

# Minimum Standards for Prevention & Response to Gender Based Violence in Emergencies

## -- Orientation --

*Together we must ensure that action to prevent and respond to gender-based violence is a priority— a systematic and unquestionable part of our humanitarian response, at the heart of UNFPA’s work to improve the health, safety, and well-being of women and girls in emergencies.” -Babatunde Osotimehin, UNFPA Executive Director*

# Overview

1. What is GBV in emergencies? Why is addressing GBV an urgent priority?
2. What is UNFPA's role?
3. What is the purpose of the Standards? Who are they intended for?
4. How were the Standards developed & how do they relate to existing guidelines?
5. How can the Standards be used and applied? What tools are available to support roll-out?



# What is Gender Based Violence?

“Any harmful act that is perpetrated against a person’s will and that is based on socially ascribed (i.e. gender) differences between males and females.

Includes acts that inflict physical, sexual or mental harm or suffering, threats of such acts, coercion, and other deprivations of liberty.”

*IASC GBV Guidelines (2015)*



## What is UNFPA's role?

“Together we must ensure that action to prevent and respond to gender-based violence is a priority— **a systematic and unquestionable** part of our humanitarian response, at the heart of UNFPA's work to improve the health, safety, and well-being of women and girls in emergencies.”

*Babatunde Osotimehin, UNFPA Executive Director*

# What is UNFPA's role in addressing GBV?

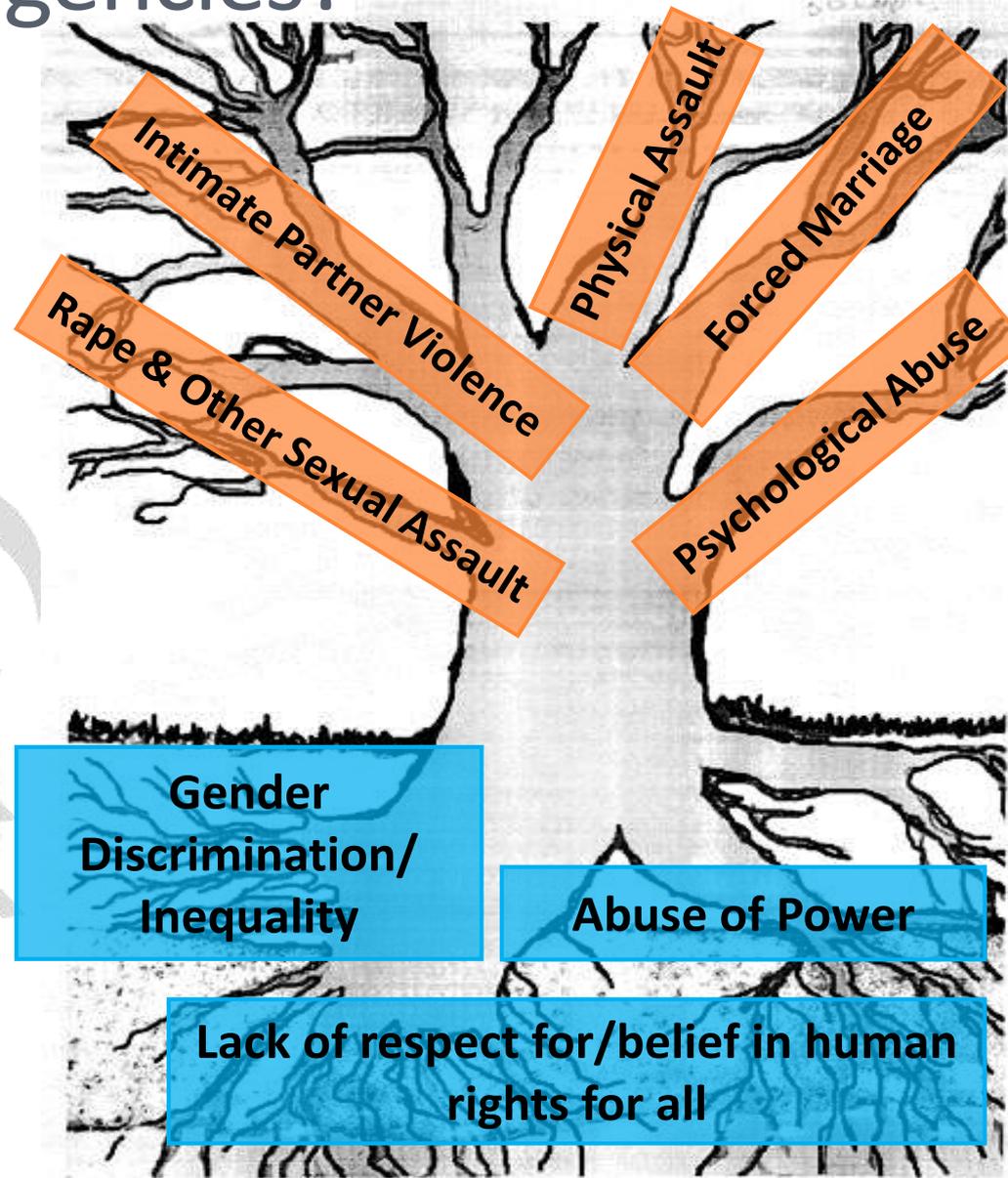
Lead  
coordination  
of GBV in  
Emergencies

Address GBV  
in all  
humanitarian  
actions

Enhance GBV  
capacity in  
emergencies

# What is GBV in Emergencies?

- Breakdown in community/family support systems and family separation
- Changes in social norms/social structures
- Broken down or non-existent institutions such as health systems, police or justice
- Vulnerabilities of certain high-risk groups of people
- Physical environment: site layout, local environment





## Why is addressing GBV an urgent priority?

- GBV is a life-threatening, global health and human rights issue
- GBV violates international law & principles of gender equality
- UN Member states have called for urgent action
- Protection must be central to *all* humanitarian response



## Evidence of GBV is not required for Action

“All humanitarian personnel have the responsibility to assume GBV is taking place, to treat it as a serious and life-threatening protection issue, and to take action described in to minimize GBV risk through their sectoral interventions, regardless of the presence or absence of concrete “evidence”.

*IASC GBV Guidelines (2015)*

# What can you say when asked for evidence/data before setting up services?



- GBV is happening everywhere. It is under-reported worldwide both in humanitarian and non-humanitarian settings.
- All humanitarian personnel ought to assume GBV is occurring and threatening affected populations.
- With challenges in obtaining data, the *priority* is to establish prevention and response as soon as possible.

## What is the purpose of the Minimum Standards?

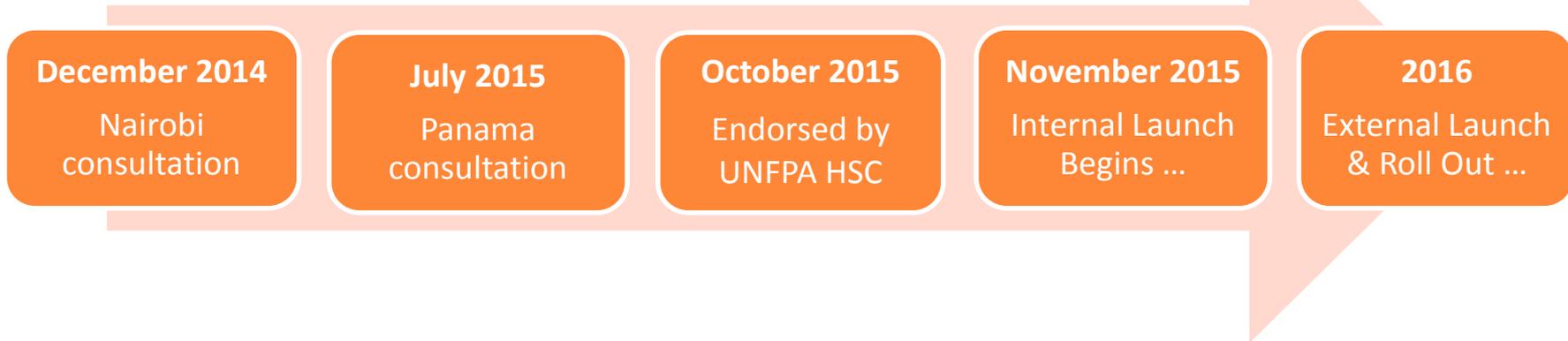
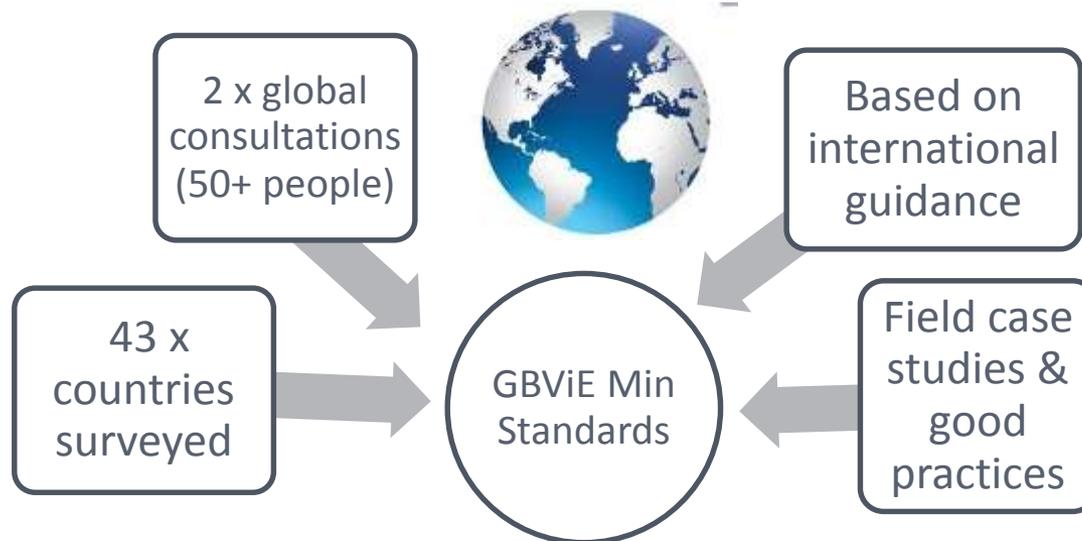


To promote safety of women & girls

To provide clear guidance and tools to prevent & respond to GBV in emergencies

To increase accountability – to make addressing GBV in emergencies *unquestionable*

# How were the Minimum Standards developed?



# How do the MS relate to existing guidelines & policies?

## The Standards:

- ✓ Integrate key inter-agency standards & guidelines
- ✓ Align with UNFPA policies (also part of PPM)
- ✓ Fill a niche



# How do the MS relate to the Guidelines for Integrating GBV into Humanitarian Interventions (2015)?



## The Minimum Standards:

- ✓ focus on programming and coordination of GBV prevention and response (also address mainstreaming (Standard 12) and may be used for advocacy across sectors) in emergencies.

## The GBV Guidelines:

- ✓ contain guidance for all humanitarian staff to mainstream interventions across sectors.
- ✓ primarily for non-GBV specialists



# How do the Minimum Standards relate to the Essential Services Package?



The *Essential Services Package for Women and Girls Subject to Violence*:

- ✓ aims to improve the quality of/access to essential services for women and girls who have experienced violence in the areas of health, police/justice, social services and coordination & governance (development context).

The *Minimum Standards*:

- ✓ are distinct from the Essential Services as they focus on improving access to quality services in *humanitarian contexts*.





Who are the Standards intended for?

The Minimum Standards are primarily for:

- ✓ UNFPA Staff & partners

But are also a useful resource for:

- ✓ National authorities

- ✓ other UN agencies

- ✓ International, local & community organizations

- ✓ Implementing partners

To inform development of inter-agency Standards

# Principles and Approaches underpinning the 18 Minimum Standards for Prevention and Response to Gender-Based Violence in Emergencies

## Survivor-Centered

*Safety, confidentiality, respect, non-discrimination*

## Community-Based

*Affected populations engaged as partners in response*

## Rights-Based

*Analysis in accordance with principles of human rights law*

## Humanitarian Principles

*Humanity, impartiality, independence, neutrality*

## Do No Harm

*Avoid exposing people to further harm*

# What is a Minimum Standard?

We define a **Minimum Standard** as:

- An action that is universal and applicable in *ALL* humanitarian contexts
- What UNFPA and partners need to achieve to prevent and respond to GBV and deliver multi-sector services to survivors in humanitarian settings

# What are the GBViE Minimum Standards?

## Minimum Standards for Prevention & Response to GBV in Emergencies

<u>Foundational Standards</u>	<u>Prevention &amp; Response Standards</u>	<u>Operational Standards</u>
1. Participation	5. Proving Healthcare	13. Preparedness & Assessment
2. National Systems	6. Mental Health & Psychosocial Support	14. Coordination
3. Positive Social & Gender Norms	7. Safety & Security	15. Advocacy & Communication
4. Data Collection & Use	8. Justice & Legal Aid	16. Monitoring & Evaluation
	9. Dignity Kits	17. Human Resources
	10. Socio-economic Empowerment	18. Resource Mobilisation
	11. Referral Systems	
	12. Mainstreaming	



## Structure of each section:

- Standard
  - Universal and cross-applicable; what UNFPA and partners can achieve to prevent GBV and deliver multi-sector services to survivors in humanitarian settings
- Key Actions
  - Core activities to achieve each Standard. May not always apply to all settings or all phases of an emergency.
- Indicators
  - Sample indicators (not meant for all situations). Users are expected to adapt the sample indicators to their particular situation, as appropriate.
- Guidance Notes
  - The 34 Guidance Notes contain good practices, practical suggestions and tips on priority issues & on overcoming common programming challenges.
- Tools
  - Additional guidance /resources to help fulfill the standard

# Key actions: Core activities to achieve each Minimum Standard



While the Standard applies in all emergencies, the key actions may not apply to all emergencies (or all phases).

While some actions are specific to one stage, many actions can be carried out at all stages.

KEY ACTIONS	HEALTHCARE		
	Preparedness	Response	Recovery
Ensure women and adolescent girls have immediate access to priority reproductive health services as outlined in the MISF at the onset of an emergency. <sup>55</sup>		X	
Ensure GBV survivors have access to high-quality, life-saving health care, including post-rape treatment. <sup>57</sup>		X	X
Involve women, adolescent girls and other at-risk groups in the design and delivery of GBV and health programming. <sup>58</sup>	X	X	X
Develop and/or standardize protocols and policies for GBV-related health programming, in partnership with Ministry of Health as feasible, to ensure integrated, quality care for survivors.	X	X	X
Enhance the capacity of health providers, including midwives and nurses, to deliver quality care to survivors through training, support and supervision, <sup>59</sup> including on GBV prevention and response and CMR.	X	X	X
Ensure health actors are integrated into SOPs and included in the referral pathway.		X	X
Ensure information sharing and coordination between health and GBV working groups, including identifying joint actions to provide quality health services to GBV survivors.		X	X
Ensure that a GBV focal point is represented in health sector meetings and activities and also that a health sector focal point participates in GBV meetings as appropriate.		X	X
Train partners in the MISF, with a focus on CMR and survivor referrals. <sup>60</sup>	X	X	X
Train service providers to provide services and support that are appropriate to the survivor's age and development.	X	X	X
Train service providers to understand and identify male survivors of GBV and to provide services that are responsive to the specific needs of men and boys.	X	X	X
Distribute reproductive health kits, including post-rape treatment supplies and other clinical commodities to viable health centres, mobile clinics and health actors.	X	X	
After the immediate onset and during transition phases, re-establish comprehensive reproductive health services, including GBV treatment and referral systems.		X	X

HEALTHCARE  
RESPONSE STANDARDS

## Foundational Standards

- 1. Participation:** Communities, including women and girls, are engaged as active partners to end GBV and promote survivors' access to services
- 2. National Systems:** Actions to prevent, mitigate and respond to GBV in emergencies, strengthen national systems and build local capacities
- 3. Positive Gender & Social Norms:** Emergency preparedness, prevention and response programming promotes positive social and gender norms to address GBV
- 4. Collecting & Using Data:** Quality, disaggregated, gender-sensitive data on the nature and scope of GBV and on the availability and accessibility of services informs programming, policy and advocacy

## Prevention, Mitigation & Response Standards

5. **Providing Health Care:** GBV survivors, including women, girls, boys and men, access quality, life-saving healthcare services with an emphasis on clinical management of rape
6. **Mental Health & Psychosocial Support:** GBV survivors access quality mental health and psychosocial support focused on healing, empowerment and recovery
7. **Safety & Security:** Safety and security measures are in place to prevent and mitigate GBV and protect survivors
8. **Justice & Legal Aid:** The legal and justice sectors protect survivors' rights and support their access to justice, consistent with international standards

## Prevention, Mitigation & Response Standards

9. **Dignity Kits:** Culturally relevant dignity kits are distributed to affected populations to reduce vulnerability and connect women and girls to information and support services
10. **Socio-Economic Empowerment:** Women and adolescent girls access livelihood support to mitigate the risk of GBV, and survivors access socio-economic support as part of a multi-sector response
11. **Referral Systems:** Referral systems are established to connect women, girls and other at-risk groups to appropriate multi-sector GBV prevention and response services in a timely and safe manner
12. **Mainstreaming:** GBV risk mitigation and support are integrated across humanitarian sectors at every stage of the programme cycle

## Operational & Coordination Standards

- 13. Preparedness & Assessment:** Potential GBV risks and vulnerable groups are identified through quality, gender-sensitive assessments and risk mitigation measures are put in place before the onset of an emergency
- 14. Coordination:** Coordination results in effective action to mitigate and prevent GBV and promote survivors' access to multi-sector services
- 15. Advocacy & Communication:** Coordinated advocacy and communication lead to increased funding and changes in policies and practices that mitigate the risk of GBV, promote resilience of women and girls and encourage a protective environment for all

## Operational & Coordination Standards

- 16. Monitoring & Evaluation:** Objective information, collected ethically and safely, is used to improve the quality and accountability of GBV programmes
- 17. Human Resources:** Qualified, competent, skilled staff are rapidly recruited and deployed to design, coordinate and/or implement programmes to prevent and respond to GBV in emergencies
- 18. Resource Mobilization:** Dedicated financial resources are mobilized in a timely manner to prevent, mitigate and respond to GBV in emergencies

## How can the GBViE MS be used and applied?

To guide GBV humanitarian prevention and response strategies

To ensure that GBV prevention & response is prioritized in emergencies

To establish common and measurable expectations

To guide GBV program interventions

To induct and train new staff and partners

As a tool for GBV coordination & advocacy

## What tools are available to support roll-out?

The MS Roll-out package includes:

- Multiple language versions of Standards in print & web-format (English, French, Arabic, Spanish, Russian)
- Introduction Presentation (PowerPoint)
- Training materials & integration tools
- FAQs, Poster, Brochures etc.

Available at: [www.unfpa.org/GBViEStandards](http://www.unfpa.org/GBViEStandards)