

Gender in Humanitarian Action **Brief No.1**

Rohingya Refugee Crisis Response Cox's Bazar, Bangladesh (as of 22 March 2018)



Developed by the Inter-Sector Gender in Humanitarian Action Working Group under the Inter-Sector Coordination Group in Cox's Bazar, Bangladesh, Co-Chaired by UN Women and UNHCR with technical support from inter-agency GENCAP.

Key Commitments on Gender Equality and the Empowerment of Women and Girls in Humanitarian Action in Joint Response Plan March - December 2018

- 1. Ensure all assessments both collect, analyse and use data disaggregated by gender, age and diversity, as well as consult equally with women, girls and marginalized groups.
- Ensure all sectors mainstream gender aspects into overall response including by applying the ISCG gender profile, ISCG sector gender tip-sheets, IASC Gender Marker/IASC Gender and Age Marker and other IASC GiHA guidance.
- Ensure the leadership and meaningful equal representation of women and marginalised groups, as well as CSOs representing these population groups, in the overall response.
- Ensure gender balance and adequate numbers of trained female staff in the overall response and ensure they are provided with necessary safety and security measures.
- Ensure that all humanitarian staff complete the IASC Gender in Humanitarian Action e-training "Different Needs: Equal Opportunities".

Sectors	Gender Equality Actions
Site Management	Improve access to services, protection and basic living conditions for refugees and adjacent host communities, including advocacy for minimum standards and a safe, dignified living environment for all refugees. Ensure coordination of services and advocacy for distribution of resources and service provision in a fair, transparent, and accountable manner, along with the Communicating with Communities Working Group and accountability mechanisms.
Education	Improve gender mainstreaming and targeted interventions to ensure that adolescent girls are not excluded from education assistance in both refugee and host communities. This includes creating a safe environment, ensuring separate spaces for adolescent girls, recruiting female teachers, linking to cash-based interventions, supporting Menstrual Hygiene Management interventions such as gender-segregated latrines. Ensure that girls and young women can participate in the learning process as learners and social mobilisers through targeted approaches that will require partners to reach targets as part of the conditionalities for engagement.
Health	Ensure access for all women in need to the Minimum Initial Service Package (MISP) for reproductive health in crisis situations, and promote facility-based deliveries and increased antenatal care coverage. Allow unrestricted access to free sexual and reproductive health services by scaling up services and ensuring community outreach to all women in need through the implementation of the MISP for reproductive health in crisis situations.
Food Security	Combine resilience support with social empowerement that focuses primarily on women from the poorest households and the most vulnerable host communities. Resilience programmes within the camp that promote socio-economic empowerment and social cohesion especially for the most marginalized groups. Programs will also offer female/child-headed households and single mothers, in both refugees and host communities support including:vocational trainings; communal kitchens;

microgardening; skills strengthening on nutrition, food utilization, as well as storage, fuel and fire management;

and multipurpose women centres such as breastfeeding corners and childcare spaces.

The use of volunteers, porters, water points, breastfeeding corners and gender-sensitive crowd control for distribution points need to be constantly monitored and improved where needed.

Increased access to food will reduce adoption of potentially harmful coping strategies such as early and forced marriage and other form of exploitation.

Strong monitoring system to document the impact of food assistance and inform targeting of the least vulnerable. Monitoring will consider protection risks to identify the most appropriate approach and modality (including cash/voucher) to prevent gender-based violence (GBV) and other forms of violence.



Implement a prioritisation criteria that takes into account gender, age as well as disability and targets the most vulnerable groups such as children under five, pregnant and lactating women, and others.

Help provide infant and young child feeding in emergencies (IYCF-E) counselling with psychosocial support in women- and girl-friendly spaces.



Support community participation structures through an age, gender and diversity approach. Strengthen community watch groups and leadership committees to improve community safety and security.

Expand quality services, with a focus on individual case management and psychosocial care for persons at heightened risk, in particular women, girls and children at risk of GBV, trafficking, exploitation and abuse. Rapid expansion of quality, multi-sector GBV services, with a focus on case management and psychosocial care services by providers trained to work with child and adult survivors. Girls and boys with high protection risks of violence, abuse, exploitation, child labor, trafficking and early marriage will be identified and provided with specialized case management services.

Undertake GBV capacity development initiatives targeting government, non-government, and humanitarian workers across the health, justice, and safety/security sectors to apply survivor-centered approaches. **Advance integration of GBV response and prevention programming in other sector service points** to improve accessibility to discrete, life-saving response services and information and maximize limited availability of space in refugee settlement areas.

Strengthen GBV prevention through sensitization and awareness-raising on GBV and life-saving information on available services. **Identify and strengthen service entry points for GBV referral** that are accessible to host and refugee communities.



Extend, maintain and upgrade WASH assistance as per National and SPHERE guidelines for quantity and quality, including regarding age, gender and diversity, in all settlements and in the most vulnerable communities; providing an enabling environment to adopt safe health-seeking practices which will reduce the public health and protection risks. Outreach messaging will be provided to promote and improve behavior change as well as tracking of disease indicators.

Improve access to essential hygiene items including hygiene-related materials for women and girls of reproductive age.



Shelter support will consider specific needs, based on gender, age and disabilities. All items will be appropriate for the needs of women, men, girls, and boys, ensuring that the specific and increased needs of the most vulnerable (elderly, children, persons with disabilities, child-headed households, the sick or malnourished, pregnant and lactating women, and others) are met.



Logistics

Collect and share data and information in support of humanitarian operations to ensure transparency and decision making. Address gaps in humanitarian supply chain.



Establish a common feedback mechanism to enhance accountability to affected populations. The Working Group strategy is to ensure a two-way communication process between the humanitarian response team and the affected people through a consistent, coordinated and evidence-based approach to empower women and men, boys and girls, including marginalized and disabled people, to get information they need and provide feedback on their own priorities and concerns about humanitarian action.