

Inter-Agency Standing Committee Gender Standby Capacity Project (GenCap) & Gender-Based Violence Area of Responsibility (GBV AoR)

Note on Collaboration: Approaches to Gender Equality, June 2022

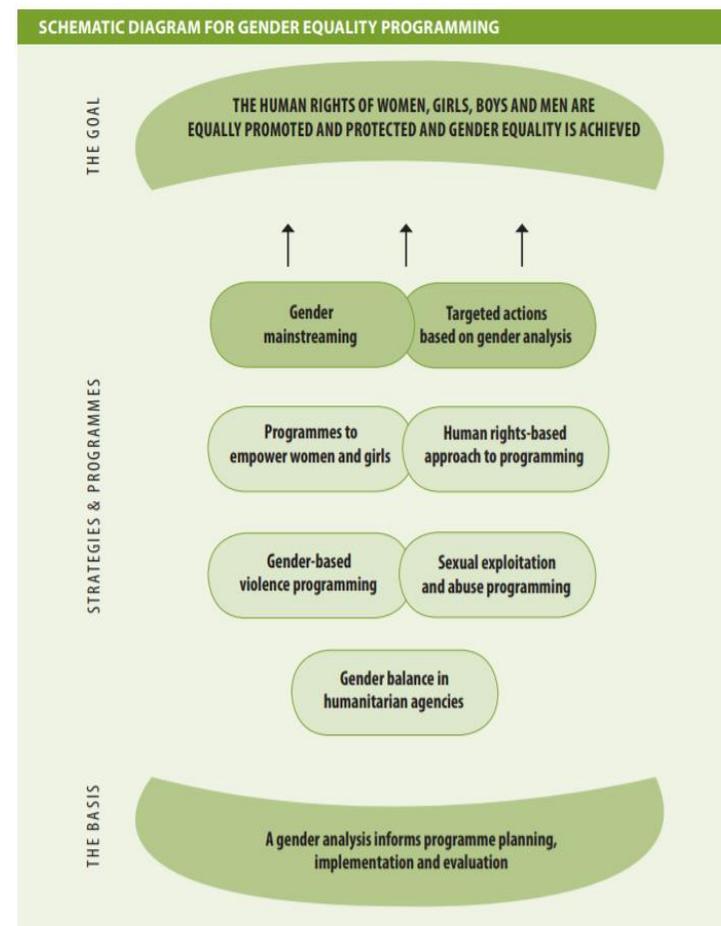
A multidisciplinary approach to gender equality

All humanitarian actors have a responsibility to mainstream gender equality throughout humanitarian response. The 2016 Inter-Agency Standing Committee (IASC) Gender Handbook for Humanitarian Action highlights such shared responsibility as central to humanitarian action to protect and provide assistance to those affected by emergencies. The Handbook also sheds light on a multidisciplinary approach to achieve gender equality, which involves not only programmes specific to women and girls, but also requires gender-based violence (GBV) programming, protection from sexual exploitation and abuse (PSEA) interventions and human rights-based considerations (see the diagram on the right).¹ Achieving gender equality further cuts across the areas of centrality of protection, accountability to affected populations (AAP), inclusion and the humanitarian-development-peace nexus, among others.

Humanitarian Coordinators (HCs) are expected to provide leadership on gender and GBV in line with the IASC Policy on Gender Equality and the Empowerment of Women and Girls in Humanitarian Action, the IASC Policy on Protection in Humanitarian Action and the IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action.² In support of the HCs, all sectors and clusters, individual agencies and a set of diverse inter-agency tools are providing strategic and technical support and guidance to ensure better coordination and integration of gender perspectives into humanitarian action.

About the guidance note

While gender equality intersects with various system-wide priorities and actors, as seen above, this guidance note focuses on the complementarities specifically between the IASC GenCap Senior Gender Advisers and the GBV Area of Responsibility (AoR) Regional Advisers and Field GBV Coordinators with a view to guide these actors towards collaborative approaches that will foster common accountability to gender equality and GBV prevention, risk mitigation and response at the operational level. The guidance note has been developed through collaboration between GenCap management, UNFPA Headquarters and the GBV AoR.



¹ See the [IASC Gender Handbook for Humanitarian Action](#) (2006).

² See the [IASC Policy on Gender Equality and the Empowerment of Women and Girls in Humanitarian Action](#) (2017), the [IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action](#) (2015), and the [IASC Policy on Protection in Humanitarian Action](#) (2016).

About GenCap and the GBV AoR

The **IASC GenCap project is an inter-agency initiative that** seeks to strengthen capacity and leadership to deliver on commitments to gender equality and the empowerment of women and girls in humanitarian action, envisioning a world in which humanitarian action prioritizes gender equality and women's empowerment.

Through its work, GenCap builds and transfers capacities on undertaking intersectional gender analysis and planning and helps tailor assistance, monitoring and participation. Specifically, the project focuses on mainstreaming gender equality in humanitarian programming, supporting humanitarian operations towards the overall goal of being able to exercise equitable access and gender equality for different gender groups in their diversities.

GenCap works across the leadership, programmes and localization pillars. A key tool is the gender equality programming in emergencies (GEPiE) road map. In collaboration with field leadership, GenCap senior gender advisers establish baselines, help identify collective priorities, plan response activities and their leads, and define expected outcomes. GenCap matches different experts with evolving needs of the country operation along the implementation and monitoring process.

GenCap further contributes to strengthening coherence and impact of gender equality in the IASC Scale-Up emergencies; facilitating gender needs assessments and analysis and integrating them into programming and advocacy; linking gender equality with traversal issues; linking civil society with the humanitarian country teams (HCTs); developing gender capacity of local actors and cluster focal points; facilitating in-country application of the IASC Gender with Age Marker and relevant IASC policies; and establishing and revitalizing gender equality coordination working groups, among others.

The **GBV AoR** is the global-level forum for coordination and collaboration on GBV prevention and response under the IASC cluster system. It is mandated to ensure the availability and accessibility of quality comprehensive services for GBV survivors and preventing and mitigating the risks of GBV. This involves advancing risk mitigation in humanitarian contexts, setting standards, leading global advocacy efforts and providing technical guidance on GBV. The GBV AoR is part of the Global Protection Cluster, with UNFPA as its lead agency. It performs an advisory role vis-à-vis field-level GBV sub-clusters (or working groups).

The GBV AoR and field-level GBV sub-clusters work to strengthen system-wide preparedness and technical capacity to respond to humanitarian crises, bringing together non-governmental agencies (NGOs), United Nations agencies, line ministries, local actors, academics and others under the shared objective of ensuring multisectoral, lifesaving, predictable, accountable and effective action on GBV prevention, risk mitigation and response in emergencies, including natural disaster, pandemic and conflict-related humanitarian contexts.

UNFPA, the GBV AoR and the Norwegian Refugee Council (NRC) have forged a strategic partnership to deploy regionally based teams of inter-agency technical experts, or Regional Emergency GBV Advisor (REGA) teams, which include GBV sub-cluster information management specialists. The REGA teams represent the GBV AoR and are based in UNFPA offices in support of national GBV coordination mechanisms and their members for rapid response, strengthening technical capacity and advocacy on GBV.



Complementarity through different focus and approaches

Gender inequalities are root causes of GBV. GBV is a manifestation of gender inequality. While GenCap and the GBV AoR/ GBV sub-clusters have different focus and approaches, they operate in complementarity to each other.

The **IASC GenCap** project acknowledges that gender is a lever for inequality across a spectrum of sexual orientation, gender identity and expression of sexual characteristics not limited to only females and males. The project strives for the articulation of distinct needs of different gender population groups in concert with the range of knowable factors of diversity that compound inequalities and exclusion, including age, disability and ethnicity. Once the distinct needs are known, the project works with actors to tailor responses and participation strategies, as well as monitoring changes that take into account the inequalities and power dynamics.

GenCap builds and transfers capacities to exercise GEPiE competence across different levels of humanitarian response:

- **Leadership:** Support to unify humanitarian actors through the use of an HCT GEPiE strategy, structure strategic discussions and decisions based on gender analysis, convene and advice based on gender expertise, and coordinate resourcing for GEPiE strategies.
- **Inter-Cluster Coordination Group (ICCG):** Support for the ICCG and all clusters to coordinate the use of GEPiE practices throughout the humanitarian programme cycle (HPC), inform the HCT and other key stakeholders of GEPiE data and analysis, and use gendered assessments to mobilize minimum gender commitments and gender-responsive indicators as well as collaboration on intersectoral issues.
- **GEPiE coordination mechanisms:** Support to the ICCGs, clusters and HCTs to apply GEPiE throughout the HPC, promotion of GEPiE tools and skills, and continuously develop contextual intersectional gender analysis linking with transversal and nexus areas.
- **Localization:** Support to the HCTs, clusters and GEPiE working groups to work towards localization by engaging with local actors (government, local NGOs, civil society, gender-progressive civil society organizations and nexus actors) to adopt and/or learn from local GEPiE practices and engage them in GEPiE work.
- **AAP:** Support for clusters and/or the AAP working group to build the influence of different gender groups in their diversities on the management of the response (including needs assessment, design, delivery and review) and their empowerment related to resources and opportunities.

The **GBV AoR** works on the basis that gender equality is an operational principle, as articulated in the [GBV AoR Strategy \(2021-2025\)](#), recognising that gender inequality is a root cause for GBV. This means that working on gender equality is at the heart of its approach to addressing GBV, including preventive actions. Furthermore, GBV services are guided by a survivor-centred approach that creates a supportive environment in which survivors' rights and wishes are respected and aims to acknowledge the survivor's agency and autonomy.

GBV sub-clusters work across different levels of humanitarian response:

- **Ensuring the availability of quality services:** Apply standard operating procedures for the provision of survivor-centred service (including documenting the provision of service where feasible and appropriate); coordinate mental health and psychosocial services and medical, legal, security, legal/justice and livelihood support; and provide GBV prevention and community engagement programming.
- **Mitigating the risks of GBV:** Integrate GBV risk mitigation across clusters and support a strong, diverse and inclusive GBV community* that continues to innovate and work in partnership across the humanitarian-development-peace nexus. While the main emphasis lies in facilitating a multisectoral response and preventive action, GBV sub-clusters also support other sectors with risk mitigation and GBV integration.
- **Leadership and coordination:** Ensure strategic advice to leadership, facilitate HCT decision-making on issues such as the centrality of GBV** and the prioritization of lifesaving response, and ensure GBV integration into relevant HCT gender and protection strategies.
- **Localization:** Promote sustained and dedicated efforts towards localization, building upon and amplifying local and national capacities for GBV prevention and response through women-led organizations, line ministries, non-governmental organizations, service providers and community-based organizations.

* GBV must take into account the diverse and intersecting forms of structural oppression, discrimination, privileges and inequality that people experience in a given context. Intersecting inequalities that affect those at risk of experiencing GBV include but are not limited to age, race, ethnicity, class, sexual orientation and gender identity, civil status, disability and religious affiliation. This will vary from context to context and change within a given setting over time.

** The centrality of protection includes ensuring that leadership, coordination, and engagement in protection of all sectors are more strategic, aligned and directed toward a stronger response. While protection of the rights of people is primarily the duty of member states, in conflict, the parties to a conflict, HCs and HCTs are responsible for ensuring that protection is the purpose and intended outcome of humanitarian response. This responsibility cannot be delegated solely to the Protection Cluster or taken up by a single agency. It is therefore the expectation that all humanitarian actors contribute to the centrality of protection (including GBV) as outlined in the [IASC Policy on Protection in Humanitarian Action](#) (2016). The [GBV Accountability Framework](#) (2019) also lays out the roles of each humanitarian actor with regard to prioritization of GBV.

Country-level collaboration between GenCap and GBV AoR

Deployed inter-agency GenCap senior gender advisers work alongside the GBV sub-cluster coordinators in ways that acknowledge their distinct disciplines and convergence around seeking to reduce gender inequalities. GEPIE through GenCap mobilizes actors around needs, capacities, roles and participation. GBV coordinators work to prevent, mitigate and respond to violence based on gender. Interactions at country level are many and varied, and may take the following forms, for example:

- GBV sub-cluster coordinators and GenCap Senior Gender Advisers work together to address gender inequality, with the understanding that GenCap does not coordinate the GBV sub-cluster.
- GenCap senior gender advisers advocate for sufficient resources to undertake gender equality work, which may include but not rely solely on targeted GBV work.
- GenCap works with the HCT and the ICCG to articulate and respond to GEPIE issues. GBV coordinators (directly or via the UNFPA Representative) will influence the HCT to prioritise lifesaving response and accountability to risk mitigation.
- At instances where responsibilities related to GEPIE and GBV issues are unclear, GenCap senior gender advisers and the GBV sub-cluster coordinators work together to clarify the different disciplines so that the HCT and the ICCG address both GEPIE and GBV accountabilities.
- Where feasible, GenCap senior gender advisers and GBV sub-cluster coordinators arrange joint training sessions for common understanding of the root causes of gender inequalities, the different approaches of the disciplines, implications, and areas for further collaboration.

Within the broad structural area of GEPIE work, clusters are encouraged to promote and apply the following gender equality measures to coordination of both strategic and operational programming:

- Promote and apply gender analysis that takes into account the diverse and intersecting forms of structural oppression, discrimination, privileges and inequality that people experience in a given context. Intersecting inequalities include, but are not limited to, age, race, ethnicity, class, sexual orientation and gender identity, civil status, disability and religious affiliation. This will vary from context to context and change within a given setting over time.
- Use data that takes into account sex, age and other diversities to assess needs and barriers to inclusion as well as to monitor access to assistance and changes to gendered issues.
- Tailor assistance to different gender groups in their diversities according to the gender analysis.
- Provide assistance that is intended to benefit all gender groups in their diversities and monitoring whether the benefits were achieved.
- Empower different gender groups in their diversities to meaningfully influence the management of projects throughout the HPC.
- Integrate measures to prevent, mitigate and/or respond to GBV.³
- Communicate with communities in multiple ways so that different gender groups in their diversities receive information and are engaged in discussions.
- Promote safe and accessible feedback (including complaints) mechanisms for accountable programming⁴
- Assess rates of satisfaction of different gender groups in their diversities with the assistance
- Identify problems with accessing the project and/or assistance.

³ While the accountability for GBV risk mitigation lies with sector-lead agencies, the GBV sub-cluster holds the technical expertise to support clusters and sectors with GBV risk mitigation, prevention and integrated programming. Contextualized guidance on how to integrate GBV measures is provided by the GBV AoR and the Protection Cluster.

⁴ The feedback mechanisms may be integrated across the response through multi-sectoral hotlines, for example, as well as part of individual project programme design, depending on the context and the project. These interventions are distinct from PSEA community-based complaint mechanisms that may be put in place by a PSEA Task Force.