General GBV risk mitigation messages and recommendations

Gaza response October 2023

GENERAL

- Consultations with ALL affected groups, particularly women and girls in all of their diversity, remains critical even in emergency response. Do not rely only on information received from male community leaders. This <u>tip sheet</u> provides basic information on undertaking safe consultations with women & girls in emergency contexts.
 - There is likely to be a significant number of unaccompanied minors arriving in the shelters which will have different/diverse needs from adults and different from each other based on gender, age range, etc.
 - Women-headed households are also likely to be large in number and will also likely have different needs, barriers, challenges, etc. than intact family structures, as will persons living with disabilities. Ensure all such groups are represented in consultations and program planning.
 - Some suggested key areas of inquiry for consultations are included below.
 Sector-specific areas of inquiry are available in the IASC GBV Guidelines (see specific links below).
- Be aware of differential access to information/information gatekeepers: develop multiple, diverse informational channels to ensure information is reaching all of those in need, not just those who have direct access to it, mobile phones, etc.
 - Age, education, literacy levels, lack of access to safe digital spaces, and lack of access to public spaces mean that women are not always getting the information they need, can understand, or can action upon in terms of what is available to them, where to go, and what to expect. This is especially true for younger women and girls as well as the elderly.
 - In some cases, women may not have access to a private mobile phone but may be sharing with other family members; particularly in terms of protection and GBV-related messaging this could inadvertently increase risk.
 - Lack of ability to charge mobile phones has increased reliance on radio; this should be kept in mind in terms of information-sharing methodologies
 - Prioritize outreach efforts to women and girls, as well as other at-risk subpopulations (female-headed households, the elderly, persons with disabilities, etc...), who might not be able to access services safely in the manner most appropriate to their needs.
- Ensure that all frontline responders have at least basic information on safe & appropriate response to GBV disclosures, whether though for example the GBV Pocket



Guide (<u>Arabic</u> and <u>English</u>) or its mobile app (available in Arabic and English by searching " عليل الجيب" or "GBV Pocket Guide" on the Apple or Google Play stores) or the GBV Constant Companion from the Shelter cluster (<u>Arabic</u> and <u>English</u>)

• Sexual exploitation and abuse: Without money, assets, or power, women and girls are at risk of exploitation and abuse. This is seen in all contexts, but particularly in situations where women and girls are not able to provide for themselves or their families in the early days of a crisis. Other increased risks include trafficking and early or forced marriage. Ensure all necessary PSEA systems including focal points, CBCMs, etc. are in place and operational from the beginning of the response. Ensure all staff responding to the crisis have signed Codes of Conduct and are aware of what constitutes SEA, how to report, etc.

SECTOR-SPECIFIC

WASH

- Ensure basic **safety standards** for WASH facilities are met at minimum, that WASH facilities **lock from the inside** and have **appropriate lighting**.
- Given a current inability to easily add additional WASH facilities to communal shelters to support gender segregation, safety, privacy and dignity, consider developing timebound shifts by gender for use of WASH facilities, particularly for bathing.
 - Be prepared with messaging and plans for what to do in case men refuse to abide timing restrictions and/or barriers to use arise related to socioeconomic/class divisions, etc.
- Develop **sanitation committees** including members of all genders and those with disabilities, both to support safe and equitable use and to maintain cleanliness, etc.
- Mass crowds gathering and rushing to collect an insufficient amount of basic items at
 distribution locations increase women and girls' exposure to physical or sexual assault,
 leading them to forego necessary items in order to protect their physical safety. Ensure
 safe management of drinking water distributions (i.e.: queue management and safety,
 equitable access, etc.)
- Consider MHM needs including with regard to composition and distribution of dignity kits as well as private and dignified disposal (linked to NFI sector)

Shelter/NFI

- There are always heightened risks to women and girls related to staying in overcrowded, mixed-gender shelters. Given the current inability to develop safer shelter solutions, aim to at least meet privacy needs, even when shelter security cannot be guaranteed. For example, consider distributing sheets, tarps or similar at the family level to support at least basic privacy.
- There will be specific shelter concerns related to WHHs, UAMs (and implications by UAM age grouping as well)



Distribute essential materials (dignity kits, solar lights, stoves/fuel, clothes, etc...) and
cash, if appropriate, in a safe manner. Where possible and safe to do so, consider
women-only distributions and/or institute crowd control measures to avoid
overcrowding and violence at distribution points.

Cash

- As cash assistance will likely factor heavily into the response, be aware of the risks that
 may inhibit women and girls from being able to safely access and use this assistance.
 The GBV risk mitigation in CVA matrix (<u>Arabic</u> and <u>English</u>) is a simple tool to
 understand what these risks look like, including those related to access and use of cash
 as well as those associated with using cash as a component of GBV response.
- Risks that are identified via use of the matrix should be addressed across CVA interventions including targeting criteria, modality, etc.

Food assistance

- As under WASH and Shelter/NFI above, ensure that food distributions are safe and
 accessible to all, including women and girls, WHHs, persons with disabilities, etc. This
 includes queue management, women-only distributions where safe and feasible,
 considering size/weight of ration packages, timing and locations of distributions, etc.
- Pay attention to WHO is eating, especially at the beginning when tensions will be high and food distributions still insufficient. For example, are men & boys eating first? Are women & girls able to access and eat the food being distributed, in similar quantities to the men & boys?

SUGGESTED KEY AREAS OF INQUIRY (GENERAL – for sector-specific areas of inquiry see the IASC GBV Guidelines sector specific Thematic Area Guides linked below)

- What risks/vulnerabilities did women and girls in Gaza face prior to the current crisis? How has this changed since the emergency?
- How are women and girls currently meeting or accessing their basic needs? What risks, barriers, and/or other challenges do they face in doing so? How can [SECTOR] work to reduce those risks/barriers?
- What facilities/services (SRH, safe spaces, etc...) did women and girls access prior to the current crisis? How can current barriers to access these services be reduced?
- What are the support systems or social supports that women and girls had before the Current crisis? Where are they turning to now to receive support and how can those support structures be bolstered further by the current response?

KEY RESOURCES

IASC GBV Guidelines: Arabic English

• WASH: <u>Arabic English</u>



Shelter: <u>Arabic English</u>
 Food: <u>Arabic English</u>
 Protection: <u>Arabic English</u>
 Health: <u>Arabic English</u>

AAAQ Framework for understanding GBV risks, barriers, etc.

GBV Risk Mitigation in Cash and Voucher Assistance

<u>CVA risk analysis matrix/Arabic</u>
 GBV Pocket Guide: <u>Arabic English</u>

PSEA Tools

Psychological First Aid: Guide for field workers

