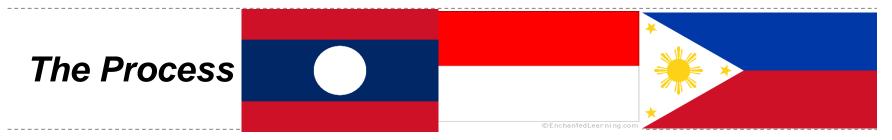
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Gender-based Violence prevention and response during natural disasters

Research Results and Recommendations Philippines Indonesia Lao PDR



- Raising awareness within the National Society on SGBV awareness and response during disasters
- Formation of intersectoral steering committee with different departments
- Recruitment of data collection team
- 8 day training of data collection team, including the core concepts, ethical, survivor centred mobile data collection, practicing administration of household surveys and FGDs
- Fieldwork planning and data collection
- Lessons learned and psycho-social debrief workshop

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Philippines – The Context

- Based on 2013 Typhoon Haiyan Response (RED, large scale)
- Groups of concern during this time included single women, adolescent girls and female heads of household.
- Global Protection Cluster (GBV sub-group): sexual violence, sexual exploitation and abuse and trafficking as areas of increased risk after the typhoon. An increase for sexual violence existed due to reports of inadequate lighting in temporary housing and lack of private bathing facilities.
- Increased risk for sexual exploitation and abuse, noting the increase in international and national humanitarian actors on the ground and involvement of both international and local military personnel.

Two of the most disaster affected provinces chosen: Aklan and Leyte

Philippines – Who participated

Household Survey

Respondent Characteristics	
Male	403
Female	402
Average age	42
Primary occupations	Housewife, Farmers, Retail trade, Fisheries
Average household size	5
Religion	Roman Catholic
Other	Majority are married or in a relationship Majority left their home during the disaster and had to stay in temporary housing

Philippines – Who participated

Focus Group Discussions

	Men	Women	Boys	Girls	Total
Total	22	30	25	29	106

Philippines – Who participated

Key Informant Interviews

Sector	Number of KII interviews
Health	4
Psycho-social support	7
Community leaders	6
Police Personnel	7
Legal Aid	4
Religious Institutions	2
Government agency staff	12
International NGO staff	5
National NGO staff	1

Philippines – Select Research Results Household Survey

Out of the 528 individuals who lived in temporary housing after Typhoon Haiyan. 60 per cent said that they were living with too many people and **54 per cent said that there were no separate toilets for men and women. 44 per cent also stated that there were not enough lights in their shelter and 34 per cent expressed there were no safe spaces for women and children.**

N = number of respondents	Early marriage	Domestic Violence	Sexual harassment	Trafficking	Respondents hearing someone had been raped after the disaster	Respondents hearing someone had sustained injuries from domestic violence after the disaster
Philippines (n=805)	30%	9%	Less than 5%	5%	6%	15%

Philippines – Select Research Results Household Survey



Women are disproportionately affected, however men are affected too.



To prevent SGBV, **adolescent girls shared**, it is important to instate a curfew, put up street lights, conduct a seminar on teenage pregnancy, ensure that they barangay security patrol is active and that there are livelihood interventions for women and girls. They also discussed how adolescent boys express themselves differently and that they would benefit from a support group.



Adolescent boys in both Leyte and Aklan were adamant during their recommendations that seminars for parents should be conducted to prevent abuse and violence in families. Also, activities which address SGBV that occurs to girls and boys in school should be organised. Students and community members need to know what should be learned about SGBV prevention and response. Schools also need to take steps to address perpetrators who are teachers or school staff. NGOs should organise seminars on SGBV awareness.

Philippines – Select Research Results Key Informant Interviews

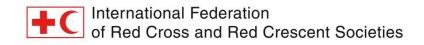
- The lack of separate spaces for men and women, separate toilets and bad lighting in evacuation centres and other types of temporary housing as increasing risks to SGBV during disasters.
- The need for child protection committee, SGBV prevention awareness in schools and better knowledge on case handling with adolescent girls and boys as each community mentioned child sexual abuse cases.
- The need to better understand and incorporate preparedness, response and recovery for lesbian women, gay men, transgender, queer and intersex individuals, also referred to as "sexual and gender minorities."
- The need to train and build stronger referral pathways at the barangay level and to ensure that the VAWC desks are permanently there, rather than being changed during every barangay election cycle.

Philippines – Recommendations Philippines Red Cross

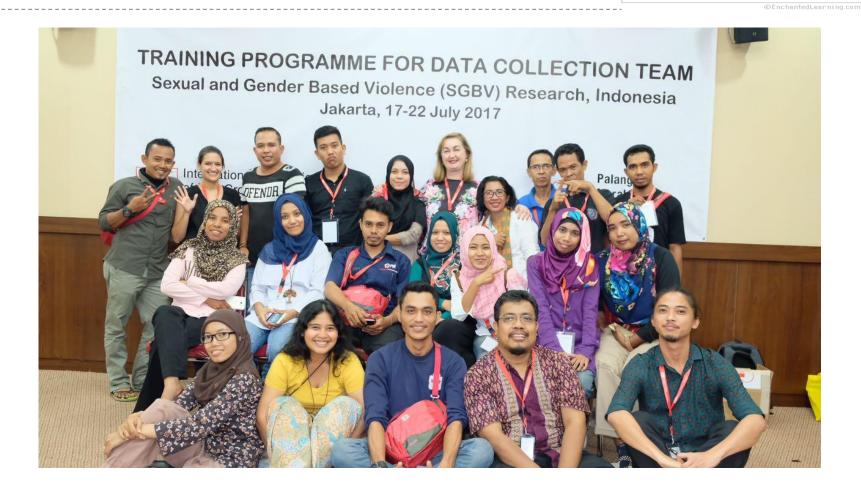
- Mainstream SGBV prevention and response priorities into its following programmes and departments: (1) Health in community-based health through community volunteers and emergency, (2) Health response Emergency Response Units (ERU) Field Hospital, (3) SoS PSS, welfare desks, (4) DMS DRR and response (shelter, WASH, Livelihood, Cash Transfer Programming, (5) Volunteer/Youth Red Cross Youth and RC 143 community volunteers.
- Create working group and designate full time PRC focal person to focus on SGBV in disasters and GAD programming (programme management, technical support, developing tools, training, monitoring, evaluation, coordination, etc)
- Partner with organizations and agencies in providing SGBV response services.

Philippines – Recommendations In-Country

- Integrate of SGBV prevention, preparedness and response during and after disasters in DRRM/GAD plan/budget and implementation at all levels.
- Increase community awareness on SGBV including referral pathways, laws and reporting.
- Representation of LGBTQI, women community-based organization in GAD/SGBV in disasters planning and implementation.
- Accessible and availability of SGBV services at district/municipal levels and the training of service providers (PSS and Heath) in emergency response.
- Engagement of community as watch groups and support to SGBV survivors







Indonesia – The Context

- Based on Pidie Jaya (Aceh) earthquake and flash floods in Bima (West Nusa Tenggara) in December 2016 (ORANGE, Mid-scale and recurrent)
- Little data available on SGBV during disaster time. All related to 2004 Tsunami and related to Aceh. A 2005 case study on Aceh (UNFPA) states risks to trafficking, sexual violence and sexual harassment increased during 2004 Tsunami due to poor conditions in IDP camps, such as overcrowding, poor lighting, open bathing facilities and unsafe or absence of latrines. Plan International reported an increase in early marriages during this time.
- For SGBV during non-emergency time: 41 per cent (age 15-64) of Indonesian women have experienced physical, sexual, emotional or economic violence. Over 33 per cent had experience physical and/or sexual violence and 42 per cent experienced being restricted from "seeing friends, communicating with family, practicing religious rituals or seeking healthcare without permission" (UNFPA, 2017)

Data Collection in Aceh and Bima

Indonesia – Who participated

Household Survey

Respondent Characteristics	
Male	357
Female	352
Average age	41
Primary Occupations	Housewife, Farmer, Retail Trade
Average household size	4
Religion	Islam
Other	Majority of population is married and literate. 64% of the population lived in temporary housing, most of these individuals are from Aceh



Indonesia – Who participated

Focus Group Discussions

	Men	Women	Boys	Girls	Total
Total	39	43	49	41	171

Indonesia – Who participated

Key Informant Interviews

Sector	Number of respondents
Health	2
Psycho-social support	3
Police personnel	2
Government agencies	3
Local NGOs	7
PMI	2
Total	19



Indonesia – Select Research Results Household Survey

49 per cent of the population living in temporary housing stated there was overcrowding in shelters, 42 per cent said that there were no separate toilets for men and women and 30 per cent shared there were no allotted safe spaces for women and children. In addition, 66 per cent expressed that there was no shelter watch group and when there was, only seven per cent recalled participation by women.

Type of incident	Response	Type of perpetrator	Male respondents	Female respondents	Total percentage
Early marriage	18%				
Domestic violence	13%	Male community member	106	107	30%
Women who experienced injuries due to	12%	Stranger			
domestic violence and accessed			60	58	17%
health services Sexual harassment	7%	Husband	22	68	13%

Indonesia – Select Research Results Focus Group Discussions

Emergent themes:

- The increase in sexual harassment in temporary shelters due to lack of separate toilets for men and women
- The importance of well-designed livelihoods interventions preventing increased risks to SGBV
- The dependence on village level dispute resolution mechanisms

Indonesia – Select Research Results Key Informant Interviews

"During the advocacy training on the protection of women, we always invite the police, but they never appear. I think in the future the government must be present in handling the violence. No local regulations (on the protection of women) are in place. It is a dilemma for us. The punishments imposed fail to give deterrent effects." – Chair of Bima Women's Committee

"The earthquake clearly seriously has affected women. My greatest concern however is the disability groups. They have limited access to normal lives, especially during a disaster, and they are increasingly marginalized." - Aceh Women's Congress

Indonesia – Select Research Results Key Informant Interviews

"During the Pidie Jaya earthquake response, there were reported cases of domestic violence at some points of shelters...another issue that was frequently reported was relating to the distribution of relief aid. Many people, especially women, did not receive relief aid being distributed. It could be because they were not registered, or they lived in places which were too distant for relief distribution agencies to reach." - Aceh Women's Congress

"Our findings showed that the evacuation sites in schools or mosques were generally in a good condition. However, the dark and [not separate] bathrooms for women and men alike had become our concerns. Some were with lights, but very dim. The command post at the hospital where I worked was provided with separate emergency toilets for men and women, but they were without lighting and muddy and dark inside. I personally had to be watchful when using the toilets, let alone those who were living in the refugee camps" - Director, Indonesian Family Planning Association

Indonesia – Recommendations Palang Merah Indonesia

- Strengthen communication and reporting mechanisms within IFRC and NSs should, so that data and analysis on SGBV is fully understood by all relevant actors involved in the humanitarian response and preparedness programs.
- Integrate SGBV prevention and response into all facets of disaster programming, including prevention, assessment and responses. Specifically, use the RCRC Vulnerability and Capacity Assessment (VCA) tools and ensure that a gender and diversity analysis is integrated.
- Integrate awareness on SGBV and PSEA into existing training curricula for volunteers, staff and governing board.
- Partner (for PMI) with NGOs/institutions who have experiences in dealing with SGBV, IFRC, local NGOs, Komnas HAM (National Committee of Human Rights), local offices on Women and Children Protection and Empowerment; Social Affairs Office; local NGOs; local governments at the village level.

Indonesia – Recommendations In-Country

- Include SGBV prevention and response and an emphasis on women's, men's, boys' and girls' safety at all levels of disaster preparedness and planning.
- Operationalise Perka BNPB no.13/2014 on Gender Mainstreaming in Disaster Management, in coordination with relevant stakeholders, including Ministry of Women's Empowerment and Child Protection, women's groups, LGBTQI groups and other Ministries and Departments. BNPB, in coordination with the Ministry of Women's Empowerment and Child Protection, should hold awareness sessions and share good practices with provincial level government actors, women's groups, LGBTQI groups and communities
- Create an integrated service coordination group in Aceh and Bima, including the Police, the Women and Children's' Empowerment, Social Service, Psychologists, NGOs to focus on SGBV prevention and response during disasters.

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Lao PDR





- Based on 2016 Oudomxay floods and 2009 Typhoon Ketsana in Sekong (YELLOW – low-scale and recurrent)
- No information available on SGBV during disasters
- SGBV during non-emergency time: the Lao National Survey on Women's Health and Life Experiences 2014 reported that 30.3 per cent of respondents experience physical, sexual or emotional abuse by partners during their lifetime.
- The Lao Social Indicator Survey (LSIS) 2011-2012, 58 per cent of the female respondents and 49 per cent male respondents stated that VAW is acceptable when women do not follow traditional gender norms and roles.

Data collection sites are Oudomxay and Sekong – both ethnically diverse

Lao PDR – Who participated

Household Survey

Respondent characteristics	
Male	89
Female	179
Average Age	38
Primary Occupation	Farmers, Housewife
Average Household Size	6
Religion	Animism
Other	Majority married or in a relationship, literate, varied ethnic background: Khmu (26 per cent), Khama Leah (13 per cent), Ar Luk (13 per cent)



Lao PDR – Who participated

Focus Group Discussion

	Men	Women	Boys	Girls	Total
Total	23	20	17	19	79



Lao PDR – Who participated

Key Informant Interviews

Sector	Number of respondents
Health	2
Community Leaders	2
Police Personnel	2
Legal Aid	2
Lao Red Cross	2
Total	10

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Lao PDR – Select Research Results Household Survey



Incidents causing women, girls, men and boys distress after the disaster

N = 265	Early marriage	Domestic Violence	Communal Violence	Respondents hearing someone had been raped after the disaster	Respondents hearing someone had sustained injuries from domestic violence after the disaster
Women and girls	47%	32%	n/a	27%	43%
Men and boys		29%	30%		

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Lao PDR – Select Research Results Household Survey

N = 235	Insulted or swore at you		Threatened to hurt you		Threatened you with a knife or gun		Pushed you down or kicked you		Hit you with a fist or something else		Threatened or forced you to have sex when you did not want to	
1-2 times	64	24	26	2	12		18	1	18	1	12	
3-5 times	21		4		5		12		6		4	
6 or more times	16	16	12		3		6		5		2	
Weekly	18		3		0		2		0		3	
Daily	8		0		0		0		1		0	

Lao PDR – Select Research Results Focus Group Discussions

SGBV exists in daily village life, however the risks to SGBV increase after a disaster, especially within the first month following the disaster, according to adolescent boys and adult women in Oudomxay.

"The violence increased because of the lack of safety and surveillance [after the disaster]. It started to get worse after 2 weeks" said an adolescent, male participant in Oudomxay.

Adolescent girls emphasised that livelihoods trainings are needed to prevent and decrease SGBV. They also spoke about having proper toilets with locks and early warning systems which reach all community members during the onset of floods.

Lao PDR – Select Research Results Focus Group Discussions

When SGBV incidents do occur, they often go unreported and are either settled within the family or between the village authority, the perpetrator and the survivor. The most common response during all discussions was to seek help from relatives, friends, village elders and authorities in such situations. Referral pathways do not exist and services for survivors are either not existent in these communities or far away.

Lao PDR – Select Research Results Key Informant Interviews



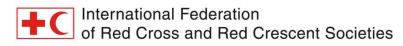
There is a general lack of awareness and knowledge among healthcare personnel on what SGBV is and how to treat survivors.

"I think enhancing our staff knowledge on the issue of SGBV should be increased to allow them to understand better for dealing with SGBV victims in the future" - Senior health official in Sekong

"I think [SGBV] can be prevented by a family-based approach, starting from the parents. This can be illustrated by previous conflict cases under our investigation often related with family factors and family influence." – Deputy Chief of Police Oudomxay

Lao PDR – Recommendations Lao Red Cross/Regional and National Level

- At regional level: hold national level roundtable on follow-up of recommendations
- Multi-sectoral community-based programmes in select data collection sites
- At national level: Create referral service network for survivors
- Implement a widespread awareness campaign
- At district level: Have follow-up discussions in select data collection sites and community-based programmes
- Strengthen the reporting system for survivors.



Overview of support mechanisms

Country	Type of Coping Mechanism					
For all three countries	Community-based-support group for women and girls (50 % of household survey respondents in the Philippines, 28 % in Indonesia and 42 % in Laos)					
	Community-based support group for men and boys (40 % of household respondents in the Philippines, 25 % in Indonesia and 26 % in Laos)					
	How to communicate with family members about these issues (30 % of respondents in the Philippines, 24 % in Indonesia and 48 % in Laos – specifically for female survivors)					
	Legal aid and awareness (39 % of respondents in the Philippines and 37 % in Indonesia)					
Philippines	Strengthen the coordination the Department of Social Welfare (DSWD) has with other sectors at the provincial levels					
	Increase the number of Violence against Women and Children (VAWC) desks					
	Stronger support from Barangay captains					
Indonesia	Religious counselling for both male and female survivors (50 % of household survey respondents)					
	Receive psychosocial counselling (19per cent)					
Laos	Better medical assistance for female survivors and "talking to friends" (26 % of household survey respondents)					

Recommendations for all participating National Societies

- Prioritise the implementation of the revised IFRC Minimum Standards on Protection, Gender and Inclusion in Emergency Programming and the Joint Action for Prevention and Response to SGBV training package through local and branch level trainings on how to use and integrate this tool into preparedness and response plans.
- Develop and implement a long-term community-based programme with RCRC volunteers and mid-level programme management, which focuses on: (1) strengthening and building referral pathways in data collection sites, (2) awareness raising on SGBV related issues both during disaster and non-disaster time, (3) psychosocial support to survivors at the community level.

Overall recommendations for ASEAN and continuation of research collaboration

- Continue research in more disaster affected ASEAN countries.
- Integrate recommendations into Regional Social Protection Guidelines and standard operating procedures for the ASEAN Disaster Management Committee (ERAT, ACE training in AHA)
- Bi-annual coordination meeting between ACDM, ACW and ACWC
- Engage ACDM in the implementation of the Regional Plan of Action on EVAW
- Exchange best practices on how gender mainstreaming and GBV prevention and response during disasters and other emergencies has been integrated in National Action Plans.