The Advocacy Brief on Gender Equality Mainstreaming in Humanitarian Response and Disaster Risk Reduction (30 October 2015) developed by the Inter-Cluster Gender Working Group based on lessons learned from the Nepal earthquake response was endorsed by the UNCT on 5th November 2015 and by the HCT on 20th November 2015. The Brief highlights the following 4 key recommendations:

1. Establish a common Information Management (IM) framework for the collection of sex and age disaggregated data (SADD), and develop gender indicators to inform policy making.

2. Incorporate gender equitable, multi-sector approaches in “build back better” strategies and within Disaster Risk Reduction preparedness, recovery and reconstruction programming.

3. Prioritise collaboration with women’s groups and frontline actors such as the Nepal Scouts, Nepal Army and the Nepal Red Cross to promote meaningful inclusion of women’s voices in local decision making.

4. Ensure continuity of financial support across the humanitarian-development continuum.

According to Displacement Tracking Matrix (DTM) Round Four² (published on 15th September) out of the nearly 60,000 people in displacement sites, 31,092 were female (53%), 27,597 male and 6,423 were children under 5 years old. This represents a slight increase in the number of women (by 702) and a reduction in the number of children (by 1,953) compared to the DTM Round 3 (published 21st July 2015)³. The most common type of security incidents reported was alcohol/drug related (25%), followed by theft (4%) and friction/dispute (3%). This represents a significant reduction in crime overall (by 16% for alcohol/drug related and by 19% for theft and by 9% for friction/dispute) since DTM Round 3. Small groups of men, women and children were asked whether they feel safe in the sites - women in 34% of the sites did not feel safe, compared to 26% for men and 30% for children. This shows no change since DTM Round 3. In 91% of the sites assessed, there were either no or inadequate lighting available in communal areas such as around WASH facilities and public spaces (increase by 7% since DTM Round 3). In 75% of the sites assessed, there were no gender segregated latrines. Majority of latrines/bathrooms have no lighting (89%), and more than half had no lock from inside (59%). 17 out of 120 sites assessed have designated safe / social places for women (10 % increase since DTM Round 3). In Dhading, Gorkha, Kavre, and Kathmandu some knowledge gaps remained among those living in displacement sites on how to report incidents of abuse or exploitation. This is a significant
improvement since DTM Round 3 where knowledge gaps were prevalent in almost all affected districts.

In a press release on 18th November^4^ a group of women’s rights activists in Nepal^5^ demanded meaningful participation of women in the reconstruction efforts, including through gender mainstreaming and women’s proportional representation in the National Authority for Reconstruction, as well as various other commissions and government bodies.

Minimum Standards for Age and Disability Inclusion in Humanitarian Action^6^ have recently been developed through an extensive inter-agency global process, including INGOs, research institutions and donors (e.g. USAID). The Minimum Standards include overall inclusion standards plus sector-specific standards. Gender Equality concerns are mainstreamed throughout the document. To promote awareness and application of the sector-specific standards, including for reconstruction, the Protection Cluster’s Age and Disability Task Force (ADTF), led by CBM, Handicap International and HelpAge, is available.

A report on “Invisible Earthquake Survivors of Kathmandu Valley” (27 October 2015)^7^ was produced by Himalayan Human Rights Monitors (Him Rights). The main objective of the assessment was to understand the impact of earthquake on marginalized, urban poor, and secluded communities of Kathmandu Valley in terms of their living condition, livelihood, health, education, government and non-governmental support, as well as different forms of gender-based violence. The report includes specific sections on the impact on women and senior citizens. Key findings include that the majority of women interviewed do not feel confident to inquire about relief with government officials and are unaware of their rights and entitlements. Women also reported an increase in sexual harassment and domestic violence post-earthquake due to staying in temporary shelters and increased alcohol consumption by men.

The latest Development Advocate (October to March 2015)^8^ includes chapters on gender equality, women’s empowerment and a gendered response written by the GenCap Advisers Anu Pillay and Geeta Kuttiparambil, and the NPC member Dr. Bimala Rai Paudyal.

Overseas Development Institute (ODI) publication on Gender and Resilience (October 2015)^9^. The authors set out recommendations for the implementation of resilience-building projects with a gender equality lens, based on examples from the literature and the NGO project documentation. They emphasise in particular the need to analyse the connections between the ‘mini-theories of change’ concerned with the ambitious goal of transforming gender relations and the overall theory of change for the resilience project as a whole. The publication includes examples from Nepal.

People in Need^10^ completed a “Her Safety Assessment Report” (November 2015) and a “Assessment of Girls Attending School in Sindupalchok” (November 2015). Overall, 6,701 women and girls across seven project VDCs and 1,000 girls (aged 12-16) in 11 schools in Sindupalchowk were surveyed in July and August 2015. Key findings of the two reports included the following:

- 18% of women respondents reported they felt “very unsafe” and an additional 47% reported that they feel “unsafe” while changing their clothes. 19% of women reported that they felt “very unsafe” and 62% reported that they felt “unsafe” when using the toilets because of a perceived increase risk of SGBV.
- Two of the eleven schools surveyed lacked gender segregated toilets for girls and an additional four had only one gender segregated toilet for girls.
- The forest (93%) and at night (95%) were reported to be the places and times where women felt most unsafe. The third highest instance of insecurity was during menstruation (71%) and at home (65%). 37% of girl respondents reported that they felt “unsafe” in schools. 44% of girls reported feeling unsafe while changing their clothes.
- Girls who slept elsewhere during their periods were more than twice as likely to report they had been raped since the earthquake – 4% compared to 1.7%.
- 42% respondents reported that alcohol abuse was either “common” or “very common” in their community. This was followed by caste discrimination (30%), gender discrimination (26%), domestic violence (28%),

Women’s rights activists in Nepal demanded meaningful participation of women in the reconstruction efforts, including through gender mainstreaming and women’s proportional representation in the National Authority for Reconstruction.

Community Feedback Report for October 2015^11^ was published on 25th October. As of this month CFP officially included a new “women’s specific” question, for all future rounds: “Do you feel there has been an increase in the level of tension, or risk of violence or harassment since the earthquake?” This change was made with support from the Gender Working Group. The question is asked only of female respondents, of which there were 546 in this round (39% of the total 1,400 survey respondents). This month, results from this question indicate that 49% of respondents feel there has been an increase in tension or risk, 3% neutral and 38% feel there has not been an increase in tension or risk. Those who responded that there had been an increase were asked the follow up question: “From whom has this tension or risk come”? Top responses are summarized below:

- Community members 36%
- Local government 26%
- Strangers 19%
RESPONSE AND GOOD PRACTICES

Coordination
Going forward into recovery and reconstruction the GWG has agreed to focus their work on the following key priority clusters: Early Recovery, Shelter, Protection, Food Security and CCCM. Emphasis on support at the district level through partnership with the District Lead Support Agencies (DLSAs) to ensure integration of gender equality issues within the district level coordination structure – local government and the Early Recovery Network Secretariat (ERNs). This will mainly include technical support to the Women and Children Office and through capacity development on gender equality to district coordination focal points (District Cluster leads, ERNS etc). Session on Sex and Age Disaggregated Data and Women’s Participation and Leadership incorporated in OCHA training being conducted with coordination focal points in earthquake affected districts in November/December 2015.

Reproductive Health
A recent report produced by WHO, UNICEF, UNFPA, World Bank and UNDP (http://www.who.int/reproductivehealth/publications/monitoring/maternal-mortality-2015/en/) highlights a 44% reduction in maternal mortality globally since 1990, in line with MDG 5. However, Reproductive Health (RH) problems are still the leading cause of ill health and death among women worldwide and this is aggravated in humanitarian settings. Immediately after the Nepal Earthquake, UNFPA estimated that of the 2 million women of reproductive age affected, 126,000 pregnant women were in urgent need of health services.

Not addressing RH care issues in humanitarian settings has serious consequences: preventable maternal and newborn deaths; sexual violence and subsequent trauma; sexually transmitted infections; unwanted pregnancies and unsafe abortions; and the possible spread of HIV. UNFPA, in line with its mandate, focused extensively on Sexual and Reproductive Health (SRH) in its emergency response. 128 mobile Reproductive Health Camps were conducted across the 14 affected districts, delivering SRH services to over 67,000 people until the 30th October 2015, 85% of whom were women and girls. Each camp lasted for three days, and services included contraception, awareness raising on birth spacing, STI treatment including HIV, GBV referral and counselling, Ante and Post Natal Care, specialist adolescent corners, and life-saving safe delivery.

Women’s Participation and Leadership
Action Aid Nepal has worked to engage women in household prioritisation, relief distribution and evaluation. Women-led Disaster Risk Management (DRM) committees were established in some of the targeted VDCs and women received leadership training. These DRM committees were mobilised quickly and assisted Action Aid in completing their rapid needs assessments as well targeting as programme beneficiaries. Pregnant women, lactating women were given priority. In every consultations held, it was ensured that women were given a platform to highlight their needs. Women became more confident to share their problems, challenges and grievances in the platform of the 23 Women Safe Spaces established across 6 of the affected districts. In addition to discussions in privacy, the women were also: - empowered to fight against any abuse, trained on their entitlements and rights, and where to seek services and support. The women have thus been able to highlight issues related to protection, WASH, access, livelihood, mental health and control of household income. Action Aid ensured that Cash For Work cheques were issued for women of each household promoting more women leadership. Women have reported that they feel empowered by having cheques in their name and for many it was their first time going to a bank and receiving 15,000 rupees in cash. Additionally, social mobilisers, of which 75% are women, are actively involved in reaching out to women in the communities and getting their regular feedback on issues that are affecting them to be reported back to local partners and to Action Aid. Action Aid plans to continue these efforts for women’s empowerment in the longer term recovery and reconstruction work.

Cash for Asset Programme
WFP’s cash for assets programme aims to ensure that post-quake rubble would be cleared and other community facilities would be repaired, including trails, irrigation systems, and slope stabilisation. Women and men as beneficiaries have to complete 40 days of work over a period of four months, in exchange for cash assistance. The programme has reached over 110,000 women and men so far and provided US$1.75 million in cash assistance to some of the most vulnerable among the earthquake-affected people. WFP plans to reach a further 184,000 people until end of December.

Remote Access Operation (RAO)
WFP’s Remote Access Operation uses the existing tourist infrastructure to deliver food and other emergency supplies to the five of the most affected districts of the country. Local women and men transport shelter material, food, hygiene kits and medical supplies to thousands of people in rural communities inaccessible by road or helicopter. The
Bhes Kumari Bohara, farmer, Tauthari, Sindhupalchowk. Together with her husband and 18-year old son, Bhes worked on the same access road to Tekanpur. Hers is a typical farming family: they keep goats and buffaloes, they plant millet and paddy rice. Like so many here, she lost her food stocks when the storage building collapsed in the quake. “It was difficult to find work when you couldn’t get into the village by vehicle – not even motorcycles could make it.” Bhes and her family laid stone slabs on the road and filled the gaps with grit, so that vehicles would not get stuck in the mud. “It will be a while before the next harvest comes through, so this money from WFP is really important for us. I’m going to buy new clothes for my children and replace the food we lost in the earthquake.”

Sanchi Maya Thami no-longer lives in a house. The 33-year-old mother of five from Bighu, Dolakha district, Nepal now calls a crowded cowshed home. A pile of rubble is all that’s left of the place where she and her husband raised five children. And buried under that – most of her possessions and her food reserves. “Two earthquakes and incessant monsoon rains took everything away from us,” she laments. “The earthquake cracked the fields and the monsoon washed away what was left. Food, clothes and utensils were buried under the rubble.” Sanchi is now employed as a porter through the WFP Rural Access Operation in Dolakha. “We received NPR 3,750 [equivalent to US$ 37.50] for working as porters for three days. We transported WFP rice to give to people who had suffered from the earthquake. Finally I can pay for my children’s education as I have cash in my hands,” she says.
GLOBAL HIGHLIGHTS ON GENDER EQUALITY IN HUMANITARIAN ACTION

Chandni Joshi, representing the women’s groups that drafted the Women’s Common Charter of Demands for Gender Equality and Women’s Empowerment in the Nepal Earthquake Response, was as a panelist in the session on “Resilience: Build Hope through New Solutions” together with the Special Advisor to the UN System’s Chief Executive Board, Senior Adviser to the World Bank Group President and Designated IASC Principal, Assistant Secretary General and Director of UNDP Crisis and Recovery Unit, Executive Director of WFP and International Expert in Disaster Risk Reduction & Gender and Development at the World Humanitarian Summit Global Consultation in Geneva in October 2015. In her presentation she highlighted the Common Charter of Demands and other initiatives taken to integrate gender equality and women’s empowerment into the Nepal earthquake response. The Synthesis Report of the Consultations for the World Humanitarian Summit clearly identifies the need to prioritise 1) empowerment of women and girls, 2) elimination of gender-based violence, and 3) involvement of women and girls as leaders in crises response and recovery. A monitoring matrix to follow-up implementation of the key demands in the Common charter is being developed to track progress.

The report “Gender equality in the 2015 SRPs - Results and evolution of the IASC Gender Marker” was prepared by the IASC Gender Standby Capacity project (GenCap). The report captures lessons on integrating gender into the previous humanitarian planning process and makes recommendations for continued improvements. The report illustrates a growing recognition that gender equality is pivotal to humanitarian response. Yet, despite important progress, the review of the IASC Gender Marker codes indicated that only 35 per cent of proposals considered gender issues. The majority of projects were either gender blind (22%), or only partially designed to address the distinct needs of women, girls, boys and men (42%). The Assistant Secretary-General of UN OCHA emphasised that the IASC Gender Marker is an important, mandatory tool that helps build understanding of how distinct gender needs are considered within humanitarian programming. Key recommendations for the planning process include:

- Continued improvement of quantitative and qualitative data collection, disaggregated by sex and age.
- Where gaps in sex and age disaggregated data are identified in the Humanitarian Needs Overview (HNO), a plan is developed to address them in future assessments.
- Coherent and adapted activities with corresponding indicators to address assessed disadvantages and discrimination are developed.
- Closer attention is paid to the wider needs of women and girls and their role within society, such as in generating income or participating in community or project decisions.
- Building on the improved articulation of the needs of women and girls, a stronger focus is placed on vulnerabilities faced by men and boys to improve the wider gender understanding.

The revised Inter-agency Standing Committee (IASC) Guidelines for Integrating Gender-based Violence Interventions in Humanitarian Action (“GBV Guidelines”) have been officially launched and are available for global dissemination. The GBV Guidelines were revised from the 2005 version by a global inter-agency Task Team led by UNICEF and UNFPA, on behalf of the IASC GBV AoR, and endorsed by the Inter-agency Standing Committee (IASC) in 2015 as well as by the UN Emergency Relief Coordinator. The purpose of the Guidelines is to assist humanitarian actors and communities affected by armed conflict, natural disasters and other humanitarian emergencies to coordinate, plan, implement, monitor and evaluate essential actions for the prevention and mitigation of GBV across all sectors of humanitarian response.

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This update was prepared based on inputs from members of the multi-stakeholder forum of the Inter-Cluster Gender Working Group (GWG). The forum enables information exchange, coordinating efforts towards shared priorities, and raising attention to key issues in the field of gender equality during the Nepal earthquake humanitarian response. The Gender Working Group is co-chaired by UN OCHA and UN Women Nepal.

14 https://www.worldhumanitariansummit.org/whs_globallive
17 http://www.gbvguidelines.org/