012). Mental health of displaced and refugee children resettled in low-income and middle-income countries: risk and protective factors. , 379(9812), 0–265. doi:10.1016/s0140-6736(11)60050-0

Islamic Relief's experience – reflection on practice

Lebanon

In Lebanon, Islamic Relief Lebanon's project 'Endorsing Hope for a Better Tomorrow' operates as a school-based CFS in North Lebanon. It is fully embedded within public schools and designed exclusively for children, not as a combined women and child friendly space. The focus is on providing a safe, inclusive, and stimulating environment offering structured activities and psychosocial support. Children participated in recreational play, sports, expressive arts, wellbeing days, and group psychosocial activities. Informal learning was introduced through sustainable gardening supported by agricultural toolkits. Significant school rehabilitation work strengthened safety and dignity, including upgrades to playgrounds, water, sanitation and hygiene (WASH) facilities, lighting, wiring, and the provision of educational equipment. Healthy snacks were also distributed to support daily wellbeing.

Islamic Relief Lebanon separately implemented a combined women and child friendly space under 'Fostering Hope for the Future'. This centre served orphans and their caregivers, offering recreational activities, psychosocial support (PSS), awareness sessions, referrals, and essential items. Children accessed structured play, sports, music, storytelling, art therapy, emotional regulation exercises, and individual case management. Learning was supported through textbooks, stationery, and a stable safe environment.

Women and caregivers engaged in targeted sessions on GBV prevention, reproductive health, menstrual hygiene, parenting, widowhood, and stress management. They also received referrals for GBV case management, legal aid, mental health care, and emergency assistance. Dignity and stress-relief kits were distributed, and support was provided to orphan shelters through contributions to operating costs such as fuel, gas, rent, and water.

Field insights

In Lebanon, feedback from participants showed strong engagement across both groups. Children largely gravitate towards art-based, expressive and social activities that make them feel safe, happy, and included. PSS sessions that use play, drawing, and movement are particularly valued for helping them manage emotions and build self-worth. Women most appreciate counselling, support groups, and awareness sessions that give them space to speak freely, learn, and gain confidence in their roles as caregivers. Skills-building and vocational activities are highly requested, as they offer pathways toward independence and reduced economic vulnerability.

Pakistan

The WFS and CFS reviewed in Pakistan operate under Islamic Relief's Orphan Sponsorship Programme, primarily in rural Azad Kashmir and Rawalpindi. Both locations face entrenched protection risks: restricted mobility for women and girls, domestic violence, harassment, early and forced marriage, child labour, and overwhelming unmet mental health needs. Livelihood opportunities are scarce, and many households struggle with water, hygiene, and access to basic services. Children have almost no safe recreational spaces, and structured protection awareness is rare.

Within this context, the women and child friendly spaces function as rare safe, structured environments offering recreation, learning, psychosocial support, and referrals. Children participate in creative play, storytelling, sports, cultural events, arts and quizzes, career guidance, and protection sessions on safe touch and bullying. Some receive group counselling and wellbeing support, reinforced through teacher training to sustain protection learning.

Women engage in livelihood and vocational training, including tailoring, embroidery, and beautician skills – alongside awareness sessions on child rights, GBV, mental health, reproductive health, parenting, and safe technology use. They access psychosocial support, group discussions, business grants, linkages to welfare services, and support for girls' education through scholarships and transport assistance.

Across both sites, interactive and skills-based sessions are consistently valued for building confidence, reducing isolation, strengthening emotional wellbeing, and challenging harmful norms. The spaces also act as practical entry points for referrals to legal, health, GBV, social welfare, and mental health services, increasing community trust and service accessibility.

CFS in Pakistan

Sudan

In Sudan, the women and child friendly spaces operate against the backdrop of major USAID funding cuts[16] that have severely weakened protection services. Most organisations have shut down their safe spaces entirely, leaving women and children with almost no access to recreational activities, psychosocial support, counselling, or GBV and child protection awareness. Only limited, irregular activities remain, placing heavy pressure on the centres operated by Islamic Relief.

Within this constrained environment, Islamic Relief's space operating under the "Ethiopian Refugee Protection & Sexual Reproductive Health Rights Emergency Response" project in Gedaref state targets host and refugee communities in a number of refugee camps (Um Rakuba camp, Tunaydbah Camp, Doka Locality, and Elmafaza Locality). It provides one of the few remaining safe, structured hubs for women and children. Women participate in GBV awareness sessions, individual and group counselling, and informal gatherings such as coffee corners, which offer a rare chance to share experiences, receive emotional support, and strengthen their understanding of protection issues.

Children engage in recreational and educational activities including drama, drawing, sports, games, puzzles, and simple physical exercises. These sessions help maintain psychosocial wellbeing, creativity, and positive social interaction in a secure environment at a time when such opportunities have all but disappeared.

Women and child friendly space in Sudan

[16] UNRIC (2024) 'Humanitarian aid: the most vulnerable already severely impacted by budget cuts'. United Nations Regional Information Centre. Available at: https://unric.org/en/humanitarian-aid-the-most-vulnerable-already-severely-impacted-by-budget-cuts/ (Accessed: [01/12/2025]).

Syria

In Syria, there has been a consistent approach to establishing safe spaces since 2017, supported by several donors and Islamic Relief partners in Idlib and Aleppo[17]. The Protection Centre in Ariha operates as a women and child friendly space for both resident and returnee families. It provides a safe, inclusive environment where women and children access structured psychosocial, educational, and protection activities.

Women receive individual and group psychosocial support to strengthen coping skills and manage daily stress. Awareness sessions cover GBV prevention, early marriage, reproductive health, emotional wellbeing, parenting, and family cohesion, with protection messages also integrated into health sessions. Vocational and livelihood training such as sewing, hairdressing, and home-based cooking helps women build economic independence. The centre facilitates referrals to medical and social services, and one location provides GBV case management.

Children engage in recreational and PSS activities including structured play, drawing, storytelling, sports, and movement-based play, delivered both inside the centre and through mobile sessions. Group counselling builds communication, conflict resolution, confidence, and emotional regulation. Case management supports the most vulnerable children, including those affected by explosive remnants of war. Awareness sessions cover safe touch, bullying prevention, and risks related to war remnants.

Overall, the centre offers one of the few safe, structured spaces in Ariha where women and children can learn, socialise, and receive essential support.

Child participant in Syria

[17] IRW projects pin codes (HQ0202653101), (HQ0202233101) (HQ0202653101)

What we've learned: Quick lessons across all women and child friendly spaces

Lesson 1: Practical, hands-on activities keep children engaged far better than passive sessions

The clearest lesson is practical, hands-on activities like gardening outperform almost everything else in sustaining engagement. When children are digging, planting, watering, or watching something grow, they are not just participating; they are investing. These activities give them ownership, a routine they can rely on in unstable environments, and visible progress they can be proud of. That combination keeps them returning, staying focused, and building confidence in ways passive or one-off sessions never match.

Lesson 2: Community ownership is what makes a women and child friendly space more sustainable

Coordination with schools, health clinics or other community-based structures is non-negotiable. Activities ran smoothly and community trust remained high because the project was embedded within schools and worked closely with the Ministry of Education. When teachers and school teams took ownership, attendance stabilised, the space gained legitimacy, and the work did not fall apart when external teams stepped back. Sustainability came from school ownership, which also removed common barriers like weak community acceptance or inconsistent attendance. Islamic Relief Syria staff also reported that integration into existing community spaces is what makes a women and child friendly space more accessible. One participant said: "We used to feel ashamed to go to a protection centre, but when the sessions started inside the health centre, it became normal. My daughter now comes with me and joins the activities."

Lesson 3: Gaps in inclusivity and infrastructure need attention to strengthen future programming

The only challenges identified were structural gaps that limit inclusivity: improving accessibility for children with disabilities, increasing the number of trained female facilitators and PSS staff, providing childcare to enable caregivers to attend awareness sessions, and upgrading lighting, ventilation, and hygiene facilities. These were not barriers during implementation but clear areas requiring improvement to make the environment more inclusive and effective.

Lesson 4: Community acceptance and word of mouth drive participation and reduce stigma

Strong community acceptance and simple word-of-mouth referrals steadily increased participation. As more families saw the benefits, stigma around psychosocial support dropped and people became more open about discussing sensitive issues. Effective coordination and referral pathways to legal, health, MHPSS, GBV, and education services strengthened trust even further, ensuring women and children received timely and holistic support. In Syria, for example, staff reported that the presence of health centres that integrate protection services has improved access for women and children to support services without stigma, as they visit the centre for normal health reasons. This integration has made services more accepted and socially safe. Staff from Islamic Relief Lebanon reported that their women and child friendly space wrestled with low participation in the beginning because families were unfamiliar with the safe space concept and hesitant to let women and girls attend. Women and caregivers were cautious about sharing personal concerns with facilitators they did not know. These barriers eased only through patient trust-building: awareness sessions, introductory activities, flexible scheduling, and consistent staff presence.

Voices from Syria

Participants consistently describe the centre as a safe, comfortable and welcoming environment that promotes dialogue, learning and psychosocial well-being. Joint activities between women and children, including both residents and returnees, have helped strengthen mutual understanding and reduce social divides, contributing to greater community cohesion. Many women referred to the centre as a "second home," where they find emotional comfort and social support often missing from their daily lives.

One participant from Ariha said: "When I come to the centre, I feel safe. No one judges me, and everyone listens. Having sessions inside the health centre makes me more comfortable because people just see me as a regular visitor, not someone in need."

A child participant shared: "I used to get angry quickly and fight, but now I learned to talk instead of hitting. I like helping my friends."

Lesson 5: Dedicated, purpose-built spaces are essential for privacy, quality, and concurrent programming

In Pakistan, one lesson was obvious: shared or cramped rooms limit what a safe space can achieve. When women and children are forced to use the same area or rotate between sessions, privacy is compromised, discussions become superficial, and activities are rushed or interrupted. Sensitive topics such as GBV, mental health, or reproductive health cannot be addressed properly if people fear being overheard, and children's activities lose structure when the environment is noisy or overcrowded. The project showed that participation, comfort, and trust increase significantly when women and children each have designated, safe, and appropriately equipped areas. Purpose-built spaces create the physical foundation needed for consistent attendance, higher-quality programming, and deeper engagement especially for confidential counselling and adolescent-focused support.

Lesson 6: Flexibility and routine-building are essential to stabilise participation

Islamic Relief Pakistan found that participation often remained inconsistent due to pressures that came from outside the programme's control. Women's attendance was frequently disrupted by household responsibilities, restrictive family expectations, and limited mobility, while children's participation was affected by economic demands, school schedules, and lack of transport in remote areas. The inconsistent attendance patterns showed that rigid scheduling and standardised session structures are not effective in this context. Participation is only possible when activities were flexible, delivered at times that fit around domestic and school responsibilities, and reinforced through regular contact with families.

Lesson 7: Sustainable safe spaces require stable funding and adequate capacity

The experience in Sudan shows that short-term grants undermine the consistency and impact of women and child friendly spaces. When funding cycles are fragmented, centres struggle to maintain staff, cover running costs and offer predictable services. At the same time, high demand combined with limited physical capacity has led to overcrowding, reducing the quality of support and limiting privacy for sensitive activities. Sustainable financing and expanded infrastructure are essential if safe spaces are expected to function as reliable, protective environments for women and children.

Key takeaways

Across the four country offices, a set of clear and consistent patterns emerges. Safe spaces are consistently described as places of comfort, belonging and emotional relief, with both women and children emphasising how the centre helps them cope with displacement, rebuild confidence and reconnect socially. The importance of integrating protection and psychosocial support into broader community services, particularly in contexts where standalone spaces are limited was emphasised; staff rely heavily on mobile outreach and mainstreamed approaches to reach women and children safely. All countries discussed the operational fragility of these spaces: short funding cycles, unstable running costs and overcrowding weaken both service quality and the protective environment. Taken together, the experiences across these four settings show that safe spaces are valued, heavily used and often transformative, but their effectiveness is repeatedly threatened by funding instability, infrastructure constraints, and reliance on improvised or short-term delivery models.

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