



NATURAL DISASTERS: GENDER-BASED VIOLENCE SCENARIOS

GENDER-BASED VIOLENCE AND NATURAL DISASTERS IN LATIN AMERICA AND THE CARIBBEAN



United Nations Population Fund





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Foreword

There are presently few studies that assess possible linkages between Gender Based Violence (hereafter GBV) and natural disaster situations, yet there is general consensus that disasters trigger social vulnerabilities, increase threats and exacerbate existing discriminations. Even in countries with well-functioning high quality services, under-reporting on GBV may occur, and it has only been in the aftermath of recent major disasters that GBV has received more attention in the context of humanitarian settings.

This assessment is an important step towards addressing the information gap and producing such necessary analyses. The report, conducted mainly as a desk review, provides insightful programme recommendations and conclusions which may be used to strengthen capacities to prevent and address GBV in acute emergencies caused by natural disasters. It serves as a thorough assessment which sets the road map in terms of program efforts and for future in-depth studies.

This report provides relevant information and data on linkages between GBV and natural disasters. It examines GBV policies, guidelines and programmes to assess the extent to which they look at GBV in situations of natural disasters. It also explores potential intersections between GBV and disaster management, providing an assessment of the extent to which GBV risks and vulnerabilities are integrated into the disaster management cycle, especially in the region of Latin America and the Caribbean.

As the assessment identifies, there are only a small number of programmes which have been implemented to address GBV in disaster response and recovery, thus signalling key gap areas in terms of disaster preparedness, response and recovery, while also demarking hindering factors which could be addressed.

In situations of natural disasters, gender based violence is a pervasive factor which may heighten vulnerabilities and risk exposure to sexual violence. There is a need for all persons in position of power or involved in a humanitarian response to adhere to the motto that even “One case of GBV is one too many”.

The preliminary findings of the review fall within the efforts of the United Nations Population Fund Regional Office for Latin America and the Caribbean to generate and share knowledge regarding gender issues and gender-based violence in humanitarian crises. The focus of the assessment is on natural disasters which affect the region of Latin America and the Caribbean particularly. It can be used to support efforts within the region, of UNFPA and its partners, in making informed policy and programme decisions to address GBV. Recommendations and suggestions can in turn be used as inputs to consider for the design and implementation of comprehensive models for GBV prevention and care in humanitarian crises.

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Conceptual framework

1 INTRODUCTION

1.1 Background

Volcanic eruptions, earthquakes, flooding and landslides caused by heavy rains, tropical storms, hurricanes, forest fires and drought regularly affect countries in Latin America and the Caribbean. Climate-related disasters are on the rise.

Studies show that natural disasters have a disproportionate impact on poor populations. In emergencies and humanitarian crises, women and young people are especially vulnerable to sexual violence and coercion.

Addressing gender-based violence (GBV) has been assumed to be a constituent of protection globally. Under the United Nations Humanitarian Reform, the United Nations Population Fund (UNFPA) and the United Nations Children's Fund (UNICEF) are mandated to coordinate efforts for the prevention of and response to GBV in emergency contexts under the Protection Cluster.

To strengthen the regional capacity to address GBV in acute emergencies caused by natural disasters, UNFPA has identified the need to conduct research to identify and systematize relevant information and data on the linkages between GBV and natural disasters. This study is a step in this direction.

1.2 Key Concepts and Definitions

Contingency planning

Is a management tool used to analyse the impact of potential crises so that adequate and appropriate arrangements are made in advance to respond in a timely, effective and appropriate way to the needs of the affected population. Contingency planning plays a critical role in strengthening preparedness. It contributes to enhanced awareness of potential threats, to improved understanding of potential response strategies and to the building of relationships that are key for dealing with crises.

Disaster

Is a serious disruption of the functioning of a community or a society causing widespread human suffering and material, economic or environmental losses that exceed the ability of the affected community or society to cope using its own resources. Disasters can be caused by a variety of factors including natural hazards (geological, hydrological, meteorological and biological) or those induced by human processes (e.g., environmental degradation and technological hazards).

The disaster risk is a function of vulnerability, hazard and the capacity of the affected populations/communities to cope with it.

¹ United Nations, Disaster Preparedness for Effective Response: Guidance and Indicator Package for Implementing Priority Five of the Hyogo Framework (Geneva: United Nations, 2008).

² United Nations International Strategy for Disaster Reduction (UNISDR), Terminology on Disaster Risk Reduction, available from <http://www.unisdr.org/eng/media-room/media-room.htm>.

³ Ibid., available from <http://www.unisdr.org/#>.

⁴ United Nations, Disaster Preparedness for Effective Response.



Disaster risk reduction

Is the conceptual framework of elements considered as having the possibilities to minimize vulnerabilities and disaster risks throughout a society, to avoid (prevention) or to limit (mitigation and preparedness) the adverse impacts of hazards, within the broad context of sustainable development.

Disaster preparedness

Is defined as the capacity and knowledge developed by governments, professional response organizations, communities and individuals to anticipate and respond effectively to the impact of likely, imminent or current hazard events or conditions. It comprises all the pre-disaster activities that are undertaken within the context of disaster risk management and that are based on sound risk analysis. This includes the development / enhancement of an overall

preparedness strategy, policy, institutional structure, warning and forecasting capabilities, and plans that define measures geared to helping at-risk communities safeguard their lives and assets by being alert to hazards and taking appropriate action in the face of an imminent threat or actual disaster.

Gender-based violence (GBV)

Is an umbrella term for any harmful act that is perpetrated against a person's will and that is based on socially ascribed (gender) differences between males and females. The term highlights the gender dimension of those acts that, while committed more often against women and girls, can also be experienced by boys and men. Some of the forms of GBV that may be found in disaster situations include domestic violence, sex trafficking, forced marriage and sexual coercion.



⁵ Inter-Agency Standing Committee (IASC), Guidelines for Gender-Based Violence Interventions in Humanitarian Settings: Focusing on Prevention of and Response to Sexual Violence in Emergencies (Geneva: IASC, 2005).

⁶ Enarson, E., Gendering Disaster Risk Reduction. A Working Glossary in Support of the GDN Gender Note Series (2009). Available from www.gdnonline.org/resources/GDN_Gendering_DRR_Glossary.pdf.

⁷ Organization of American States (OAS), Inter-American Convention on Prevention, Punishment, and Eradication of Violence against Women (Convention of Belém do Pará) (Brazil: OAS, 1994). AG/RES. 1257 (XXIV-O/94).

⁸ This classification has been developed by the United Nations Population Fund, the International Rescue Committee and the United Nations High Commissioner for Refugees for the purposes of improving data collection and analysis and for use within the framework of the Gender-Based Violence Information Management System (GBVIMS). It includes the first seven definitions as "core" types of GBV. The Gender-based Violence Classification Tool considers the first six definitions listed as core types of GBV. Additional definitions have been added to the list as they are pertinent to the Latin America and Caribbean region.



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The Inter-American Convention on Prevention, Punishment, and Eradication of Violence against Women (Convention Belém do Pará, Brazil, 1994) defines violence against women (VAW) as “any act or conduct, based on gender, which causes death or physical, sexual, or psychological harm or suffering to women, whether in the public or the private sphere”.

Below are definitions of types of GBV:

Rape is defined as the non-consensual penetration (however slight) of the vagina, anus or mouth with a penis or other body part. It also includes penetration of the vagina or anus with an object.

Sexual assault encompasses any form of non-consensual sexual contact that does not result in or include penetration. Examples include: attempted rape, as well as unwanted kissing, fondling or touching of genitalia and buttocks. Female genital mutilation and female genital cutting (FGM/C) are acts of sexual violence that impact sexual organs and as such will be classified as sexualized acts.

Physical assault is an act of physical violence that is not sexual in nature. Examples include: hitting, slapping, choking, cutting, shoving, burning, shooting or use of any weapons, acid attacks or any other act that results in pain, discomfort or injury.

Forced marriage means the marriage of an individual against her or his will.

Denial of resources, opportunities or services includes denial of rightful access to economic

resources/assets or livelihood opportunities, education, health or other social services. Examples include: a widow prevented from receiving an inheritance; earnings forcibly taken away by an intimate partner or family member; a woman prevented from using contraceptives; and a girl prevented from attending school. Reports of general poverty should not be recorded.

Psychological/emotional abuse concerns the infliction of mental or emotional pain or injury. Examples include: threats of physical or sexual violence, intimidation, humiliation, forced isolation, stalking, harassment, unwanted attention, remarks, gestures or written words of a sexual and/or menacing nature and destruction of cherished things.

Domestic violence is any type of GBV referenced above that is perpetrated by a spouse, boyfriend/girlfriend or other intimate partner. It is also referred to as Intimate Partner Violence.

Sexual exploitation and abuse (SEA) is defined by the power relationship between survivor and perpetrator. Often it is perpetrated by those humanitarian actors who are mandated to serve and protect people in need. Sexual exploitation is defined as any actual or attempted abuse of a position of vulnerability, differential power or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another. Sexual abuse, instead, means the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

⁹ World Health Organization (WHO), WHO Multi-country Study on Women's Health and Domestic Violence against Women: Initial Results on Prevalence (Geneva: WHO, 2005).

¹⁰ United Nations Secretary General, SG's Bulletin: Special Measures for Protection from Sexual Exploitation and Sexual Abuse (2003) (ST/SGB/2003/13). Additional information can be found at <http://www.un.org/en/pseataaskforce/overview.shtml> First add reference to the SG's Bulletin on SEA, then the link to the Protection from Sexual Exploitation and Abuse (PSEA) website, where additional information can be found.

¹¹ Additional information can be found at http://www.unifem.org/gender_issues/violence_against_women/facts_figures.php?page=5.

¹² Additional information can be found at http://www.unifem.org/gender_issues/violence_against_women/facts_figures.php?page=4.

¹³ Inter-American Institute of Human Rights (I/HR), Regional Report Situation and Analysis of Femicide in the Central America Region (San Jose: I/HR, 2006).



Trafficking involves the recruitment and transportation of persons, using deception, coercion and threats in order to place and keep them in a situation of forced labour, slavery or servitude. Persons are trafficked into a variety of sectors of the informal economy, including prostitution, domestic work, agriculture, the garment industry or street begging.

Harmful traditional practices are forms of violence that have been committed against women in certain communities and societies for so long that they are considered part of accepted cultural practice. These violations include FGM/C, so-called honour killings and early marriage.

Femicide is the violent killing of a woman (by homicide, parricide or murder) for being a woman at the hands of her partner (intimate femicide) or of a stranger.

Gender disaster vulnerabilities arise from barriers to resilience based on sex or gender or both. They may also be a root cause of increased risk, for example, when gender violence constrains women's freedom of movement and ability to participate or limits the ability of girls and women to access shelters.

Gender mainstreaming in humanitarian settings is a strategy for making women's as well as men's concerns and experiences an integral dimension of the design, implementation, monitoring and

evaluation of policies and programmes in all political, economic and societal spheres so that women and men benefit equally and inequality is not perpetuated. In crisis situations, mainstreaming a gender focus allows for a more accurate understanding of the situation; enables meeting the needs and priorities of the population in a more targeted manner; and ensures that the needs and vulnerabilities of those affected by a crisis are acknowledged and adequately taken into account.

Natural hazard is a naturally occurring phenomenon caused either by rapid or slow onset events, which may be geophysical (earthquakes, landslides, tsunamis and volcanic activity), hydrological (avalanches and floods), climatological (extreme temperatures, drought and wildfires), meteorological (cyclones and storms/wave surges) or biological (disease epidemics and insect/animal plague). Climate change as well as underplanned urbanization and underdevelopment can act as aggravating factors, increasing the frequency, complexity and severity of disasters.

Vulnerability is defined as the conditions determined by physical, social, economic and environmental factors or processes, which increase the susceptibility of a community to the impact of hazards. People differ in their exposure to the risk as a result of their social group, sex, ethnic or other identity, age and other factors. The vulnerability of the population to the hazard posed by a natural event determines the extent and impact of the disaster risk as per the risk equation below:

Risk = Hazard x Vulnerability/ Response capacity

14 Enarson, Gendering Disaster Risk Reduction.

15 Inter-Agency Standing Committee. Women, Girls, Boys and Men: Different Needs - Equal Opportunities (Geneva: IASC, 2007).

16 International Federation of the Red Cross and Red Crescent Societies (IFRC), Disaster Management, available from <http://www.ifrc.org/what/disasters/about/types/index.asp>.

17 United Nations International Strategy for Disaster Reduction, Hyogo Framework for Action 2005-2015: Building the Resilience of Nations and Communities to Disasters (Hyogo: UNISDR, 2005), p. 1.

18 Pan American Health Organization (PAHO)/World Health Organization, Progress Report on National and Regional Health Disaster Preparedness and Response, CD47/INF.4. 47th Directing Council, 58th Session of the Regional Committee (Washington, DC: PAHO, 2006), p. 6.

19 Economic Commission for Latin America and the Caribbean (ECLAC), Analysis of Extreme Events in the Caribbean 1990-2008 (Port Of Spain: ECLAC, 2010), LC/CAR/L.254.

20 Tuckerman, J., "Latin America Hit by Record Number of Disasters, says UN", The Guardian (28 December 2007)



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1.3 Rationale

Approximately three quarters of the population in Latin America and the Caribbean are estimated to live in disaster risk areas. In Central America and the Andean regions, floods, earthquakes and volcanic eruptions are the most common occurrences. Colombia and Ecuador together have the highest number of active volcanoes in Latin America whereas, in the Caribbean, hydro-meteorological disasters such as hurricanes and tropical storms account for an estimated 60 per cent of all natural disasters affecting the subregion. In 2007, the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) reported that it had sent a record 9 missions to the region out of a total of 14 globally. In 2010, a conspicuous number of natural events, among which were earthquakes, floods, hurricanes, storms and volcanic eruptions, had already hit the region.

Besides material and human losses and destruction, natural disasters can render individuals and groups vulnerable to human rights violations or may exacerbate vulnerabilities that existed prior to the natural disaster. Vulnerable groups or individuals are at greater risk of sustaining losses and suffering, and the same vulnerabilities they experienced prior to the disaster may be amplified during and after the event occurs.

From a gender perspective, how men and women are impacted by and respond to a disaster situation is directly related to the gender-based roles and responsibilities, opportunities and challenges that women and men had prior to the disaster. Gender is therefore a pervasive factor affecting various facets of vulnerabilities to natural disasters.

There is now a consensus that disasters trigger social vulnerabilities, increase threats and exacerbate existing discrimination. During emergencies social networks break down, leaving individuals and groups more vulnerable to abuse and less likely to access help. Within this context, the gender-based inequalities and discrimination that cause and perpetuate GBV in “normal” times persist and even escalate in times of crisis.

Despite the fact that GBV in disaster situations is not a new problem, it is only in the aftermath of some recent major disasters such as the Indian tsunami and Hurricane Katrina that it started receiving more attention. The recognition of sexual violence in conflict as a self-standing international security issue in 2008 and the debate this generated also contributed significant attention to the issue of GBV in general. Lastly, the recent earthquake in Haiti signalled an unprecedented emphasis on this issue by the international community.

Yet, while women are commonly acknowledged to suffer increased vulnerability to the effects of natural disasters, their particular vulnerability to GBV is less recognized and remains a largely neglected area within the field of disaster management. Hence the need for a more systematic identification and integration of information on GBV in disaster research and practice.

GBV is generally recognized to be common in Latin America and the Caribbean, even though solid data is lacking. Generally, the data that does exist focuses mostly on domestic violence and is inconsistent across countries. As with all countries worldwide, underreporting is another critical hindrance to efforts to gather reliable data on this issue. Other identified gaps include insufficient law enforcement and

²¹ For more information on the nature and extent of each disaster refer to <http://www.reliefweb.int/rw/dbc.nsf/doc101?OpenForm&rc=2#show>, retrieved 26 October 2010.

²² Kumar-Range, S., Environmental Management and Disaster Risk Reduction: A Gender Perspective. Prepared for the Expert Group Meeting on “Environmental Management and the Mitigation of Natural Disasters: a Gender Perspective”, 6-9 November 2001, Ankara, Turkey (2001), p. 2. Available from http://www.un.org/womenwatch/daw/csw/env_manage/documents/BP1-2001Nov04.pdf.

²³ United Nations Security Council, Women and Peace and Security, Security Council Resolution 1820 S/RES/1820 (2008).

²⁴ Economic Commission for Latin America and the Caribbean, ¡Ni Una Más! Del Dicho al Hecho: ¿Cuánto Falta por Recorrer? (Port of Spain: ECLAC, 2009).

²⁵ Contreras, J. M., et al., Violencia Sexual en Latinoamérica y el Caribe: Análisis de Datos Secundarios (Pretoria: Iniciativa de Investigación sobre la Violencia Sexual, 2010).

²⁶ Economic Commission for Latin America and the Caribbean, No more! The Right of Women to Live a Life Free of Violence in Latin America and the Caribbean (Port of Spain: ECLAC, 2009), p. 30.

²⁷ Contreras et al., Violencia Sexual en Latinoamérica y el Caribe, p. 26.



inconsistencies when going from theory to practice through the implementation of programmes, policies and plans that address VAW.

Domestic violence and especially intimate partner violence is by far the most common form of violence in Latin America and the Caribbean. Lifetime prevalence of intimate partner violence in the region varies between 5 and 47 per cent. Demographic and Health Surveys (DHSs) on intimate partner violence conducted in Bolivia, Colombia, Dominican Republic and Peru reveal that 10 per cent of the women in the four countries have experienced sexual violence and 50 per cent, emotional violence, whereas physical violence levels stood between 21 per cent in the Dominican Republic and 52 per cent in Bolivia.

Other forms of GBV that are common in the region include sex trafficking, SEA and femicide. Data reveals that on the southern frontiers of Mexico 70 per cent of migrant women are victims of violence and 60 per cent suffer some kind of sexual abuse during their journey. Brazil and Colombia are the main transit points for trafficking in Latin America, whereas the Dominican Republic is listed among the four countries of the world with the highest proportions of women trafficked for sexual exploitation.

The term **“femicide”** -- the violent killing of a woman for being a woman by partner (intimate femicide) or by a stranger -- is also used to cover social aspects and the political background of women’s homicides,

namely discrimination, impunity and the indifference by the State, thus its responsibility. According to the World Health Organization (WHO), Latin America has the second highest indices of death of women by violence.

The Latin America and the Caribbean region has gained international recognition for progress made in legal reforms that address VAW. It was the first region in the world where all countries ratified the Convention for the Elimination of All Forms of Discrimination against Women (CEDAW). Although all countries in the region have adopted laws on domestic and family violence, VAW at community and state levels remains largely unregulated. Among all, only Brazil passed an integrated law on VAW in all areas, as required by the Organization of American States (OAS) Convention Belém do Pará (Brazil, 1994). This convention is the most important regional policy document on VAW. More important, it is the only legally binding international agreement directed solely at eliminating VAW.

Evidence suggests similar GBV patterns in both the Caribbean and Latin America, although records for the Caribbean are generally poorer and sources of information scarcer. More similarities than differences have been found also in relation to other continents. What differs, however, are the manifestations of GBV. For example, practices such as dowry-related violence and female infanticide are not common in the region.

28 The MEASURE DHS domestic violence module was developed in the late 1990s to obtain comparable, statistically relevant information on women experiencing violence in intimate relationships. In Latin America and the Caribbean, the countries where Demographic and Health Surveys have been conducted are: Bolivia (2008), Colombia (upcoming 2009), Dominican Republic (2007), Haiti (2005-2006), Honduras (2005-2006) and Peru (2009). More information on the methodology and results of the surveys is available from http://www.measuredhs.com/topics/gender/dv_surveys.cfm#1.

29 Ibid., p. 36.

30 L., Vulnerabilidad de las Mujeres en el Proceso Migratorio. First Central American meeting on Trafficking in Women, San Jose, Costa Rica, 4-5 December, United Nations Population Fund (UNFPA) (San Jose: 2006).

31 Economic Commission for Latin America and the Caribbean, No More!, p. 53.

32 Inter-American Institute of Human Rights, Regional Report, p. 38.





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1.4 Methodology

This report is the result of a thorough desk review of secondary information. More than a hundred published and unpublished documents were reviewed to prepare for this study. Most of them were identified through research on the Internet, while experts and representatives from various organizations contributed supplementary information. Bibliographies of relevant reviewed documents provided additional sources of information.

The research did not involve any interviews with experts or field practitioners. However, when opportunities arose, further collected information was checked with professionals in relevant fields of expertise.

To the extent possible, triangulation and cross-checking were applied to establish credibility and to increase the validity and trustworthiness of the information collected.

1.5 Scope and Limitations

Although the focus of this study is on GBV in situations of natural disasters in the Latin America and Caribbean region, disaster situations in other areas of the world were also considered. This facilitated conclusions on the state of the art of GBV research and practice in Latin America and the Caribbean as compared with the situation in other regions.

Significant work was devoted to the exploration of potential intersections between GBV and disaster management at global, regional and national levels. Starting from the mapping of relevant GBV and disaster actors, the research evolved into a thorough

analysis of policies and practices and their application in the context under consideration. More specifically, this involved an extensive review of policies, guidelines and programmes on disaster preparedness, response and recovery from a wide range of global and local actors and related coordination mechanisms. The objective was to assess the extent to which GBV risks and vulnerabilities are integrated into the disaster management cycle, especially in the Latin America and the Caribbean region. Meanwhile, GBV policies, guidelines and programmes were examined to assess the extent to which they look at GBV in situations of natural disasters.

This work was not without limitations. First, time did not allow an in-depth examination of each and every disaster in the region. Rather, some situations were given more attention than others. On GBV programming, for example, a decision was made to rely on flash appeals of some relatively recent disasters such as the earthquakes in Chile, Haiti and Peru and the hurricanes and storms in the Dominican Republic, El Salvador and Guatemala. Second, although a wealth of materials exists on either GBV or disaster risk reduction alone, for the most part, the two do not relate to each other. Furthermore, a detailed compilation of GBV- and disaster-specific policies and programmes was beyond the scope of this study.

Third and last, it is important to mention that this study necessarily reflects the disparity in available materials and information. Hence, some correspondence exists between the lack of references to certain disaster situations in this study and the paucity of research and practices on the subject in those contexts.

³³ Economic Commission for Latin America and the Caribbean, No More!, p. 74. Within the region, it is widely recognized that Guatemala has a serious problem regarding the violent deaths of women. Available information documents that the recorded number of violent deaths of women increases every year. More than 4,000 violent murders of women were registered from 2000 to 2008. Musalo, K., E. Pellegrin and S.S. Roberts, "Crimes Without Punishment: Violence against Women in Guatemala", *Hastings Women's Law Journal* 21 (2, 2010): 161-221.

³⁴ United Nations Development Fund for Women (UNIFEM)/ Economic Commission for Latin America and the Caribbean, *Eliminating Gender-Based Violence, Ensuring Equality: Regional Assessment of Actions to Eliminate Violence against Women in the Caribbean* (Barbados: UNIFEM, 2005).

³⁵ Ruiz Diaz, N., "Women Suffer 'Hidden' Genocide in Latin America". In *Inter Press Service (IPS)*, 19 May 2009. Available from <http://ipsnews.net/news.asp?idnews=46903>, retrieved 30 September 2010.

³⁶ Comisión Interamericana de las Mujeres (CIM) , Technical Note: Violence against Women in the Caribbean, prepared on the occasion of the launch of UNITE, the Secretary General's Campaign on Violence (2010). Available from www.eclac.org; United Nations Department of Economic and Social Affairs (DESA), Division for the Advancement of Women, *Handbook for Legislation on Violence against Women* (New York: United Nations, 2010).

³⁷ Economic Commission for Latin America and the Caribbean, No More!, p. 37.

³⁸ *Ibid.*, p. 9



Countries in which the study has focused:





Gender-based Violence and Natural Disasters in Latin America and the Caribbean

2 State of the Art

2.1 Gender-base Violence Issues in Natural Disasters

This section aims at providing an overview of the nature and extent of GBV in emergencies caused by natural disasters, its prevalence in the Latin America and Caribbean region as well as the factors that may combine to make GBV likely in natural-disaster situations.

The relationship between GBV and disasters is the result of a complex web of factors, including individual social vulnerabilities that pre-dated the disaster such as gender, age, socio-economic status, ethnicity; communities' and societies' contexts, including the nature and quality of services; and the scope and timeliness of reconstruction and rehabilitation efforts.

The literature on gender and disasters seems to suggest an increase in the level of GBV in the aftermath of sudden-onset disasters. Typically, displacement contexts, separation of family members and frustration deriving from the loss of family assets and income are indicated as the most common contributors to the upsurge in violence. Chaotic situations and the lack of public safety that often characterize the early stages of a disaster can also contribute to general lawlessness and impunity, and feelings of fear and insecurity, creating the conditions for GBV to flourish.

Yet, while it is reasonable to assume that, if GBV existed prior to a disaster, it will still be there during and after a disaster occurs, its increase as a direct consequence of a natural disaster is not easily determined.







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In the aftermath of a disaster, one oft-reported concern is sexual violence in shelters. Among the reasons reported for an increase of sexual violence are frustration among men, exposure of women and girls in the public sphere, breakdown of traditional protection mechanisms, and lack of safety and privacy. Most of what is reported, however, is based on perceptions by women and other community members, and on anecdotes. Rarely does reliable data exist on the prevalence of rape and other forms of GBV in disaster situations (as well as in other emergency contexts and many non-emergency development and developing-world contexts).

Few authors have been collecting evidence on GBV in disaster situations. Among them, the work conducted by Elaine Enarson in this field is the most comprehensive and long-standing. Drawing on testimonies, experiences and available data from various disaster-hit locations in the United States of America and Canada, the researcher has been able to show some evidence of an increase in GBV in post-disaster situations, particularly domestic and sexual violence. On domestic violence, there is a likely increase in relationship stress when a household is struggling with lost possessions, housing, jobs, etc. Men in particular may feel frustrated at not being able to provide for and protect their families, and may resort to negative coping strategies such as alcohol and substance abuse, while masculinity norms may limit their ability to ask for help.

As far as the Latin America and the Caribbean region is concerned, accounts of GBV were found in

Nicaragua after Hurricane Mitch (1998), in the Dominican Republic after Tropical Storm Noel (2007), in Peru after the 2007 earthquake, and more recently in the aftermath of the earthquakes in Haiti and Chile (2010), and in Guatemala in relation to Tropical Storm Agatha (2010), among others. Although reference to the potential for GBV occurring in the context of other disasters in the region was found, the above reflect those for which some research on the issue has been conducted.

In the aftermath of the Haiti earthquake in 2010, unsafe living conditions, lack of private bathing facilities, lack of lighting and lack of police presence have been indicated among the contributing factors for sexual violence against women and girls in camps, including SEA by humanitarian workers.

In Chile, data from clinics and centres for the assistance of domestic violence survivors confirmed that reported incidents of VAW had increased. In Guatemala, an evaluation by Gestión y Tecnología en Salud y Desarrollo (GETSA) in June 2010 revealed that psychological violence had increased from 7 per cent prior to the storm to 22.5 and 19 per cent during and after the storm, respectively. The evaluation also observed an increase in economic violence from 18.3 to 20.4 to 26.1 per cent, prior, during and after the storm, respectively. Interestingly, economic violence was also the most frequently reported form of violence before the storm hit.



Similarly, investigations on this issue in the Dominican Republic in the aftermath of Tropical Storm Noel (2007) revealed that sexual violence, both within the home and within society in general, had increased. The following primary contributing factors were reported by the authors:

1. Destruction of traditional prevention and response services, such as police stations, judicial courts and health centres.
2. Lack of priority given to medical and social services the aim of which was to prevent and respond to VAW in the context of reconstruction efforts.
3. Loss of social and family protection frameworks that may have increased the vulnerability of women to SEA and/or survival sex.

Other contributing factors were: scarce security in temporary shelters, particularly at night; improvised shelters, the majority of which housed both men and women together, that were inadequate to provide for the high number of displaced persons and generally lacked even basic security measures (e.g., lighting); and insufficient military personnel to provide security. Besides sexual violence, cases of femicide were also reported.

Nicaragua is perhaps one of the countries with comparatively reliable information on the impact of disasters on GBV in the region. Data on VAW by Auditoria Social existed prior to Hurricane Mitch and allowed a comparison and subsequent analysis on the

issue in its aftermath. Moreover, local actors such as the non-governmental organization (NGO) Puntos de Encuentro were particularly active after Hurricane Mitch, conducting household surveys, participating in a social audit and running public campaigns targeted at men on reducing VAW.

Yet data show some degree of inconsistency. A preliminary study by the World Bank right after Hurricane Mitch hit Nicaragua and Honduras describes a pattern in which familial and sexual violence seems to have decreased in the immediate aftermath of the disaster and to have steadily increased in the reconstruction phase. According to some local networks, however, anecdotal information on violence within the shelters was heard as early as two weeks post hurricane. Meanwhile, data from the social audit does not provide a consistent picture; among the people interviewed, 21 per cent stated that there had been an increase in the level of violence after Mitch, whereas 34 per cent expressed the view that it had decreased. Throughout the report, reference is made to the perception of violence and not to its actual incidence. Meanwhile, 60 per cent of the people who participated in the work of the Psychosocial Commission on Emotional Recovery established after the hurricane mentioned an increase in interfamily violence in the aftermath of the hurricane. The above discrepancies prove that efforts need to be made to identify where data exists (including through anecdotal and informal sources), and work has to be done to put into place mechanisms that will allow better analysis and identification of trends.

³⁹ Enarson, E., Gender Issues in Natural Disasters: Talking Points and Research Needs. Talking Points for ILO InFocus Programme on Crisis Response and Reconstruction Workshop, Geneva, 3-5 May 2000 (2000), p. 3. Available from www.gdnonline.org/resources/ilo-talking.doc.

⁴⁰ Institute for Justice and Democracy in Haiti et al., *Our Bodies Are Still Trembling: Haitian Women's Fight against Rape* (Boston: IJDH, 2010), p. 13.

⁴¹ Lowy, M., *Women's Response to Chile Earthquake Immediate and Ongoing* (2010), available from <http://womensmediacenter.com/blog/2010/07/exclusive-womens-response-to-chile-earthquake-immediate-and-ongoing/>, retrieved 13 August 2010.

⁴² According to the Economic Commission for Latin America and the Caribbean's study *No more!*, p. 29, economic violence refers to the control mechanisms exercised by men – generally the women's partners – over the economic behaviour of women, and these include depriving them of the basic resources needed for their maintenance or well-being, which results in social isolation and deprives them of their freedom of movement and autonomy.

⁴³ The evaluation covered 10 of the 22 most affected departments, for an estimate of 319,531 women. The study was prepared in coordination with UNFPA and the Secretaria Presidencial de la Mujer (SEPREM). See *Gestión y Tecnología en Salud y Desarrollo (GETSA)*, SEPREM and UNFPA, *Impacto en los Medios de Vida de las Mujeres Afectadas por la Tormenta Agatha* (Guatemala: GETSA, 2010).

⁴⁴ Alba, W., and D. Luciano. *Evaluación Rápida sobre Salud Sexual y Reproductiva, Violencia contra las Mujeres y Situación de las Personas Vulnerables Afectadas por la Tormenta Noel en la República Dominicana* (Santo Domingo: UNFPA/INSTRAW, 2008), pp. 24-25.



Greater consensus was found on the types of vulnerabilities women experienced in the aftermath of Hurricane Mitch, including vulnerability to GBV. Overall, studies indicated:

1. Physical: lack of housing;
2. Financial: lack of regular/reliable income sources;
3. Psychological: trauma and feeling of insecurity;
4. Social: perceptions of increased levels of violence.

In the 2007 post-earthquake Peru, the majority of the GBV survivors who reported their cases were between 9 and 18 years old. According to testimonies, the majority of perpetrators were strangers who took advantage of girls' being alone, either because they left their refuges or because their parents were away working.

Trafficking, particularly of women and children, for sexual purposes is another form of GBV that may escalate in disasters. Activists and experts from Haiti recently warned about a growth in the trafficking and smuggling of persons since the earthquake. Although some documents exist on the trafficking of women and children for sexual purposes in Latin America and the Caribbean, and natural disasters are often indicated as potential triggering factors, reference to it in these contexts could be found only in relation to Haiti.

2.2 Studies and Research

The significant increase in the number, frequency and impacts of natural disasters in the last decades has resulted in a global call for disaster-risk-reduction work and analysis throughout the world. It is only since the mid-1990s, however, that there has been a proliferation of studies and research on the socio-economic factors, including gender, that exacerbate the vulnerabilities of different groups to both natural and man-made crises.

This emerging framework proved apt for examining the relationship between gender and disaster and resulted in more widespread attention to the different capacities and vulnerabilities of men and women in disaster situations. Although many references have been made to the importance of integrating a "gender perspective" into disaster management, little (if anything) has been written on GBV risk in disaster preparedness, relief and recovery. In the words of Elaine Enarson in 1998 "... pets, tourists, and cultural artefacts receive more attention than battered women in the disaster literature." Unfortunately, despite some recent efforts, the situation remains largely unchanged.

Meanwhile, the last decades have also seen a significant increase in the number of studies on sexual and other forms of GBV in the region. Among them, half are from Brazil and Mexico, where the most comprehensive studies appear to have been carried out. Although far fewer, some studies also exist for Argentina, Costa Rica, Cuba, Ecuador, Paraguay and Uruguay.

⁴⁵ Ibid., p. 40.

⁴⁶ Ibid., p. 52.

⁴⁷ Alba, W., and D. Luciano. Evaluación Rápida sobre Salud Sexual y Reproductiva, Violencia contra las Mujeres y Situación de las Personas Vulnerables Afectadas por la Tormenta Noel en la República Dominicana (Santo Domingo: UNFPA/INSTRAW, 2008), pp. 24-25.

⁴⁸ The information campaign initiated by the NGO was particularly effective in changing men's attitudes towards violence against women. Pan American Health Organization, *Genero y Desastres Naturales* (Washington, DC: PAHO, 2001).

⁴⁹ Delaney, P., and E. Shrader, *Gender and Post-Disaster Reconstruction: The Case of Hurricane Mitch in Honduras and Nicaragua*. Preliminary report commissioned by the World Bank (2000). Available from http://online.northumbria.ac.uk/geography_research/gdn/resources/reviewdraft.doc, p. 27.

⁵⁰ Wisconsin Coordinating Council on Nicaragua (WCCN) and La Red de Mujeres contra la Violencia, *Rebuilding Lives, Rebuilding Nicaragua: The importance of Emotional Recovery in the face of natural disasters and gender violence* (Madison: WCCN, 2004), p. 12. Available from <http://www.capitalforcommunities.org/node/149>.

⁵¹ Bradshaw, *Socio-Economic Impacts of Natural Disasters*, p. 33.

⁵² Wisconsin Coordinating Council on Nicaragua and la Red de Mujeres contra la violencia, *Rebuilding Lives*, p. 14.

⁵³ Bradshaw, *Socio-Economic Impacts of Natural Disasters*, p. 46.



Studies on GBV in Latin America and the Caribbean vary greatly with respect to the design, scope and methodology for data collection and analysis, and operational definitions. Domestic and intimate partner violence is by far the most researched form of GBV. Among others, the WHO Multi-country Study on Women's Health and Domestic Violence against Women and the Demographic and Health Surveys (DHS) offer some of the most comprehensive and reliable data and analysis on domestic and intimate partner violence.

Another aspect that receives considerable attention in the region is GBV in conflict situations.

Within all of these contexts, it appears that an operational investigation of GBV programming, including

emergency settings, is even newer, with only few studies looking at the support of GBV survivors, and those studies are mainly from the health perspective.

Some studies examining conflict-related GBV were found for Colombia, El Salvador, Guatemala, Haiti and Peru, among others. Studies that look specifically at GBV in disaster situations are especially limited. Some examples are Solorzano and Montoya, and Sarah Bradshaw, who investigated VAW in the aftermath of Hurricane Mitch in Nicaragua in the late 1990s. More recently, Dinys Luciano and Wendy Alba conducted studies on sexual and reproductive health and VAW affected by Tropical Storm Noel in the Dominican Republic in 2007, while GBV in post-earthquake Haiti has been subjected to some degree of research.

⁵⁴ Parra Ojeda, T., *Desastres Naturales y Violencia contra las Mujeres: El Caso del Sismo de 2007 en el Perú*, (Washington, DC: Development Connections (DCVN), 2008), pp. 6-7.

⁵⁵ Godoy, E., "Haitian Women at Increased Risk of Trafficking" (IPS, 24 September 2010). Available from <http://jdh.org/archives/14767>, retrieved 26 September 2010.

⁵⁶ See, for example, Congressional Research Service (CRS), *Trafficking in Persons in Latin America and the Caribbean* (Washington, DC: CRS, 2007); International Organization for Migration (IOM), *Exploratory Assessment of Trafficking in Persons in the Caribbean Region* (Geneva: IOM, 2005); United Nations Office on Drugs and Crime (UNODC), *Global Report on Trafficking in Persons: Human Trafficking -- A Crime that Shames Us All* (Vienna: UNODC, 2009).

⁵⁷ See http://humantrafficking.change.org/blog/view/how_haitian_teens_will_end_up_in_your_online_porn, and <http://ezinearticles.com/?The-Increased-Risk-For-Haitian-Women-of-Sex-Trafficking&id=3825571>, retrieved 26 October 2010.

⁵⁸ A contributing factor to the increased attention to women and gender roles and relations in general in disaster situations was the United Nations designation of the 1990s as the International Decade for Natural Disaster Reduction (IDNDR).

⁵⁹ See, for example, the gender database of the United Nations Development Programme Caribbean Risk Management Initiative (CRMI), available from <http://www.undp.org/cu/crmi/en/gendocs.asp>; and United Nations International Strategy for Disaster Reduction, United Nations Development Programme and International Union for Conservation of Nature (IUCN), *Making Disaster Risk Reduction Gender-Sensitive: Policy and Practical Guidance* (Geneva: UNISDR, UNDP and IUCN, 2009). A gender perspective in disaster analysis has been widely recognized as an important contribution to disaster planning, preparation and recovery. Additional resources include a compilation of good practices on the integration of a gender perspective in disaster risk reduction and climate change adaptation, including in Latin America and the Caribbean. See United Nations International Strategy for Disaster Reduction, *Gender Perspectives: Integrating Disaster Risk Reduction into Climate Change Adaptation -- Good Practices and Lessons Learned*. (Geneva: UNISDR, 2008), and *Gender Perspective: Working Together for Disaster Risk Reduction -- Good Practices and Lessons Learned*. (Geneva: UNISDR, 2007). No references to GBV in disaster situations were found in any of these documents.

⁶⁰ Enarson, E., *Surviving Domestic Violence and Disasters*. Prepared for the Freda Centre for Research on Violence against Women and Children (1998). Available from <http://www.harbour.sfu.ca/freda/reports/dviol.htm>.





3 Gender-based Violence Programming in Disasters in Latin America and the Caribbean

The Hyogo Framework for Action (HFA) 2005-2015 represents the internationally most accepted and legitimate policy document on disaster-risk reduction. The United Nations International Strategy for Disaster Reduction (UNISDR) has a regional office in Panama and it is mandated to monitor national compliance with the HFA.

To a greater extent than in other regions, governments in Latin America and the Caribbean have established structures and mechanisms to define needs, share information and training opportunities, and design and implement disaster-related projects. Yet, the ability of governments in the region to deal effectively with disasters is uneven. Disaster-management systems exist at national, subregional and regional levels, but vary greatly in effectiveness. Moreover, governments in Latin America and the Caribbean depend largely on international funding for prevention and mitigation efforts.

Four intergovernmental regional organizations are specifically mandated to deal with disasters in Latin America and the Caribbean. Additionally, a broad network of civil society organizations, NGOs, academics and representatives of governmental and international organizations form the membership of Red de Estudios Sociales en Prevención de Desastres en América Latina (LaRED), a network based in Costa Rica for social studies on disaster prevention and the dissemination of disaster-related information.

The Risk Emergency Disaster Working Group for Latin America and the Caribbean (REDLAC), created in 2003, is the primary inter-organizational mechanism for information sharing and coordination aimed at preventing and mitigating the impacts of disasters in the region. The group shares information before, during and after a disaster or emergency. It also carries out joint disaster and emergency preparedness, response and recovery activities in order to make the best possible use of existing resources.



61 Economic Commission for Latin America and the Caribbean, No More!, p. 33.

62 Contreras et al., Violencia Sexual en Latinoamérica y el Caribe.

63 Brazil and Peru were the only two Latin American countries covered by the study. World Health Organization, WHO Multi-country Study on Women's Health.

64 Contreras et al., Violencia Sexual en Latinoamérica y el Caribe, p. 10.

65 International Federation of the Red Cross and Red Crescent Societies (IFRC), "The Urgency of Equality: Ending Discrimination against Women and Its Consequences in Emergency Situations", In World Disasters Report 2007, eds. IFRC (Geneva: IFRC, 2007). The paucity of study on GBV in natural disasters in the region is further confirmed by Contreras et al., Violencia Sexual en Latinoamérica y el Caribe . It may also be interesting to note that none of the references listed in the study bibliography is about GBV in natural disasters. Contreras et al., Violencia Sexual en Latinoamérica y el Caribe , p. 37.

66 Luciano, D., Salud Sexual y Reproductiva y Violencia en Personas Vulnerables: La Tormenta Noel en Republica Dominicana (Santo Domingo: INSTRAW and UNFPA, 2008); and Alba and Luciano, Evaluación Rápida. The latter study was intended to complement the rapid evaluation conducted by UNFPA and the United Nations International Research and Training Institute for the Advancement of Women (INSTRAW), with a focus on specific vulnerable groups.



One important disaster actor in the region as well as worldwide is the International Federation of Red Cross and Red Crescent Societies (IFRC)-Americas, which works to provide support to the 35 Red Cross Societies of the Americas through the Pan American Disaster Response Unit (PADRU), based in Panama. In September 2009, IFRC launched the Global Alliance on Disaster Risk Reduction (GADRR) to support national societies to scale up efforts to reduce disaster risks. To date, five countries in the region have adhered to the alliance.

Other key regional actors with dedicated disaster programmes are the Pan American Health Organization (PAHO); the Economic Commission for Latin America and the Caribbean (ECLAC), which focuses specifically on the economic and social effects of natural disasters; and the Inter-American Development Bank.

Finally, some major NGOs active in disaster response in the Latin America and the Caribbean region are CARE, Catholic Relief Services, Oxfam, Plan International and World Vision International.

As far as GBV is concerned, in July 2010, a protection working group for Latin America and the Caribbean (Grupo de Trabajo Sectorial de Protección para América Latina y el Caribe - GTSP-LAC) was established. The group, which works under the auspices of the United Nations Development Group for Latin America and the Caribbean (UNDG-LAC) and

REDLAC, is led by the United Nations High Commissioner for Refugees (UNHCR) and includes OCHA, the Office of the High Commissioner for Human Rights (OHCHR), UNFPA, UNICEF, the Norwegian Refugee Council (NRC) and IFRC as an observer. Its mission is to facilitate an integrated effective response to protection challenges caused by complex emergencies, natural disasters and climate change. UNFPA is responsible for coordinating activities on GBV-related issues. This study is part of UNFPA efforts to enhance understanding of GBV in the context of natural disasters in the region.

Major GBV actors in the region are UNFPA, UNICEF, the United Nations Entity for Gender Equality and the Empowerment of Women (UN WOMEN), PAHO and CARE, among others. Activities vary greatly among countries and sectors of intervention and between "normal" and crisis situations. A comprehensive overview of the GBV-related activities in the region is beyond the scope of this study. The focus here is rather on the extent to which GBV has been considered in disaster situations, including preparedness, response and recovery and the role of organizations therein.

Global efforts to better integrate the issue of GBV in natural disaster situations are relatively recent. The Indian tsunami in 2004 and Hurricane Katrina in 2005 were watershed events that triggered the development of guidelines and tools aimed at ensuring a holistic intersectoral approach to this problem in disaster contexts.

67 Weiss Fagen, P., *Natural Disasters in Latin America and the Caribbean: National, Regional and International Interactions -- A Regional Case Study on the Role of the Affected State in Humanitarian Action*, Humanitarian Policy Group (HPG) Working Paper (London: Overseas Development Institute (ODI), 2008), p. 5.

68 The Caribbean Disaster Emergency Management Agency (CDEMA), the Coordination Center for the Prevention of Natural Disasters in Central America (CEPRENAC), the Andean Committee for Disaster Prevention and Response (CAPRADE) and the specialized meeting of the Common Market of the South (MERCOSUR) on Socio-Natural Disaster Risk Reduction and Humanitarian Assistance (REHU).

69 REDLAC members include UNICEF, the World Food Programme (WFP), the UNDP Bureau for Crisis Prevention and Recovery (BCPR), PAHO/WHO, the IOM, UNISDR, the United Nations Environment Programme (UNEP), UNFPA, the Food and Agriculture Organization of the United Nations (FAO) and ECLAC. In addition, IFRC as well as international NGOs such as World Vision and Plan International and Oxfam are also members. Additional information on REDLAC is available from <http://ochaonline.un.org/rolac/CoordinationTools/REDLAC/tabid/5679/language/en-US/Default.aspx>, retrieved 15 October 2010.

70 The purpose of the Global Alliance on Disaster Risk Reduction (GADRR) is to scale up IFRC efforts in reducing disaster risks among the most vulnerable communities where National Red Cross and Red Crescent Societies operate. The five National Societies that commenced working under the framework of the Alliance are Colombia, Costa Rica, Dominican Republic, Ecuador and Panama. More information on IFRC activities in the region may be found in International Federation of the Red Cross and Red Crescent Societies (IFRC), *Annual Report 2010 - Americas Zone*. Appeal No. MAA42003, 26 July 2010.





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These include the 2005 Inter-Agency Standing Committee (IASC) Guidelines for Gender-based Violence Interventions in Humanitarian Settings and the 2006 IASC Guidelines on Protecting People Affected by Natural Disasters, among others.

3.1 Disaster Funding Mechanisms and Gender-based Violence Projects

This section provides an overview of planning and funding mechanisms that are commonly found in disaster situations and the extent to which GBV-related programming has been considered therein. Reference is made to those funding mechanisms and related GBV activities that are specific to the recent natural disasters in Latin America and the Caribbean.

The Central Emergency Response Fund (CERF) is a United Nations rapid response grant aimed at ensuring timely and effective humanitarian assistance. It is intended to complement – not to replace – funding made available through mechanisms such as the Consolidated Appeals Process (CAP)/Common Humanitarian Action Plan (CHAP), flash appeals and pooled funds.

The flash appeal is a tool for structuring a coordinated response and requesting funds for the first six months of an emergency. The flash appeal provides a concise overview of urgent life-saving needs and may include recovery projects that can be implemented within the

time frame of the appeal. It is normally issued within one week of an emergency.

The CAP is a tool organized to plan, coordinate, fund, implement and monitor humanitarian activities. It consists of a CHAP and a list of projects necessary to achieve the strategy. It is important to mention that, contrary to flash appeals, CAPs are an extremely rare occurrence in Latin America and the Caribbean: for example, the Haiti CAP was the only one in the region in the last decade.

GBV is listed among the life-saving interventions that could be funded under the CERF. More specifically, there is mention of strengthening the implementation of a multisectoral response to GBV, including provision of survivor-centred services and access to secure and appropriate reporting, follow-up and protection mechanisms. However, experience of CERF financing for this type of project appears limited. Some examples are the provision of services to GBV victims in shelters in Haiti and joint UNFPA/Joint United Nations Programme on HIV/AIDS (UNAIDS) projects in Chile. Another example is the UNFPA project on the prevention of GBV and response to women's needs in border areas of the Dominican Republic in 2010. No reference to GBV projects was found in the reviewed CERF disbursements for other disasters in the region.

⁷¹ Inter-Agency Standing Committee, Propuesta de Términos de Referencia – Grupo de Trabajo Sectorial de Protección para América Latina y Caribe (Geneva: IASC, 2010).

⁷² Inter-Agency Standing Committee, Guidelines for Gender-based Violence Intervention in Humanitarian Settings and Protecting Persons Affected by Natural Disasters: IASC Operational Guidelines on Human Rights and Natural Disasters (Washington, DC: Brookings-Bern Project on Internal Displacement, 2006).

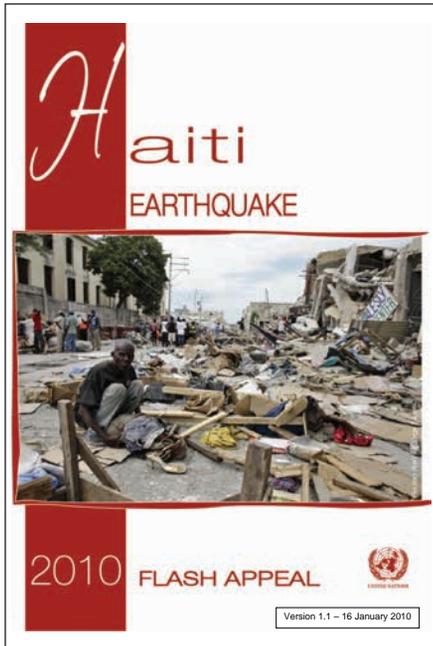
⁷³ The humanitarian response plan is the basis for projects for both the CERF request and the flash appeal. Because of rapid disbursement by the CERF, the Resident Coordinator submits the most urgent life-saving projects to the CERF secretariat while waiting for pledges against other flash appeal projects to be transferred by donors. Activities have a maximum duration of six months, but funds should be committed within three months. More information is available from <http://ochaonline.un.org/cerf/WhatistheCERF/tabid/3534/language/en-US/Default.aspx>.

⁷⁴ More information is available from <http://ochaonline.un.org/humanitarianappeal/webpage.asp?MenuID=12504&Page=1241>.



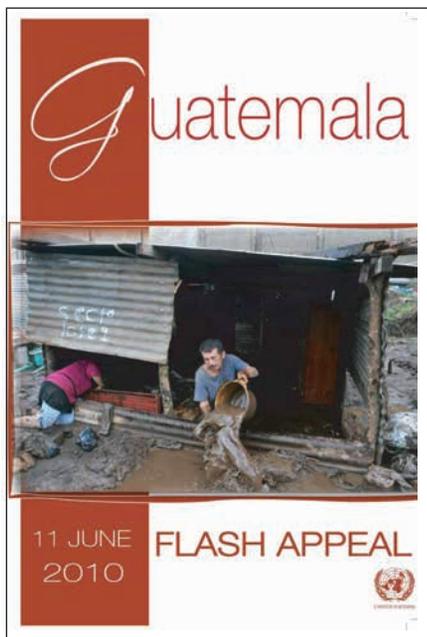
Examples of GBV-related activities put forward in flash appeals in the region include:

Haití -Flash Appeal 2010



Haiti - Earthquake (2010): GBV coordination, prevention and response (UNFPA); and coordination, prevention and response of GBV against children (UNICEF). Both projects have been well funded.

Guatemala - Flash Appeal 2010



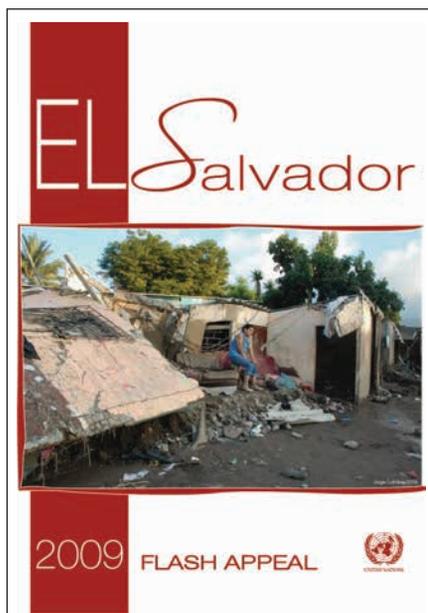
Guatemala - Tropical Storm Agatha (2010): strengthening of health services on sexual and reproductive care, GBV, sexually-transmitted infections and HIV/AIDS (UNFPA); protection shelters, services and information for girls, women and adolescents at risk of violence (International Organization for Migration (IOM)/UNFPA/UNICEF). While the first project received only 42 per cent of the required funding, the second appears to have been almost fully funded.





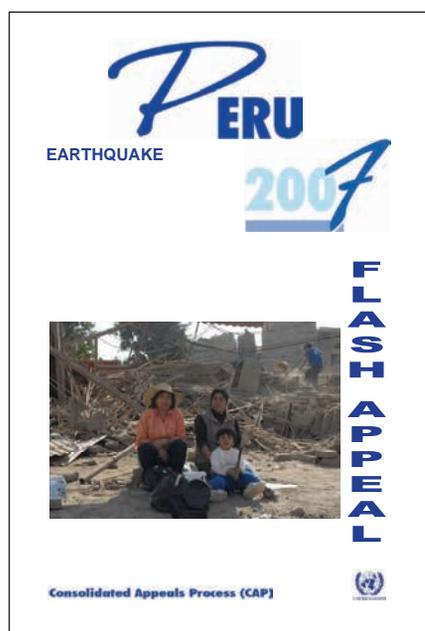
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El Salvador - Flash Appeal 2009



El Salvador - Hurricane Ida (2009): psychosocial support to children and families in the recovery phase, including the establishment of a referral system for GBV cases (UNICEF in partnership with the health sector); and child protection against abuse, violence and sexual exploitation (UNICEF). The first project received 87 per cent of the required funding, while the second received none.

Perú - Flash Appeal 2007



Peru - Earthquake (2007): prevention of violence, sexual abuse, exploitation, abduction and trafficking (UNICEF); and community safe places for women and girls, and the provision of legal, medical and psychosocial information and services (UNFPA). Interestingly, funding for both these projects exceeded the requirements, 215 per cent for the first, and 118 per cent for the second, respectively.



Dominican Republic - Flash Appeal 2007



Dominican Republic - Tropical Storms Noel and Olga (2007): prevention of violence and sexual abuse against children in shelters (UNICEF); provision of legal, medical and psychosocial information and services to survivors of GBV (UNFPA); capacity-building on GBV for emergency workers, by UNFPA and the United Nations International Research and Training Institute for the Advancement of Women (INSTRAW); assessment of GBV (INSTRAW). Unlike most of the projects listed above, these were poorly funded.

⁷⁵ Central Emergency Relief Fund, Life-saving criteria (2010). Available from ochaonline.un.org/OchaLinkClick.aspx?link=ocha&docId=1163693.

⁷⁶ Besides GBV issues not having been taken into account, other possible reasons may include the fact that the actual trend in humanitarian response does not consider GBV as a priority compared to food, shelter or other humanitarian needs, or the fact that GBV may be integrated into other projects and thus not visible. In any case, there is not enough available information to draw any conclusion.

⁷⁷ In Chile a total of only 2 per cent of the 10 million USD was granted to the UNFPA/UNAIDS project. See Abarca, H., Sistematización del Proceso de Diseño e Implementación del Componente para VIH y SSR en el Proyecto CERF de Apoyo a la Respuesta a la Emergencia por el Terremoto y Tsunami en Chile (2010), p. 23.

⁷⁸ Overall, countries reviewed included Chile, Dominican Republic (also in relation to Olga and Noel), El Salvador, Guatemala, Haiti and Peru. More information on the CERF activated in these contexts is available from

<http://ochaonline.un.org/cerf/CERFFararoundtheWorld/CERFProjectsaroundtheWorld2010/tabid/6406/language/en-US/Default.aspx>, retrieved 26 October 2010.

⁷⁹ Funding status as of 15 October 2010 available from <http://fts.unocha.org/pageloader.aspx?page=emerg-emergencyDetails&appealID=893>, retrieved 25 October 2010.

⁸⁰ For more information on the 2010 flash appeal for Tropical Storm Agatha in Guatemala and related financial status refer to <http://fts.unocha.org/pageloader.aspx?page=emerg-emergencyDetails&appealID=899>, retrieved 25 October 2010.

⁸¹ For more information on the 2010 flash appeal for Hurricane Ida in El Salvador and related financial status refer to <http://www.reliefweb.int/rw/fts.nsf/doc105?OpenForm&rc=2&cc=slv&yr=2009>, retrieved 25 October 2010.



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Although the above provides just a snapshot of the GBV activities implemented in the context of only a few, relatively recent natural disasters in the region, some general observations can be made.

- UNFPA and UNICEF are by far the major actors on GBV in the region, with the highest and most significant activities put forward on this topic. This, while also reflecting the roles and responsibilities of these two entities at the global level, is also attributable to a series of other reasons. First, there is a general tendency not to include protection issues in flash appeals in the region due to their intrinsic sensitive nature. Second, UNHCR has a limited presence in the region, and there is little willingness by other actors to assume responsibility on protection-related issues. Thus, health and shelter sectors are the most common entry points for GBV activities. In this challenging context, it is foreseen that the protection working group for Latin America and the Caribbean will enable humanitarian actors to address this situation.
- Another observation relates to the overall framework of GBV-related interventions. Whereas the UNICEF focus is on sexual violence and abuse of children, UNFPA projects are targeted to women, including adolescent and young girls, and are often in the context of, or associated with, sexual and reproductive health interventions, including interventions aimed at reducing the spread of HIV and AIDS.
- Despite of the needs to address GBV, activities targeted to children and youth seem to have been better received (and funded) than activities targeted to women. This is further confirmed by the findings of some studies in the Dominican Republic and Peru.

- Finally, evidence shows greater attention to the issue of GBV in natural-disaster situations in the last year by both humanitarian organizations and donor institutions. With the exception of activities planned in response to Tropical Storms Noel and Olga in the Dominican Republic, natural-disaster response in the region was generally well funded, and some funding for disasters, such as those in Peru, even exceeded the requirements. In terms of percentages, however, it is only in the recent disasters in Haiti and Guatemala that GBV activities represented a significant portion of the overall flash appeal funding (13.8 and 10.8 per cent, respectively), while proportions were much lower in the other reviewed countries.

One tool that deserves to be mentioned for its potential to increase accountability (and funding) of both humanitarian organizations and donors for including gender considerations in their response interventions, including addressing GBV, is the “Gender Marker”. Currently rolled-out in 11 countries, the Marker is a tool that codes, on a 0-2 scale, whether or not a project has the potential to contribute to gender equality, and it predicts the degree of results in this respect. Key users of the Gender Marker are the clusters and respective project teams who can use this tool as a means to ensure gender-sensitive project design. Codes will also be included in the Financial Tracking System for donors to consider in their funding decisions.

The following pages explore the extent to which GBV has been integrated in the three phases of the disaster-management cycle: preparedness, response and recovery.

⁸² For more information on the 2007 flash appeal for the earthquake in Peru in 2007 and related financial status refer to <http://www.reliefweb.int/rw/fts.nsf/doc105?OpenForm&rc=2&cc=per&yr=2007>, retrieved 25 October 2010.

⁸³ For more information on the 2007 flash appeal for Tropical Storm Noel in Dominican Republic in 2007 and related financial status refer to <http://www.reliefweb.int/rw/fts.nsf/doc105?OpenForm&rc=2&emid=TC-2007-000198-DOM>, retrieved 25 October 2010.

⁸⁴ Source: discussion with UNFPA LACRO representatives.

⁸⁵ See footnotes 74 and 75 for reference.



3.2 Disaster Preparedness

Effective GBV interventions must begin during disaster preparedness and continue through response and recovery. A clear appreciation of the extent of GBV, vulnerable groups and key triggering factors in “normal” circumstances is critical to improve the capacity to prevent and respond to it in times of crisis. Preparedness typically includes contingency planning, early warning and activities such as capacity development and education, awareness-raising and information dissemination.

According to the IASC GBV guidelines, during the emergency preparedness phase, a number of actions should be taken before the emergency hits that will enable rapid implementation of minimum prevention and response to GBV in the early stages of the emergency. Actions are organized by cross-cutting functions and sectors of intervention; they include, for example, mapping of vulnerable groups prior to the disaster, pre-positioning of post-rape kits and other relevant items, distribution of information on existing prevention and response mechanisms, and capacity-building of key actors to prevent, mitigate and respond to GBV risks in the context of the disaster. Unfortunately, though, little evidence exists of these actions having actually been integrated in disaster preparedness.

The HFA recognizes the need to integrate a gender perspective into all disaster risk management policies, plans and decision-making processes, including those related to risk assessment, early warning, information management, and education and training. Gender-based inequalities and the

needs and concerns of women, men, girls and boys in disaster situations are also integrated into the “Words Into Action: A Guide for Implementing the Hyogo Framework”, which defines the tasks that should guide the implementation of the Framework. Gender is listed among the guiding principles for implementing disaster risk reduction. Yet, GBV as one of the possible concerns in emergency caused by natural disasters is not specifically mentioned in any HFA documents.

Only one reference was found in relation to an initiative by PAHO, IFRC, UNISDR and the Association of Caribbean States on the sensitization of communities on disaster risks. It consists of a radio soap opera for the English-speaking Caribbean called “The Rough Season”, which depicts situations that one might expect in a typical Caribbean disaster scenario, including domestic and intimate partner violence.

GBV is neither mentioned nor prioritized in contingency planning frameworks and activities at global, regional and national levels. More specifically, the revised IASC Contingency Planning Guidelines calls for “Raising awareness on prevention of sexual exploitation and abuse”, under the section on “Implementing Preparedness”, and contains a generic reference to human rights abuses in the annex on “Hazard and Risk Analysis”. A review of other guidance materials on disaster preparedness showed a similar picture. This seems to be the case also for most contingency and preparedness plans at the national level. Specific reference to the lack of integration of GBV in contingency planning was found, for example, in relation to the 2007 storm season in the Dominican Republic.

⁸⁶ In the Dominican Republic, funded GBV activities represented only 0.23 per cent of the overall flash appeal funding; in Peru, 2.92 per cent; and in El Salvador, 3 per cent.

⁸⁷ Inter-Agency Standing Committee, Guidelines for Gender-Based Violence Interventions in Humanitarian Settings.

⁸⁸ United Nations International Strategy for Disaster Reduction, Hyogo Framework for Action 2005-2015. The HFA was formulated as a comprehensive, action-oriented response to international concern about the growing impacts of disasters on individuals, communities and national development. It was adopted by 168 Governments at the World Conference on Disaster Reduction, held in Kobe, Hyogo Prefecture, Japan, 18-22 January 2005. Subsequently, Words into Action: A Guide for Implementing the Hyogo Framework (2007) was developed to guide the implementation of the Framework Priorities for Action. More information on the Hyogo Framework for Action and related documents is available from <http://www.unisdr.org/eng/hfa/hfa.htm>.

⁸⁹ For an overview of the UNFPA role and activities within the framework of disaster risk reduction that have contributed to the Hyogo priorities, see <http://www.preventionweb.net/english/professional/contacts/profile.php?id=1291>, retrieved 26 October 2010.

⁹⁰ SO on preparedness, priority 3 of the Hyogo Framework calls for building a culture of safety and resilience through public awareness and education on disaster risk reduction strategies. For more information on initiatives that contribute to this priority in the Latin America and Caribbean region see United Nations International Strategy for Disaster Reduction, Words into Action: A Guide for Implementing the Hyogo Framework (Hyogo, UNISDR, 2007), p. 78.





Early warnings and information management are key means aimed at improving preparedness and response in the event of disasters. The Caribbean Risk Management Initiative (CRMI) and the Regional Disaster Information Centre, while encouraging the integration of a gender perspective into risk management and having gender as a specific search key, have few references to publications and resources on GBV in natural disasters. This, however, is in line with the paucity of resources on this issue and does not necessarily reflect a lack of attention by the managing institutions. Evidence of this is a CRMI initiative called Enhancing Gender Visibility in Disaster Risk Management and Climate Change in the Caribbean, which resulted in a series of country assessments specifically focused on gender issues in Disaster Risk Reduction and climate change. References to GBV risks were found, for example, in the country assessment

for the Dominican Republic. However, more could be done to integrate additional resources on GBV in disaster situations and/or to increase the visibility of the linkages between GBV and other resource platforms.

Another important aspect is institutional strengthening on GBV within the disaster-management cycle. This involves building the capacity of relief staff, institutions and service providers at both international and national levels to ensure the integration of gender and GBV issues into disaster-risk reduction and response policies, strategies and practices. Moreover, the legal response to all forms of GBV and the integration of GBV into disaster-prevention and mitigation laws and regulations is an area in which significant improvements are needed. In most countries GBV is not reflected in any of the judicial



⁹¹ In at least one (“No place like home”) of 10 episodes, the author refers to domestic violence in disaster situations. Additional information on this initiative can be found at <http://www.eird.org/eng/educacion/radionovela-caribe/radionovela-caribe-ing.htm>, retrieved 26 October 2010.

⁹² See <http://www.humanitarianinfo.org/iasc/pageloader.aspx?page=content-subsidi-common-default&sb=14>, retrieved 26 October 2010.

⁹³ Luciano, Salud Sexual y Reproductiva.

⁹⁴ The Regional Disaster Information Centre (Centro Regional de Información sobre Desastres América Latina y el Caribe, CRID) is a joint effort by six organizations to ensure the dissemination of disaster-related information in Latin America and the Caribbean. These organizations are: PAHO, UNISDR, the Costa Rica National Risk Prevention and Emergency Commission, IFRC, Coordination Centre for Natural Disaster Prevention in Central America (CEPRENAC) and the regional office of Doctors Without Borders.

⁹⁵ Existing country assessments are available from <http://www.undp.org/crmi/en/gendocs.asp#td>, retrieved 26 October 2010.



instruments of the national systems for risk management, mitigation, or disaster response; whereas women machineries are not found among the members of the disaster/risk management committees either at the national or at the municipal levels, posing important challenges in establishing synergies and in putting in place collaboration and coordination systems to address GBV-related matters.

Besides addressing the gaps in judicial reform around GBV, activities to address existing gaps may include: strengthening GBV-related social and organizational support structures through building on the knowledge and capacities of local actors and building on local resources, including social capital; and developing skills on GBV in relief response at all levels, thus strengthening the relief-development continuum. Again, although there are various examples of gender-sensitive risk management training, reference to GBV specifically is rarely found among training and courses on the subject.

3.3 Acute Emergency and Response Phase

In the aftermath of disasters, it is common for national and international aid actors to prioritize basic needs such as food, housing, health, water and other goods and services that are geared towards meeting basic survival needs. Without disregarding these urgent necessities, such aid actors have increasingly considered other needs and concerns for their life-saving potential, including prevention of and response to GBV. As per the IASC Guidelines on Protection in Natural Disasters, appropriate measures should be taken as early as possible to protect affected populations against trafficking, forced labour, forced marriage, forced prostitution and other

forms of GBV. The already-cited IASC GBV Guidelines provide guidance on the implementation of minimum prevention and response actions in the early phase of an emergency.

On the basis of the limited operational investigations on programming in disaster response in the region, GBV needs and concerns of those affected by disasters are generally not high (if at all) on the agenda of humanitarian organizations. Thus, not only are traditional support and protection mechanisms, such as courts, hospitals, police stations and other services inaccessible or disrupted due to the disaster but also there is a general lack of attention to the issue by those providing assistance.

Information on GBV-related programmes during Tropical Storm Noel in the Dominican Republic shows the invisibility of VAW in the eyes of intervening organizations. The majority did not develop any intervention on it, assuming it was a normal component of women's life prior and after the disaster. Where it existed, attention was limited to issues such as post-traumatic stress and other emotional problems, which were considered a direct result of the trauma generated by the disaster. Among the identified limitations were the incapacity of organizations, particularly health, to register, identify and refer cases of VAW to the relevant organizations, and the absence of a unified documentation system. Although informants admitted that VAW was a problem prior, during and after the storm, the above-mentioned factors as well as the limited capacity of organizations to prioritize, identify and address GBV issues possibly

⁹⁶ See, for example, International Federation of the Red Cross and Red Crescent Societies, *Gender Perspective*.

⁹⁷ Inter-Agency Standing Committee, *Protecting Persons Affected by Natural Disasters*, p. 19.

⁹⁸ IASC, *Guidelines*.

⁹⁹ Enarson, *Surviving Domestic Violence and Disasters*; Alba and Luciano, *Evaluación Rápida*, p. 40





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contributed to its exacerbation. Violence against children and adolescents on the contrary received more attention. Similar challenges were highlighted in relation to the earthquake in Peru in 2007.

To compensate for this, REDLAC is revising its rapid assessment methodology, contributing stronger language and an emphasis on measuring GBV issues, including trafficking, sexual violence and SEA for improved programming on this.

Findings also suggest that service delivery on GBV, particularly in the health sector, is often given priority over prevention efforts. For the latter, the most commonly referred tools are information and educational campaigns to raise awareness of GBV and its various manifestations through radio, TV, print and theatre. Besides the soap opera for Caribbean countries mentioned in the disaster preparedness section,

in Haiti radio spots on GBV prevention are regularly broadcast across the country.

Haiti represents an exception that does not find parallel with other disaster situations in the region. Besides the unprecedented level of GBV funding (13.8 per cent), other unique aspects include the promptness of efforts to increase access to medical, police, legal and psychosocial services through the dissemination of referral cards and leaflets; efforts to build on and strengthen existing national monitoring and reporting mechanisms on GBV by: bridging with Concertation Nationale Contre les Violences Faites aux Femmes and other civil society partners; establishing subnational working groups; and organizing joint security assessments and day/night patrols of camps. Yet, humanitarians have been variously criticized for their lack of attention to risks such as SEA (see later discussion on this chapter).



Some good steps that were made to address GBV in post-Mitch Nicaragua included:

- Government's social/gender audit immediately after Hurricane Mitch to assess differentiated impact, including GBV issues.
- Government's social/gender audit six months afterwards to assess who was included and excluded from relief.
- Establishment of the commission of psychosocial development (1999-2001) to support the emotional recovery of the people affected. Given that the subject of violence was present in all the groups and workshops, the incorporation of this subject into the work of the commission was fundamental in terms of the emotional recovery of all participants.

Despite the key role of IFRC in disaster management both in the region and worldwide, a review of documents and interventions did not suggest emphasis on GBV as a key area of concern. For example, the 2010 Annual Report for the Americas Zone contains only one reference to activities implemented by PADRU, in partnership with UNFPA, to address GBV in shelters in the Caribbean, and only generic reference to the potential of domestic and other forms of violence was found in the Chile, Haiti and Peru earthquake appeals. It is important to note that although the IFRC Global HIV Alliance (and related activities at regional and country levels) looks at tackling GADRR or with respect to disaster-related activities and plans in the region. Nevertheless, GADRR calls for mainstreaming disaster interventions into IFRC structures and programmes, including HIV, thus paving the way for a more integrated approach to the issue of GBV also





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in disaster settings. A step in this direction may be the recent integration of PADRU into the Americas Zone structure as a way to enhance a more holistic approach to disaster management.

Evidence from various disaster situations shows that whether or not an organization sought or had the capacity to address GBV in a particular location was often dependent on previous GBV work. Issues such as the existence of prevention and response mechanisms, services and skills prior to the disaster are critical in determining how much attention will be paid to this problem when a disaster hits. Other influences include how well established an organization

was in the area prior to the disaster, the existence of capable local partners, the presence of staff with knowledge of or interest in GBV issues, and the role of local activism in drawing attention to the needs of those at risk.

GBV coordination mechanisms at local, national and regional levels also play a key role in catalysing attention to the problem and ensuring adequate response. For example, a recent report on the earthquake in Chile acknowledges that the creation of the regional subcluster on GBV facilitated the initiation and monitoring of an adequate response to the problem by the responsible agencies.



¹⁰⁰ Alba and Luciano, *Evaluación Rápida*, p. 77. See also Luciano, *Salud Sexual y Reproductiva*, pp. 57-59.

¹⁰¹ Parra Ojeda, *Desastres Naturales*, p. 11.

¹⁰² United Nations, *Haiti Humanitarian Appeal Mid-Year Review, June 2010 (2010)*, p. 80.

¹⁰³ *Ibid.*, p. 79.

¹⁰⁴ Wisconsin Coordinating Council on Nicaragua and La Red de Mujeres contra la violencia, *Rebuilding Lives*, p. 15.

¹⁰⁵ References to GBV were found in very few documents, in general terms and with a predominant focus on children. For example, the International Federation of Red Cross and Red Crescent Societies, *Community-Based Psychosocial Support Training Kit (Copenhagen, IFRC, 2009)* refers to sexual abuse and GBV of both adults and children. Available from <http://psp.drk.dk/sw40688.asp>, retrieved 26 October 2010. Drawing on the success of the Canadian Red Cross programme "RespectED: Violence and Abuse Prevention," the Guyana Red Cross developed a programme called "Be Safe" in collaboration with local and international child protection agencies. Following attempts to further check these findings with some IFRC actors in the region, no response has been received.

¹⁰⁶ International Federation of Red Cross and Red Crescent Societies, *Annual Report 2010*.



As far as global initiatives are concerned, a study undertaken in 2008 by the GBV Area of Responsibility (AoR) documenting GBV coordination structures in humanitarian settings reveals inconsistencies and inadequacies in these mechanisms throughout the world. Recent initiatives aimed at enhancing GBV coordination in emergency situations, including natural disasters, are:

1. The post-Haiti development of project-sheet templates to enhance coordination in flash appeals and CAPs on gender, GBV and Protection from Sexual Exploitation and Abuse (PSEA).
2. The creation of a separate GBV experts roster within GenCap for deployment in the early phase of sudden-onset emergencies.
3. The publication of a GBV Coordination Handbook by the Gender-Based Violence AoR under the global Protection Cluster to provide guidance on establishing

and leading a GBV coordination body in humanitarian settings, including natural disasters.

4. The Coordination of Multi-Sectoral Response to Gender-Based Violence in Humanitarian Settings International Training Course organized by the GBV Network.
5. The e-learning course "Managing Gender-based Violence Programmes in Emergencies", also from the GBV Network.
6. The GBV Information Management System (GBVIMS).

Although their effectiveness is yet to be established, these initiatives certainly have the potential to prompt better coordination of GBV in humanitarian settings and to increase attention to GBV issues in disaster management.





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3.3.1 Does Aid Heighten the Risk of Gender-based Violence?

People's vulnerability to GBV can also increase as a result of humanitarian interventions. Not only do poorly designed and gender-insensitive interventions put women and girls at greater risk of GBV (e.g., by placing latrines in dark and unsafe areas in camp settings) but, as evidence in recent years has shown, dependency on aid can make women vulnerable to SEA by humanitarian workers. To this end, specific gender standards have been developed to prevent such occurrences.

Below are some examples of interventions that may increase vulnerability to experiencing GBV among people affected by disasters.

- The location and set-up of shelters and facilities can affect the perceived and actual safety of a displaced population, particularly women and children. Safe access to bathing and sanitary areas is always a concern in displacement camps. A report from CARE on the flood in Bolivia in 2006 highlights the security concerns of women and children in the poorly lit camps in San Julian. In Barahona and Azua



¹⁰⁷ For the appeals see http://www.ifrc.org/where/americas.asp?navid=05_03, retrieved 29 October 2010.

¹⁰⁸ GBV is spelled out in output 3, Reducing Stigma and Discrimination, key strategy 3, Tackling Gender Inequalities and Sexual and Gender-Based Violence. International Federation of Red Cross and Red Crescent Societies, Global Alliance on HIV (Geneva: IFRC, 2006).

¹⁰⁹ A review of both the International Federation of Red Cross and Red Crescent Societies Andean Plan 2009-2010 and the Annual Plan for the Americas suggests that GBV is considered only in the context of HIV and AIDS.

¹¹⁰ International Federation of Red Cross and Red Crescent Societies, Global Alliance on Disaster Risk Reduction (Geneva: IFRC, 2009), p. 8.

¹¹¹ International Federation of Red Cross and Red Crescent Societies, Plan 2009-2010 Andean Region, South America (Lima: IFRC, 2009).

¹¹² Fisher, S., "Gender-Based Violence in Sri Lanka in the Aftermath of the 2004 Tsunami Crisis: The Role of International Organizations and International NGOs in Prevention and Response to Gender-Based Violence" (Dissertation, University of Leeds, 2005). A similar argument can be found in Abarca, Sistemización del Proceso de Diseño, p. 27.

¹¹³ *Ibid.*, p. 16.

¹¹⁴ Although the templates were developed by the IASC Gender Standby Capacity (GenCap) adviser in Haiti, they are intended for wider dissemination and application in humanitarian settings. They were provided by the GenCap Secretariat in Geneva.



(the Dominican Republic), informants reported an increase in the level of VAW, whereas in other storm-affected areas the accommodation of people in casa de familias and shelters monitored by the community was actually indicated as a protective factor against violence.

- The lack of privacy in accommodations could also contribute to an increase in domestic violence. As some female survivors of the tsunami in Sri Lanka



reported, there was an increase in violence as women were reluctant to have sex because of proximity to children and neighbours.

The logistics of aid distribution, such as the location of distribution points and distribution arrangements, may also have important implications for GBV. For example, some men may find it difficult to accept that women are the recipients of aid in a time in which men are not able to secure food and other basic goods for their families. Difficulties in terms of men's self-perceived ability to meet social expectations around the role of males as providers for the household could lead to psychological tension, loss of self-esteem, idleness and possibly violent behaviour.

The economic vulnerability that women experience in many societies before and after a disaster may make them particularly dependent upon disaster relief, thus enhancing their vulnerability to various forms of abuse and exploitation.

Ensuring that well-trained and gender-sensitive female and male security and law enforcement personnel are accessible to the population in camps can contribute to greater reporting and a better capacity to address and respond to incidents of GBV. Similarly, access to well-trained and gender sensitive female and male doctors and other health personnel is critical.

¹¹⁵ The GenCap project seeks to build the capacity of humanitarian actors at the country level to mainstream gender-equality programming, including prevention and response to GBV in all sectors of humanitarian response. It currently consists of a pool of 26 gender advisers at a P-4/ P-5 level to be deployed on short notice as an inter-agency resource to support the United Nations Humanitarian/Resident Coordinators (HC/RC) humanitarian country teams and cluster/sectors leads in the initial stages of sudden-onset emergencies as well as in protracted or recurring humanitarian situations. In September 2010 the establishment of a separate GBV roster within GenCap was initiated to strengthen coordination on this issue in emergencies. See <http://oneresponse.info/crosscutting/GenCap/Pages/GenCap.aspx>, retrieved 26 October 2010.

¹¹⁶ VGBV AoR, Global Protection Cluster, Handbook for Coordinating Gender-based Violence Interventions in Humanitarian Settings (2010). oneresponse.info/.../GBV/.../GBV%20Handbook%20Long%20Version%5B1%5D.pdf.

¹¹⁷ See <http://cdu.unlb.org/Statistics/StatusofInvestigationsSexualExploitationandAbuse.aspx>, retrieved 27 October 2010.

¹¹⁸ CARE, CARE's Emergency Response to the Flood Disaster in Bolivia (CARE, 2006). Available from <http://www.globalgiving.com/pfil/1383/projdoc.pdf>.





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Sexual Exploitation and Abuse by Humanitarian Workers

SEA is one of the most vicious forms of GBV that may occur in emergency situations as it is perpetrated by those mandated to assist the affected population. When a disaster happens, humanitarian workers have money and other resources, information and authority to make strategic life-saving decisions. The responsibility to use this power to advance the safety, dignity and integrity of the assisted population rests on every aid worker.

In an effort to address SEA by humanitarian workers, the IASC Task Force on Protection from Sexual Exploitation and Abuse in Humanitarian Crises, composed of United Nations entities and NGOs, was established in March 2002. It developed agreed definitions of sexual exploitation and sexual abuse and adopted standards of behaviour to be included in United Nations and NGO codes of conduct. In this regard, the United Nations has developed a series of policies concerning SEA in response to allegations that such acts had been committed by peacekeeping and humanitarian personnel.

¹¹⁹ Luciano, *Salud Sexual y Reproductiva*, p. 46.

¹²⁰ Available from <http://cdu.unlb.org/Policy/SexualExploitationandAbusePolicy.aspx>

¹²¹ This term refers to the risk of negative consequences of reconstruction responses and projects, including rape and domestic violence. Delaney, Patricia, and Elizabeth Shrader. "Gender and Post-Disaster Reconstruction: The Case of Hurricane Mitch in Honduras and Nicaragua." Decision review draft presented to the World Bank (2000).



3.4 Secondary Outcomes and Recovery

Addressing GBV in the disaster management cycle is key to ensuring that "second-generation disasters" are prevented or mitigated. As far as this study is concerned, this involves responding to GBV acts and minimizing the risks and exposure to further violence in the early and long-term recovery phases.

In contrast to the paucity of guidance and tools on GBV in disaster preparedness, various tools look into GBV issues and concerns in the recovery phase. Besides the IASC GBV Guidelines, the 2008 IASC early recovery guidance contains several references to GBV needs and concerns for recovery activities in areas such as social services, livelihoods and income recovery, shelter, security and the rule of law. Another important tool that pulls together information on the impacts of a disaster, and related early and long-term recovery needs and priorities, is the Post-Disaster Needs Assessment and Recovery Framework. The United Nations Development Programme (UNDP), under the auspices of the Cluster Working Group on Early Recovery (CWGER), has developed a needs assessment for recovery and a gender-equality guide, which details questions to facilitate the collection of quantitative and qualitative baseline data on GBV to inform the planning, design and implementation of country-specific recovery activities.

Yet, the application of these tools in disaster situations is less straightforward. Very few studies (and programmes) have looked into the GBV situation among populations living in protracted displacement contexts post-disaster, and/or vulnerability to GBV due to the so-called secondary outcomes of the

disaster such as migration, impoverishment, abandonment and dependence on decreasing aid.

Just a few months into a disaster, funds begin to tighten, and fewer resources are available for resilience-building, follow-up activities and monitoring. The dilemma between increased demand and reduced (or lack of) resources has been recorded by Enarson, who writes that "while needs persist long after the crisis, the 'sympathy factor' behind many immediate donations is generally short-lived".

Nonetheless, as soon as the basic survival needs are somehow met, other problems start to come to light. In the words of those working in the psychosocial commission in Nicaragua, "when we started doing the workshop with women, we saw that the problem was a lot bigger than Mitch. It had to do with poverty, abandonment, interfamily violence, the war." It was only in the years that followed the hurricane (1999-2001) that women started opening up about issues such as unresolved grief, rage, depression and constant feelings of hopelessness due to violence in their home.

A study conducted four years after Hurricane Katrina devastated the coasts of Louisiana and Mississippi in 2005 finds that the rate of new cases of GBV among displaced women living in trailers increased from 4.6/100,000 per day in August 2005 (when the hurricane hit) to 16.3/100,000 per day in 2006. Moreover, although a reduction to 10.1/100,000 was registered in 2007, the rate did not return to baseline during the protracted phase of displacement.

¹²² Cluster Working Group on Early Recovery, *Guidance Note on Early Recovery* (Geneva: CWGER, 2008).

¹²³ More information on early recovery guidance and tools available from <http://onerresponse.info/GlobalClusters/Early%20Recovery/Pages/Tools%20and%20Guidance.aspx>, retrieved 26 October 2010.

¹²⁴ United Nations Development Programme/Bureau for Crisis Prevention and Recovery, "Post-Crisis Needs Assessment for Recovery and Gender Equality. A Guide," Draft for Discussion (Geneva: CWGER, 2009). Available from <http://onerresponse.info/GlobalClusters/Early%20Recovery/Pages/Tools%20and%20Guidance.aspx>.

¹²⁵ Enarson, E., *Responding to Domestic Violence in Disaster: Guidelines for Women's Services and Disaster Practitioners* (Vancouver: Disaster Preparedness Resources Centre, University of British Columbia, 1997), p. 12.

¹²⁶ Wisconsin Coordinating Council on Nicaragua and La Red de Mujeres contra la Violencia, *Rebuilding Lives*, p. 16.

¹²⁷ Anastario, M., N. Shehab and L. Lawry, "Increased Gender-based Violence among Women Internally Displaced in Mississippi 2 Years Post-Hurricane Katrina". In *Disaster Medicine and Public Health Preparedness* (3): 1 (2009), pp. 18-26. Abstract available from http://www.ama-assn.org/ama/no-index/news/dmphp-two-studies.shtml?WT.rss_ev=a&WT.rss_f=American+Medical+Association+News+and+Events&WT.rss_a=AMA+Journal+Releases+Two+New+Studies.





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Overall, findings from this study confirm that the rate of GBV, particularly intimate partner violence, increased in the years following Katrina. Unfortunately however, the scarcity of comparable data from other disaster situations makes any generalization difficult.

In recovery situations, women are universally found to be more vulnerable than men for many reasons. Some research found that women suffer more psychological health problems from disasters than men do. Identified sources of stress are the additional burden of caregiving, the economic stress that takes over family harmony and may lead to increase domestic violence, migration, abandonment and consequent disruption of family ties. Another issue of grave concern is the need for adequate and safe housing for evacuees during reconstruction.

The Nicaraguan psychosocial commission provided a good example of how these issues have been taken into account. The long-term commitment and work of the commission (1999-2001) was key to support the healing and the recovery of empowerment and self-esteem of those experiencing violence.

The Haiti earthquake Post-Disaster Needs Assessment also contains specific reference to activities aimed at ensuring the safety of the affected population in the recovery and reconstruction phase. Implementation, however, has yet to be verified.

Below are possible GBV risks associated with the above-mentioned secondary outcomes of disasters that should be taken into account when designing and planning recovery interventions.

- Migration in a search for work of one or more household members is a common phenomenon in disaster situations. Migration can lead to an increase in the level of violence for the following reasons: either women are left behind and have to assume the headship of the household, at times without subsistence resources, as those have been sold to support the migration process; or women who migrate find themselves without the traditional family and community protection mechanisms and may be exposed to violence or resort to sex work.



¹²⁸ Luciano, *Salud Sexual y Reproductiva*, p. 46.

¹²⁹ Wisconsin Coordinating Council on Nicaragua and La Red de Mujeres contra la Violencia, *Rebuilding Lives*.

¹³⁰ Haiti, *Post Disaster Needs Assessment: Assessment of Damage, Losses, General and Sectoral Needs* (Port au Prince: Government of Haiti, 2010), p. 40.

¹³¹ Contreras, et al., *Violencia sexual*, p. 34.



The few data that exist on this in the region indicate that violence is particularly common in bordering areas. On the border between Guatemala and Mexico, 70 per cent of the women indicated suffering some form of violence, while three out of four sexual workers were temporary migrants from El Salvador, Honduras or Nicaragua. Although the data does not necessarily refer to post-disaster migration, it is important to note that a disaster can be an important trigger of migration and can further increase the vulnerability of women to GBV in the context of migration.

- Lack of economic opportunities compounded with additional responsibilities – including financial – that women may have to take on as a result of the loss of their partners or relatives in a disaster situation may increase their vulnerability to impoverishment and may lead to negative consequences, such as forced marriage, trafficking and sex work. Women often lack land and access to and control over other resources that may help them to better cope with the effects of the disaster. Economic dependency on others may also lead women and girls into forced prostitution or they may be coerced into having sex in order to meet their basic needs, such as food, shelter and security.
- In addition, some research has also looked into the potential for an increase in intra-household tensions and violence due to the participation of women in

reconstruction processes. There is evidence of the fact that during crises and disaster situations women are capable of developing complex strategies of survival for their families and themselves. They create resilience and participate actively in reconstruction and normalization processes. Nevertheless, women's participation in reconstruction initiatives, while creating opportunities for positive changes, may also lead to an increase in the level of intra-household violence and intimate partner violence. Again, data from Nicaragua suggests that although women's roles and responsibilities did not change as a result of their participation in reconstruction activities, some upsurge in the level of violence in households was reported by women. However, the existence of a clear correlation was found between the perceptions of problems with the reconstruction projects and the perceived level of tension within the household, saying that those who were particularly disillusioned about the project were also lamenting a negative impact of the projects on their relationships. This observation, together with inconsistencies in the reports of increased violence in the population surveyed, led to the conclusion that it is not possible to establish a clear correlation between the participation of women in reconstruction projects and VAW in the households; rather, participation must be considered coupled with the multiple socio-cultural factors of gender dynamics in order to have a positive impact in protecting from and addressing GBV.





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4 Challenges in Gender-based Violence Research and Practice in Natural Disasters

Besides the general lack of attention to the issue of GBV in natural disasters mentioned above, some other hindering factors to any assessment exercise on this issue include difficulties in establishing direct cause-and-effect relationships between levels of violence and potentially complex and long-standing events such as natural disasters. As Enarson points out, in the absence of comprehensive surveys on the subject, researchers rely on indicators such as requests for support and protection received and/or handled by existing services. This, however, may not provide a good picture in situations where the majority of services may be disrupted by the disasters or may not have a record-system in place that will allow the identification of disaster-relevant calls.

The disruption of existing services, which makes the documentation of cases difficult in the early phase of the crisis, is often compounded by a general lack of adequate funding to properly investigate, document, and follow up on reported cases.

Although it is commonly recognized that GBV often exists prior to the disaster, dismal camp conditions, lack of attention to the issue by those providing assistance and the disruption of existing prevention and response mechanisms due to the disaster make women and girls more vulnerable to sexual and other forms of GBV, including intimate partner violence. Yet, does GBV actually increase as a consequence of the disaster? As Enarson suggests, this may not be the right question to ask. Documenting empirically the extent of GBV as a

result of a disaster is a difficult undertaking. While in fact cause-and-effect relationships between certain aspects that are commonly found in disaster situations and GBV can be easily made, the lack of reliable, comprehensive data on GBV in the pre-disaster context can result in mere speculation.

Many countries in Latin America and the Caribbean do not have sufficient data on GBV. Where surveys have been done, indicators are often not standardized or comparable. Moreover, the quality of data on GBV is generally known for being poor. Technical inefficiencies in capturing and recording incidents as well as discrepancies among different data collection and analysis methodologies make it difficult to make definitive statements on the level of violence over time and across societies, and related variations in disasters. In the absence of mechanisms for surveillance, policymakers throughout the region (and elsewhere) tend to rely on data systems (police, courts, shelters, health centres) that are neither equipped nor intended to monitor the scope of GBV. The already mentioned limited capacity of health organizations to identify, document and refer cases of GBV in the aftermath of Tropical Storm Noel in the Dominican Republic is one example of this problem. This is why reference to people's perceptions, feelings and anecdotes is often the best source of data and commonly found as the basis on which conclusions are drawn on the extent of GBV in disaster situations.

Underreporting is another major challenge to any data collection exercise on GBV. In "normal times",

¹³² Bradshaw, Socio-Economic Impacts of Natural Disasters, p. 42.

¹³³ Bradshaw, S., Dangerous Liaisons: Women, Men and Hurricane Mitch (Managua: Puntos de Encuentro, 2001). English/Spanish bilingual publication, pp. 78-86.

¹³⁴ Enarson, Responding to Domestic Violence in Disaster, p. 10.





sexual abuse is known for being the single most underreported crime throughout the world. Some argue that reporting may decrease even further during and following a disaster.

Aside from the psychological and emotional challenges of being doubly victimized by both the disaster and the violence and having to prioritize

practical needs, for many people a range of practical difficulties may act as barriers to reporting. Not only issues such as limited mobility, lack of information about what exists where and its accessibility, and fear of retaliation are likely to increase in the event of widespread damage, but also the capacity may not be there to handle cases in the immediate aftermath of a disaster.

¹³⁵ Ibid, p. 10

¹³⁶ Economic Commission for Latin America and the Caribbean, No More!, p. 29.

¹³⁷ See, for example, Wilson, J., B. Phillips and D. Neal, "Domestic Violence after Disaster". In *The Gendered Terrain of Disaster*, eds. E. Enarson and B. H. Morrow, pp. 115-123 (London: Praeger, 1998); Bradshaw, *Socio-Economic Impacts of Natural Disasters; and Economic Commission for Latin America and the Caribbean, ¡Ni Una Más!*.

¹³⁸ Krug, E. G., et al., "Violence by Intimate Partners." In *World Report on Violence*, ed. World Health Organization (Geneva, WHO, 2002).

¹³⁹ Institute for Justice and Democracy in Haiti et al., *Our Bodies Are Still Trembling*.

¹⁴⁰ Ibid, p. 13

¹⁴¹ According to a study conducted five months after Tropical Storm Noel hit the Dominican Republic, although most of the respondents reported that services were functioning as normal, about 45 per cent of the women did not know about the existence of services on violence against women. Luciano, *Salud Sexual and Reproductiva*, pp. 57 and 65.



NATURAL DISASTERS: GENDER-BASED VIOLENCE SCENARIOS

According to a recent investigation by the Institute for Justice and Democracy in Haiti (IJDH), most of the rape cases were dramatically underreported. Women indicated that reporting cases to the police is an exercise in futility. The reasons were varied. Some women reported that they could not identify their assailants. Moreover, since rape carries a stigma in Haiti –as in many other countries–, many women were reluctant to reach out for support. Finally, some women indicated that the perpetrators threatened them with further harm or even death if they told anyone about rape. This, coupled with impunity, creates a fundamental deterrent to reporting.

In the Dominican Republic, the lack of information about existing health services was one of the main reasons that prevented women from accessing and utilizing them. A study on VAW conducted in post-earthquake Peru in 2007 reveals that of all the cases for which evidence was collected, none was disclosed to the police. Fear of reprisal by perpetrators resulted in both parents' and adolescent survivors' remaining silent about sexual violence. Unfortunately, lack of disclosure also resulted in the survivors' not receiving any medical aid in the immediate aftermath of the abuse.

Another important issue related to reporting GBV cases is the delay. According to experts, delays are due to a combination of stigma, confusion and the prioritization of other needs.

Finally, another issue of concern is the weak relationship that often exists between humanitarian actors

that mobilize in the immediate aftermath of an emergency and those international and national structures and services that existed prior to the disaster and that are likely to take over in the recovery phase. The problem here is twofold: on one side, there is the lack of linkages between development and humanitarian organizations and the modus operandi, which, in practical terms, translates into a lack of consideration of disaster situations in GBV policies and programming, and lack of reference to GBV in disaster risk management, respectively. On the other side, there is the general incapacity of humanitarian organizations to engage GBV actors at the national and grass-roots levels when planning and implementing GBV programming in disaster situations. Importantly, representatives of national women's groups are rarely engaged in any phase of the disaster management. This is particularly key in Latin America and the Caribbean, where capacity at local and national levels is higher than in other regions of the world.

All of the above often results in little knowledge about the context prior to the disaster, duplication of efforts and poor sustainability beyond the acute response phase. According to a recent CERF evaluation, for example, there was little evidence of engagement with women's associations at the grass-roots level by United Nations agencies during implementation of the CERF-funded response to the 2007 Peru earthquake.



PART 3

How to Move Forward on Prevention and Response to Gender-based Violence in Natural Disaster Situations

5 Conclusions and Recommendations

5.1 Conclusions

GBV in emergencies caused by natural disasters is a largely neglected area of concern both globally and regionally, lacking attention by both disaster-management and international GBV players. Not only do few studies exist on the possible linkages between GBV and disaster situations but also very few programmes have been implemented to address GBV in disaster response and recovery. The main gaps are in the area of disaster preparedness, with essentially no mention of GBV-related issues in either contingency planning or early warning. On the other side, disaster recovery appears more mindful of the need to address and mitigate GBV among the affected population.

Among the identified hindering factors are the absence of intersections between traditional GBV actors and those in charge of disaster management and the general lack of attention to GBV in humanitarian settings, including emergencies caused by natural disasters. In addition to this, lack of synergies between humanitarian and development actors and between international and locally based capacities was also identified.

Underlying this in the region is the assumption that GBV, particularly domestic and intimate partner violence, is a component of women's life prior and after the disaster and thus does not necessitate specific attention.

Other limitations include the lack of capacity of organizations to identify and address GBV cases and the absence of a unified documentation system.

Finally and positively, reviews of recent disasters suggest some prospects for greater attention by both humanitarian organizations and donor institutions to the issue of GBV in natural-disaster situations in the region.

5.2 Recommendations for Research and Programming: Priorities and Ways Forward

The need to prioritize the collection and systematization of information on the linkages between GBV and natural disasters is clear. This section contains several recommendations on activities that could be promoted by relevant actors to contribute to, and in combination with, further research on the topic.

- Continue efforts for a coordinated approach to GBV analysis and programming in disaster situations in the region initiated through the establishment of the protection working group for Latin America and Caribbean GTSP-LAC, particularly by the GBV area led by UNFPA.
- Advocate for civil society groups and non-traditional disaster actors, such as national and municipal offices for women and women's groups, to be included in disaster-related coordinating committees and decision-making bodies.
- Explore opportunities to advance in engagement with custodians of cultural norms, such as village and

142 Parra Ojeda, *Desastres Naturales*, p. 8.

143 Klein, A., *Sexual Violence in Natural Disasters: A Planning Guide for Prevention and Response* (Hammond, Enola: Louisiana Foundation against Sexual Assault (LaFASA), National Sexual Violence Resource Center (NSVRC), 2008).

144 Barber, M., et al., *CERF Two Year Evaluation - Final Report* (July 2008), 2008. Available from www.reliefweb.int/rw/RWFiles2008.nsf/.../EDIS...report.../full_report.pdf.

faith-based organizations, to strengthen advocacy on GBV prevention and their potential participation in service delivery.

- Further promote efforts for the harmonization of GBV data collection and analysis and incidents recording by all humanitarian actors in the region through the enhancement of existing data collection systems or, for example, the roll-out of the newly created GBVIMS in targeted countries.
- Continue strengthening the capacities for the deployment of GBV advisers to disaster-hit countries in the region to foster GBV coordination at national and local levels, build capacity of locally based actors on GBV and promote the creation of synergies between disaster and GBV experts, thus creating the conditions for GBV issues and concerns to be better identified and addressed.
- Maintain efforts to ensure a comprehensive approach to addressing GBV in the region. Of particular relevance would be integrating GBV in legislation, policies and plans on prevention, mitigation and attention to disasters as well as ensuring that national legal frameworks, plans and protocols on VAW also address GBV that occurs in emergency situations. Further strengthening of law enforcement mechanisms and practices as well as the justice sector response is also needed.
- Promote and strengthen efforts to enhance institutional capacity at all levels to prevent and mitigate GBV across the whole disaster manage

ment cycle, and advocate for the inclusion of GBV as a specific focal area in upcoming disaster-risk reduction (and climate change) gatherings and forums at regional and country levels.

- Build the understanding and capacity of disaster actors at regional and national levels to identify and integrate GBV issues in disaster preparedness, response and recovery both at policy and programmatic level. This could be done through, for example, the integration of GBV issues in existing disaster-risk reduction training and guidance materials, with a particular focus on those promoted at the regional level and through regional structures or the promotion of training initiatives such as the virtual course on Gender and Disaster by Development Connections.
- Strengthen collaboration and opportunities for exchange between GBV actors at regional and local levels and existing coordination and existing information-sharing platforms, such as the REDLAC.
- Undertake further research on existing models and practices for community-level work on GBV in disaster-prone areas, such as sensitization on GBV-related issues and the equal involvement of men and women in preventing GBV in hazard-management activities.

LIST OF ACRONYMS

AoR	Area of Responsibility
BCPR	Bureau for Crisis Prevention and Recovery (UNDP)
CAP	Consolidated Appeals Process
CAPRADE	Comité Andino para la Prevención y Atención de Desastres (Andean Committee for Disaster Prevention and Relief)
CARICOM	Caribbean Community Secretariat
CATW-LAC	Coalición Regional contra el Tráfico de Mujeres y Niñas en América Latina y El Caribe (Regional Coalition against Women and Girls Trafficking in Latin America and the Caribbean)
CDC	Centers for Disease Control and Prevention
CEPREDENAC	Centro de Coordinación para la Prevención de los Desastres Naturales en América Central (Coordination Centre for Natural Disaster Prevention in Central America)
CERF	Central Emergency Response Fund
CHAP	Common Humanitarian Action Plan
CIM	Comisión Interamericana de las Mujeres (Inter-American Commission of Women)
CISCSA	Centro de Intercambio y Servicios Cono Sur Argentina (Exchange and Services Centre Southern Cone Argentina)
CRID	Centro Regional de Información sobre Desastres América Latina y El Caribe (Regional Disaster Information Centre Latin America and the Caribbean)
CRMI	Caribbean Risk Management Initiative
CWGER	Inter-Agency Cluster Working Group on Early Recovery
DHS	Demographic and Health Survey
DRR	Disaster Risk Reduction
DVCN	Development Connections (USA)
ECLAC	Economic Commission for Latin America and the Caribbean
FAO	Food and Agriculture Organization of the United Nations
FGM/C	Female genital mutilation/cutting
GADRR	The Global Alliance on Disaster Risk Reduction (IFRC)
GBV	Gender-based violence
GBVIMS	Gender-Based Violence Information Management System
GDN	Gender and Disaster Network
GenCap	IASC Gender Standby Capacity
GETSA	Gestión y Tecnología en Salud y desarrollo (Health and Development Management and Technology) (Argentina)
GTSP-LAC	Grupo de Trabajo Sectorial de Protección para América Latina y el Caribe (Protection Sectorial Working Group for Latin America and the Caribbean)
HFA	Hyogo Framework for Action
IASC	Inter-Agency Standing Committee
IDB	Inter-American Development Bank
IFRC	International Federation of the Red Cross and Red Crescent Societies
IJDH	Institute for Justice and Democracy in Haiti
IMC	International Medical Corps

INSTRAW	United Nations International Research and Training Institute for the Advancement of Women
IOM	International Organization for Migration
IPS	Inter Press Service
IRC	International Rescue Committee
IRHS	International Reproductive Health Survey
IUCN	International Union for Conservation of Nature
KOFAVIV	Commission of Women Victims for Victims (Haiti)
LAC	Latin America and the Caribbean
LaFASA	Louisiana Foundation against Sexual Assault
NGO	Non-governmental organization
NRC	Norwegian Refugee Council
NSVRC	National Sexual Violence Resource Center (USA)
OAS	Organization of American States
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
OHCHR	Office of the High Commissioner for Human Rights
PADRU	Pan American Disaster Response Unit (IFRC)
PAHO	Pan American Health Organization
REDLAC	Risk, Emergency, and Disaster Task Force Inter-Agency Workgroup for Latin America & The Caribbean
REDHUM	Red de Información Humanitaria para América Latina y el Caribe (Humanitarian Information Network for Latin America and the Caribbean)
SEA	Sexual Exploitation and Abuse
SEPREM	Secretaría Presidencial de la Mujer (Presidential Secretariat of Woman) (Guatemala)
SVRI	Sexual Violence Research Initiative
VAW	Violence against women
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNEP	United Nations Environment Programme
UNFPA LACRO	United Nation Population Fund Latin America and the Caribbean Regional Office
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNIFEM	United Nations Development Fund for Women
UNISDR	United Nations/International Strategy for Disaster Reduction
UN WOMEN	United Nations Entity for Gender Equality and the Empowerment of Women
VAW	Violence against women
WCCN	Wisconsin Coordinating Council on Nicaragua
WFP	World Food Programme
WHO	World Health Organization

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Caribbean Community. <http://www.caricom.org/>

Centro Regional de Información sobre Desastres America Latina y Caribe (CRID). <http://www.crid.or.cr/crid/index.shtml>

GBVIMS. <http://gbvims.org/>

Gender and Disaster Network (GDN). <http://www.gdnonline.org/index.php>

Humanitarian Information Network for Latin America and the Caribbean (REDHUM). <http://www.redhum.org/index.php>



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LA RED. <http://www.desenredando.org/>

OCHA Regional Office for Latin America and the Caribbean (RO-LAC).
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Prevention Web. <http://www.preventionweb.net/english/countries/>

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United Nations Population Fund

