



People fleeing conflict or persecution face an increased risk of becoming survivors or witnesses of sexual and gender-based violence (SGBV) before, during, and after their journey (IOM, MMC & UNHCR, 2024). This has significant negative impacts on the well-being of newcomers in the Netherlands (Pharos, 2018b).

Project **SAMEN**, carried out by the International Organization for Migration (IOM) and Médecins du Monde the Netherlands (Mdm) from September 2022 to August 2024, aims to raise awareness of SGBV among migrants and professionals in the Netherlands and to guide affected newcomers to support services.

The recommendations report outlines the lessons from two years of **SAMEN**. This infosheet summarizes the recommendations for the Dutch national government.

Visit the [project website](#) for more information on the SAMEN project.

[Click here for the full report.](#)



RECOMMENDATION 1

To better understand migrant-specific risks, research on sexual and gender-based violence in migrant communities and best practices for prevention and responding to SGBV is necessary.

Globally, awareness of the vast scale of SGBV is increasing. An estimated 63-80% of women and 25-56% of men with a refugee background experience sexual violence (Amnesty International, 2023; Busch, Hansen, Hougen, 2015). In addition to sexual violence, there are also figures on other forms of gender-based violence. In 2021, the Dutch police recorded 628 cases of honour-related violence (Janssen, 2022), with individuals of Syrian origin involved in over one-fifth of these cases (Bakker, 2023). Furthermore, nearly 41,000 women in the Netherlands have undergone female genital mutilation, and an estimated 4,200 girls are at risk over the next 20 years (Pharos, n.d.). Belgian research shows that only 39% of asylum seekers seek informal help after sexual violence, typically from a friend, and only 4% seek formal help (de Schrijver et al., 2022). Little is known about the risk newcomers face in the Netherlands. Research on the prevalence of SGBV among different groups of newcomers, and migrants' experiences with information provision and the Dutch healthcare system is needed to better understand the situation in the Netherlands.

RECOMMENDATION 2

Integrate the role of cultural mediators into the Dutch healthcare landscape to ensure (financial) recognition, service quality, and the well-being of the cultural mediators.

Cultural mediators are qualified experts who, due to their shared language and cultural background, easily connect with newcomers. Their shared background fosters trust and openness, and newcomers often turn to them with their problems. Cultural mediators therefore regularly face complex issues, such as SGBV, but might lack the necessary resources or knowledge to address the issues. Other challenges cultural mediators currently face include a lack of (financial) recognition, support, and supervision. Cultural mediators play an indispensable role in combating SGBV in migrant communities, so the **SAMEN** team recommends engaging them structurally and addressing existing challenges.

RECOMMENDATION 3

Ensure a stable environment for newcomers after arrival in the Netherlands. Frequent relocations between asylum centers during their early stay, coupled with long waiting lists for specialized care, make it challenging to access the necessary professional support. Additionally, these relocations hinder newcomers' ability to build a social support network.

Due to limited shelter capacity in the Netherlands, asylum seekers regularly move between shelters, which hampers their access to support. On average, a person moves once in the first six months, but this can increase up to four over time (CBS, 2023). Relocations make it difficult for newcomers to build relationships with both fellow residents and professionals. Newcomers struggle to establish a social network to rely on, bystanders are less likely to notice problems, and service providers cannot start or finish treatments. Some providers avoid referring clients to mental healthcare providers due to relocations, and treatments cannot always be completed with the same provider, which can be harmful for survivors of SGBV. Stability is therefore essential to improving the well-being of newcomers.

RECOMMENDATION 4

Streamline the information provision to migrants, healthcare providers and service providers and provide them with a clear course of action. There is a widespread need for information: organizations working with newcomers require guidance on making referrals, healthcare providers seek more knowledge about the target group and culturally sensitive practices, and newcomers are looking for information to help them navigate life in the Netherlands.

There is a widespread need for information and guidance. Depending on the organization, professionals may express a need for knowledge about referral options, procedures, or cultural sensitivity. A single informational session is often insufficient to provide them with an actionable framework and the confidence to take action. Finally, newcomers seek structural information to navigate the Dutch system.

SAMEN's cultural mediators unanimously receive questions from migrants who have experienced SGBV about where to find help and what the steps look like after having sought help. It is crucial to repeatedly provide this information at different stages of integration and to streamline the general flow of information.

