

Responding to Typhoon Haiyan: women and girls left behind

A POLICY BRIEF

November 2015

About the study

At the time Typhoon Haiyan struck the Philippines in November 2013, the primary guidance for preventing and responding to gender-based violence (GBV) in emergencies was the 2005 Inter-Agency Standing Committee's *Guidelines for Gender-based Violence Interventions in Humanitarian Settings (2005 IASC GBV Guidelines)*.¹ This study used the *2005 IASC GBV Guidelines* as a tool to understand how the humanitarian sector met the needs of women and girls in the Philippines; specifically looking at how prevention and mitigation of violence against women and girls (VAWG) were carried out in the early phase of the emergency response and investigating the effectiveness of deploying GBV experts² to assist VAWG mainstreaming³ in the humanitarian response.

Data collection was led by the International Rescue Committee (IRC) with the Global Women's Institute (GWI) between October 2014 and February 2015. A document review was carried out along with semi-structured interviews with GBV experts and local and international humanitarian responders, including local women's groups.

This research feeds in to a growing body of evidence that provides further lessons on the challenges of addressing VAWG in emergencies. Findings are consistent with evaluations carried out in other emergencies, including a 2015 multi-agency *Evaluation of the Implementation of 2005 IASC Guidelines for Gender-Based Violence Interventions in Humanitarian Settings in the Syria Crisis Response*.



This policy brief provides an overview of the key findings and specific recommendations for different stakeholders in implementing and ensuring accountability to the new *Guidelines for Integrating Gender-based Violence Interventions in Humanitarian Action: Reducing Risk, Promoting Resilience and Aiding Recovery (2015 IASC GBV Guidelines)*.⁴

In the last few years an extensive revision of the *2005 IASC GBV Guidelines* has been conducted, resulting in the new *2015 IASC GBV Guidelines*, published in September 2015. The *2015 IASC GBV Guidelines* provide a real opportunity to ensure that non-GBV specialists and communities plan, implement, coordinate, and monitor actions to prevent and mitigate VAWG in settings affected by armed conflict and natural disasters.

The full report can be found on www.whatworks.co.za

The **2005 IASC GBV Guidelines** were the primary guidance for preventing, mitigating, and responding to GBV at the time of Typhoon Haiyan. They provided guidelines to “enable humanitarian actors and communities to plan, establish and coordinate a set of minimum multisectoral interventions to prevent and respond to sexual violence during the early phase of an emergency”¹

The **2005 IASC GBV Guidelines** included action sheets for minimum standards on prevention of and response to GBV.

The **2015 IASC GBV Guidelines** are designed for use by national and international humanitarian actors operating in settings affected by armed conflict and natural disasters to “coordinate, plan, implement, and monitor and evaluate essential actions for prevention and mitigation of GBV across all sectors of humanitarian response”⁴ They are mainly for humanitarian actors who do not have extensive experience in GBV programming. These guidelines recognise the need for GBV experts to assist non-GBV specialists in undertaking VAWG prevention and mitigation activities (and in some sectors, response services for survivors).

The **2015 IASC GBV Guidelines** include essential actions for programming and ensuring implementation of the guidelines.



ABOUT THE WHAT WORKS TO PREVENT VIOLENCE AGAINST WOMEN AND GIRLS IN CONFLICT AND HUMANITARIAN CRISES PROGRAMME

What Works to Prevent Violence Against Women and Girls is a flagship programme set up by the UK Department for International Development (DfID) investing an unprecedented £25 million, over five years, to the prevention of violence against women and girls (VAWG). It supports primary prevention efforts across Africa, Asia, and the Middle East that seek to understand and address the underlying causes of violence, to stop it from occurring. *What Works* consists of three complementary components.

Component 2 – *What Works to Prevent Violence Against Women and Girls in Conflict and Humanitarian Crises* – aims to produce rigorous research and evidence on the prevalence, forms, trends, and drivers of violence against women, girls, men, and boys, as well as effective prevention and response to VAWG, in conflict and humanitarian settings.⁵

Key findings from the research

- ▶ **The specific needs of women and girls and their risks to GBV were not consistently taken into account across the humanitarian response to Typhoon Haiyan. VAWG prevention and mitigation activities were considered to be a secondary concern – rather than considered a life-saving priority for women, girls and communities.**

Initial assessments provided decision-makers with data on which to base strategic decisions for a response plan, but these initial quantitative assessments did not report or collect sex-disaggregated data or VAWG information such as risk factors and response needs. Largely due to the advocacy of deployed GBV experts, later assessments did include more information on VAWG and some positive actions were taken, including specific sectoral initiatives to understand women and girls' needs and reduce VAWG risks. However, such efforts remained ad-hoc and were limited in their ability to influence the wider humanitarian response.

Contrary to the standards outlined in the *2005 IASC GBV Guidelines*, throughout all stages of the response, consultation with women and girls was insufficient and local women's groups were largely left out. Interview respondents felt that national staff and local women's organisations were undermined by the surge of international staff – many of whom did not have the specific skills and training on VAWG that local responders did. Local civil society had the knowledge and skills to address VAWG but they were often excluded.

“In the rush to respond, the GBV mainstreaming considerations across clusters were not prioritised.”

UN AGENCY



- ▶ **Understanding and interpretation of the 2005 IASC GBV Guidelines varied, resulting in inconsistent application and monitoring. Key barriers to implementation of the 2005 IASC GBV Guidelines included:**

- ▶▶ **lack of awareness and training**
- ▶▶ **lack of accountability**
- ▶▶ **perceived lack of funding**

There was limited awareness of the *2005 IASC GBV Guidelines*, especially from internationally-deployed surge staff. Respondents in national or local organisations had received more training on the guidelines before the typhoon struck than international staff but felt that their ability to act on this was undermined by the surge of less informed international responders. Monitoring frameworks did not consistently include mechanisms for monitoring adherence to the guidelines or for measuring effectiveness in relation to VAWG prevention or response.

“Because the first [assessment] failed to reflect needs of women and girls, it was a lost opportunity. The second one picked it up, but it was a bit too late [. . .] and many donors were strapped [for cash].”

GBV EXPERT

However there were some examples of good practice – particularly from the Water, Sanitation & Hygiene (WASH), Nutrition, and Camp Coordination & Camp Management (CCCM) clusters. Their investments made at the global level to provide sector-specific guidance on VAWG had a positive impact on their response to Typhoon Haiyan.

From a wide range of respondents there was a perception of a lack of prioritisation of VAWG in funding. The absence of initial assessments of women and girls' needs resulted in a lack of funding towards the implementation of the guidelines.

“[VAWG] issues were missed by other organisations because they weren't specifically asking local groups [. . .] there had been rapes and kidnappings that were not discovered by any INGOs until we did focus group discussions.”

FOOD SECURITY AND AGRICULTURE CLUSTER

► **GBV experts strengthened the response but were unable to sufficiently influence the wider humanitarian response overall.**

A majority of respondents agreed that the presence of GBV experts strengthened the VAWG response in the aftermath of Typhoon Haiyan. However, whilst GBV experts played a key role in facilitating adherence to the guidelines, they were too often marginalised from key decision-making. Frequently GBV experts had to rely on personal contacts and networks to advance the VAWG agenda.

“[GBV experts] helped give protection to women and children. They worked with INGOs on advocacy and awareness raising programmes on VAWG in evacuation centres on why they were concerned with protecting women and children and why it was important to the police.”

LOCAL WOMEN'S GROUP

Recommendations for further inquiry

Key findings from this study highlight some of the challenges to implementation of and accountability to the *2005 IASC GBV Guidelines*. To ensure that the *2015 IASC GBV Guidelines* do not face the same challenges, further research is needed to fully understand the process of implementation of the revised *2015 IASC GBV Guidelines*.

Initial suggestions for further research include:

- Real-time evaluations on the effectiveness of the *2015 IASC GBV Guidelines* in future emergencies, focusing on the extent to which the 'essential actions' are taken up and implemented by non-GBV specialists in emergency settings.
- More in-depth exploration of the barriers to implementation of the *2015 IASC GBV Guidelines* across all sectors of the humanitarian response.



- 1 Inter-Agency Standing Committee. *Guidelines for gender-based violence interventions in humanitarian settings: focusing on prevention of and response to sexual violence in emergencies*. Geneva: Inter-Agency Standing Committee, 2005.
- 2 For the purposes of this study, "GBV experts" are defined as UN GBV staff such as the GBV Area of Responsibility (GBV AoR) staff or roster members providing surge capacity specifically on GBV in emergencies.
- 3 VAWG mainstreaming is the integration of VAWG prevention and mitigation into all humanitarian sectors.
- 4 Inter-Agency Standing Committee. *Guidelines for Integrating Gender-based Violence Interventions in Humanitarian Action: Reducing Risk, Promoting Resilience and Aiding Recovery*. Geneva: Inter-Agency Standing Committee, 2015. See also: www.gbvguidelines.org
- 5 The project Consortium is led by the International Rescue Committee (IRC) in collaboration with CARE International UK (CIUK) and the Global Women's Institute (GWI) at the George Washington University (GWU). The Consortium is strengthened by working with its partners, The London School of Hygiene and Tropical Medicine (LSHTM), The Africa Population and Health Research Center (APHRC), and Forcier Consulting.

All photographs by Tyler Jump/IRC.



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Recommendations for action

Despite the increased global policy and media attention to VAWG in emergencies, there continue to be challenges in implementing good practice guidelines to prevent and mitigate VAWG. The existing lack of accountability to the *2005 IASC GBV Guidelines* being implemented underpins many of the challenges to preventing and mitigating GBV seen in the response to Typhoon Haiyan. Unless addressed, these issues may continue to hamper the implementation of the revised *2015 IASC GBV Guidelines*. Therefore initial recommendations focus on understanding, implementation of, and accountability to the revised *2015 IASC GBV Guidelines* across the humanitarian system.

The Gender-Based Violence Area of Responsibility (GBV AoR), the global level forum for coordinating prevention and response to GBV in humanitarian and other crisis settings, has developed an implementation strategy for the revised *2015 IASC GBV Guidelines*. As part of this strategy, a dedicated multi-agency Global Reference Group and a technical Implementation Support Team have been established. Together they have the responsibility to lead and support implementation of the guidelines over the long term. Funding for these groups is perhaps the single most important recommendation, as they will be key in providing sustained leadership for the implementation and uptake of the *2015 IASC GBV Guidelines*.

FOR ALL (INCLUDING NATIONAL AND LOCAL GOVERNMENT OF DISASTER AND CONFLICT AFFECTED COUNTRIES)

- ▶ Include discussion on the *2015 IASC GBV Guidelines* in inter-agency and governmental emergency preparedness policies, practices, and meetings.
- ▶ Require the prioritisation of VAWG prevention and response considerations in all preparedness planning. All local, national, and international emergency responders should be well versed in the 'essential actions' in the *2015 IASC GBV Guidelines* before they are deployed.
- ▶ Monitor adherence to the *2015 IASC GBV Guidelines* and clearly state that all staff responding to emergencies will be held to account for implementing the guidelines.
- ▶ Advocate for regular inclusion of data assessing the degree to which relevant programming is in line with the *2015 IASC GBV Guidelines* as part of monitoring and reporting.
- ▶ Support GBV specialists, such as GBV coordination mechanisms and local GBV expertise, to initially take the lead and provide practical expertise to support mainstreaming.

FOR DONORS

- ▶ Fund the Global Reference Group and the Implementation Support Team to sustain the implementation of the *2015 IASC GBV Guidelines*.
- ▶ Ensure uptake of the *2015 IASC GBV Guidelines* across humanitarian sectors. Require and monitor implementing partners' adherence to the *2015 IASC GBV Guidelines* in field programmes by integrating indicators into monitoring and evaluation (M&E) plans.

- ▶ Use the *2015 IASC GBV Guidelines* to inform assessments and funding – including ensuring GBV is prioritised in emergency common funding pools and agency funding proposal guidance.
- ▶ Ensure GBV experts advise on all emergency funding committees and/or decision-making bodies.

FOR NGOs/CSOs

- ▶ Institutionalise the *2015 IASC GBV Guidelines* recommendations internally, for example within humanitarian strategies, policies, programming and monitoring both at HQ and in-country.
- ▶ Train all emergency responders (across all sectors) on the *2015 IASC GBV Guidelines*.

FOR UN AGENCIES

- ▶ Ensure integration of the *2015 IASC GBV Guidelines* throughout emergency preparedness and responses assessments and plans – in particular the Multi-Cluster/ Sector Initial Rapid Assessments (MIRAs), Strategic Response Plans (SRPs), and other Humanitarian Program Cycle (HPC) products and national plans.
- ▶ Humanitarian coordinators should monitor implementation of the *2015 IASC GBV Guidelines* using the recommended indicators in humanitarian country plans and cluster activities.

FOR THE GLOBAL REFERENCE GROUP IMPLEMENTING THE GUIDELINES

- ▶ Advocate for the inclusion of GBV in all common assessments to ensure that the recommendations made in the *2015 IASC GBV Guidelines* are taken into consideration. In particular, work with the IASC Needs Assessment Task Force (NATF) to discuss priorities for conducting MIRAs that capture VAWG issues.
- ▶ Ensure that there are context-specific examples and case studies in the roll out of the *2015 IASC GBV Guidelines*, particularly for natural disasters.
- ▶ Disseminate the *2015 IASC GBV Guidelines* through multiple channels and in different, accessible formats – for example through hard copies, phone apps, internet, USB keys, and CD-ROMs.
- ▶ Identify high level global champions within the humanitarian system to support integration of GBV into emergency response.

The full report can be found on www.whatworks.co.za

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