

Towards gender equality in humanitarian response:  
**Addressing the needs of  
women & men in Gaza**

A guidebook for the humanitarian sector



The UN Development Fund for Women (UNIFEM) in the occupied Palestinian territory (oPt) provides financial and technical assistance to innovative programs and strategies to foster women's empowerment and gender equality. Placing the advancement of women's human rights at the centre of all of its efforts, UNIFEM focuses its activities on three strategic areas: (1) economic security and rights aimed at reducing feminized poverty, (2) women's rights, particularly focused on the fight to ending violence against women, and (3) achieving gender equality in democratic governance in times of peace as well as war.

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UNIFEM occupied Palestinian territory

# FOREWORD

Conflict and violence today spare no one, but it is important to remember that they affect men, women, boys and girls in different ways. The population of the Gaza Strip is suffering from a long, drawn-out conflict, interspersed with periods of intense internal violence and exacerbated by the ongoing blockade of goods into the Strip. All these factors have resulted in a state of deep deprivation which has had devastating effects on large segments of the civilian population.

Whether the violence is internal or cross-border, civilians are all too often caught in the firing line, directly targeted or endangered by the proximity of the fighting. Both men and women are vulnerable to conflict, but they are often exposed to different risks and therefore have different needs.

Throughout the history of conflict in the Gaza Strip, the multiple roles women play have come to form the lifeline of their communities: heading households, raising children, sustaining subsistence livelihoods, and caring for the sick, wounded, and elderly. Women have been at the forefront of developing day-to-day survival strategies for their families. Insufficient access to basic services, along with high levels of unemployment and poverty, are factors which lead to despair and frustration and which strain women's coping mechanisms.

As professional humanitarian workers, including field practitioners, team leaders and policy-makers, our primary responsibility lies in ensuring that the assistance and protection we provide meets the needs of all the population equally, that their rights are protected and that those most affected by the crisis receive the support they need. It is our responsibility to respect them, as well as help restore their confidence and dignity which is often destroyed by crisis. Above all, we must not exacerbate their situation, cause more stress or expose them to new threats. In conclusion, the provision of humanitarian assistance should ensure equal opportunities for all so that our assistance is properly targeted.

Having gained experience all over the world, the UN System recognizes the importance and the absolute need to take into consideration the gender dimensions in delivering emergency and humanitarian response.

This guidebook is the outcome of integrating a product as well as a process oriented approach, based on UN Inter-Agency and NGO community collaboration. The outcome is based on the IASC gender handbook, the UN Inter-Agency gender needs survey conducted in the aftermath of the 23-day Israeli military operations in Gaza during December, 2008 and January, 2009, followed by focus group discussions carried out by UNIFEM in cooperation with GenCap Adviser deployed in the oPt. It has been a consultative exercise undertaken jointly by OCHA and UNIFEM with the cooperation of humanitarian sector representatives.

This guidebook offers real and practical guidance for identifying and addressing the differing needs and situations of women, girls, boys and men for the humanitarian sectors operating in the Gaza Strip. Understanding gender differences, inequalities and capacities improves aid effectiveness and ensures that the assistance corresponds to the international legal framework for humanitarian response.



**Maxwell Gaylard**

*UN Humanitarian Coordinator for the occupied Palestinian territory*

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Special thanks go to the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), whose involvement was crucial to producing the guidebook in a participatory manner, involving the Humanitarian Country Team (HCT) sector/clusters\* leadership in improving the questionnaire for the focus group discussions and revising the draft of the guidebook, making valuable technical contributions.

The following sector/clusters have contributed to the development of this guidebook: Agriculture, Protection, Child Protection, Education, Food Security and Nutrition, Health (including Disability), Early Recovery (Livelihoods), Shelter and Non-Food Items, Mental Health, and Water and Sanitation.

In addition to the following agencies and organizations

Association for Development of Palm and Dates (ASDPD), Care International, Food and Agriculture Organization (FAO), CHF International, Handicap International, Norwegian Refugee Council (NRC), Mercy Corps, OXFAM, Office for the Coordination of Humanitarian Affairs (OCHA), Office of the High Commissioner for Human Rights (OHCHR), Palestinian Center for Democracy and Conflict Resolution (PCDCR), Palestine Tomorrow, Right to Live Society, Save the Children Sweden, Society of Friends, United Nations Children's Fund (UNICEF), United Nations Development Programme (UNDP), United Nations Educational, Scientific and Cultural Organization (UNESCO), United Nations Population Fund (UNFPA), United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), USAID, Women's Affairs Center (WAC), Women's Affairs Technical Committee (WATC), World Food Programme (WFP), and World Health Organization (WHO).

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Our gratitude goes out to Shareef Sarhan in Gaza for allowing the use of his photographs for the purpose of this publication.

Lastly, the publication of this guidebook would not have been possible without the participation of the population of Gaza. Special thanks are justly afforded to them for their willingness and participation in the focus group discussions.

\* The Humanitarian Country Team (HCT) led by the Humanitarian Coordinator (HC), with the support of the Office for the Coordination of Humanitarian Affairs (OCHA) has the overall responsibility for response coordination in the occupied Palestinian territory (oPt). The HCT is comprised of UN agencies, the Red Cross/Red Crescent Movement and NGO representatives.

# INTRODUCTION

The already grave humanitarian situation caused by the 18-month-long blockade of the Gaza Strip was compounded by Israel's 23-day military offensive in December, 2008 and January, 2009. The war led to the displacement of an estimated 100,000 people at the height of the conflict, the death of 1,366 people, amongst them 430 children and 111 women, and the injury of over 5,380 people, including 1,870 children and 800 women. The large-scale internal displacement of civilians was made more traumatic by the fact that civilians could neither leave the field of war, nor find secure and safe haven from aerial bombardment, even in United Nations installations. Public infrastructure and essential services already strained as a result of the blockade have worsened due to the damage resulting from the war. The dramatic deterioration of the Gaza Strip has further worsened conditions for its inhabitants, both in terms of material losses and psychological distress caused by the violence.

The social and economic repercussions of this state of crisis are spread across all sectors of Gazan society, but are also mediated by men and women's gender roles and identities. Paying attention to gender issues or putting on a gender lens means recognizing the different needs, capacities and contributions of women, girls, boys and men, shaped by their different gender roles and responsibilities. Ignoring or being blind to these differences can mean that the specific needs of some segments of the population are overlooked or that issues that have implications for the whole society are ignored, sometimes with destructive consequences. In the rush to provide humanitarian assistance, the appeal to pay attention to gender issues may seem irrelevant. However, it is crucial to ensure that the most necessary and appropriate assistance is offered across the population and to the population as a whole.

The main framework for this guidebook is built on the Inter-Agency Standing Committee (IASC) Gender Handbook on Humanitarian Action: Women, Girls, Boys and Men - Different Needs, Equal Opportunities.\* Main concepts and relevant frameworks from the IASC handbook were adapted to the context of the Gaza emergency using two main bodies of data. The first is the findings of the gender needs assessment survey, *Voicing the Needs of Women and Men in Gaza*, conducted by the UN Inter-Agency Gender Task Force in March, 2009. Main issues that arose from that survey were subsequently fleshed out in a series of focus group discussions with men, women, boys and girls in various communities in Gaza in April and May, 2009, organized by UNIFEM. The findings of the focus groups form the core of the data addressed in this guidebook. The guidebook sets forth standards for the integration of gender issues from the outset of a complex emergency. It aims to enable humanitarian services to reach their target audience with the maximum positive effect while minimizing exacerbation or inadvertent exposure to risk.

## Purpose

This guidebook aims to provide actors in Gaza with guidance on gender analysis, planning and actions to ensure that the needs, contributions and capacities of women, girls, boys and men are considered in all aspects of humanitarian response. It also offers checklists to assist in monitoring gender equality programming. The guidelines focus on major cross-cutting issues and areas of work in the early response phase of emergencies. The guidebook is also a useful tool to make sure gender issues are included in needs assessments, contingency planning and evaluations. It can be used as a tool to mainstream gender as a cross-cutting issue within sectors/clusters. If used correctly, this guidebook will help promote the ultimate goal of protecting and promoting the human rights of women, girls, boys and men in the context of humanitarian action as well as advance the goal of gender equality. **The phrase “women, girls, boys and men” as used throughout this guidebook refers to young and old across the life cycle.**

## Audience

The target audience for this guidebook are field practitioners responding to the humanitarian crisis in Gaza. In particular, the guidebook targets sector/cluster actors. The Humanitarian Country Team, Humanitarian Coordinator and others in leadership positions will also benefit from the handbook as it provides guidance on how to analyze the situation from a gender perspective, implement gender-sensitive activities and measure effectiveness. The guidebook will also assist donors in holding humanitarian actors accountable for integrating gender perspectives and promoting equality in all aspects of their work.

## Structure

This guidebook is divided into two main sections:

The first section includes the Basics of Gender in Crisis and sets forth the overarching framework of gender equality programming in humanitarian action. It defines terms and explains the relevance of gender equality in crisis situations.

The second section provides sector- and cluster-specific guidance. UNIFEM, OCHA and GenCap Adviser in the oPt have organized consultative meetings with the humanitarian sector/clusters, international NGOs and the UN Gender Task Force in Jerusalem and Gaza to comment on the draft of these chapters. Each was also asked to develop the specific actions proposed to ensure gender equality programming in their sectoral area of responsibility.

Each chapter is divided into the following parts:

Introduction	A brief overview of gender issues related to the sector.
Gender Analysis	A series of questions on what to look for or ask so that programmes are designed and implemented with sensitivity to the different needs of women, girls, boys and men.
Actions	Specific actions to ensure gender equality programming.
Checklist	A checklist for monitoring gender equality programming. The checklists are derived from the actions section in each chapter, and are useful tools to remind humanitarian actors of key issues to ensure gender equality programming. In addition, the checklists, together with the sample indicators in the Basics of Gender in Crisis chapter, serve as a basis for project staff to develop context-specific indicators to measure their progress in incorporating gender issues into humanitarian action.



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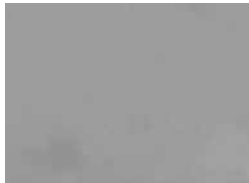
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SECTION ONE  
A MATTER OF PRINCIPLE



1

# THE BASICS OF GENDER IN CRISIS

## I. Why Does Gender Matter in Crisis Situations?

The Gaza crisis situation has profoundly different impacts on women, girls, boys and men. They face different risks and are thus affected in different ways. Here are some other ways of understanding why gender issues matter in crisis situations:

**Women and men have different concerns and bring different issues to the table:** When analysing a situation, who you consult with has implications not only for what you hear and understand, but also for what your response options are likely to be. This may be stating the obvious, but experience to date shows that gender aspects of crises are often overlooked and invisible when interventions are planned without consulting women.

Women and men often highlight different concerns and bring different perspectives, experiences and solutions to the issues. They also have differing perceptions and concerns regarding culturally acceptable practices. A clear and accurate picture of a situation cannot be attained if 50% or more of the population has not been consulted, as it can mean that 50% of the information needed is missing.

**The UN Inter-Agency Gender Task Force Survey (April, 2009) found that men showed much greater concern over housing and land ownership (33%) compared to women (23%), while women put higher emphasis on the lack of access to justice for legal custody, especially female headed households (29%) in comparison to men (11%).**

**Gender roles and power dynamics change in times of crisis:** Effective humanitarian interventions must not only consider the different needs and capacities of women and men. Equally important are the power relations that affect their respective abilities to access support. Often women take on new roles or step into a vacuum left by men. In a humanitarian crisis, men may not be able to play their traditional role as provider and may have great difficulty in dealing with their inability to protect their family from harm. These changes in gender roles can create significant tensions between women and men when the crisis subsides into a household routine.

Adopting a community participatory approach involving both women and men is essential in order to equally address these difficulties and formulate and implement interventions to address the change required in power dynamics in a culturally acceptable way. While social norms and religious beliefs must be treated with respect, we should also keep in mind that cultural sensitivity does not outweigh the mandate and legal obligation that humanitarian workers have to all members of an affected population.

**Analysis of a 2005 Palestinian Central Bureau of Statistics (PCBS) survey showed causal links between male unemployment and experiences of military and domestic violence (Birzeit Women's Studies/ World Bank, 2009).**

## II. Does Consideration of Gender Equality Matter in Humanitarian Response?

In life and death situations, is the question of gender equality a luxury? That is what many people think. However, in reality, equality is neither a luxury nor a matter of giving privileges to women over men, or vice versa. Gender equality is about ensuring that the protection and assistance provided in emergencies is planned and implemented in a way that benefits women and men equally, and is based on an analysis of their differing needs as well as capacities.

In many instances, attempting to integrate principles of equality into programmes requires the active involvement and support of men. Otherwise, the risks can have negative consequences. For example:

- Women may be faced with an added burden of responsibility and perhaps risk backlash from men;
- Threats or risks facing men may not be adequately understood or addressed;
- Men may not take women's participation seriously, which can place women in a more difficult situation.

Men may lose some of their status and authority as crisis situations radically affect social, political and economic structures, changing women's and men's status. Men who have been the traditional leaders and wielders of power may resent the interference of women in the typical male domains of providing security to the family, bringing food to the household or engaging in economic activity. Understanding the nuances of masculinity in the contexts of each situation and gaining the support of men for involvement of women and youth in traditionally male activities is crucial to the success and sustainability of the humanitarian response.

Finally, gender equality is a critical step towards achieving sustainable early recovery and development. Crisis situations often provide a window of opportunity for addressing gender-based discrimination and rights violations. If humanitarian interventions are not planned with gender equality in mind, not only do the chances of doing greater harm increase, but the opportunity to support and promote equality in livelihoods between women and men can be lost.

### III. Framework for Gender Equality Programming

The following framework for gender equality programming is a tool to use with project staff working at the sector level to review their projects or programmes with a gender equality lens. The order of the steps in the framework may vary from one situation to another. However, all nine steps of the framework should be taken into account by deliverers of humanitarian protection and assistance in order to validate that the services they provide and support they give in emergencies meet the needs and concerns of women, girls, boys and men in an equal manner.

Below is a description of the elements of the framework as well as some sample activities and indicators that can be measured to assess the degree to which gender Issues have been mainstreamed into a particular sector. Actors working in specific humanitarian situations should refer to the checklists at the end of each chapter to plan their projects and create site-specific gender indicators that should be routinely monitored and reported on.

#### Framework for Gender Equality Programming for Use by Sector Actors

**Analyse gender differences.**  
**Design services to meet needs of all.**  
**Ensure access for women, girls, boys and men.**  
**Ensure equal participation.**  
**Train women and men equally.**  
**Address gender-based violence (GBV) in sector programmes.**  
**Collect, analyse and report sex- and age-disaggregated data.**  
**Target actions based on a gender analysis.**  
**Coordinate actions with all partners.**

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**ADAPT AND ACT COLLECTIVELY TO ENSURE GENDER EQUALITY**

**Analyse:** Analyse the impact of the humanitarian crisis on women, girls, boys and men. Be certain, for example, that all needs assessments include gender issues in the information gathering and analysis phases, and that women, girls, boys and men are consulted in assessment, monitoring and evaluation processes.

**Design Services:** Design services to meet the needs of women and men equally. Each sector should review the way they work and make sure that women and men can benefit equally from the services.

**Ensure Access:** Make sure that women and men can access services equally. Sectors should continuously monitor who is using the services and consult with the community to ensure that all are accessing the services.

**Ensure Participation:** Ensure women, girls, boys and men participate equally in the design, implementation, monitoring and evaluation of humanitarian response, and that women are in decision-making positions. If it is problematic to have women on committees, put in place mechanisms to ensure that their voices are brought to the committees.

**Train:** Ensure that women and men benefit equally from training or other capacity-building initiatives offered by the sector actors. Make certain that women and men have equal opportunities for capacity building and training, including opportunities for work or employment.

**Address Gender-based Violence:** Make sure that all sectors take specific actions to prevent and/or respond to gender-based violence. The IASC Guidelines for Gender-based Violence Interventions in Humanitarian Settings should be used by all as a tool for planning and coordination.

**Disaggregate Data by Age and Sex:** Collect and analyse all data concerning the humanitarian response by age and sex breakdown. Analyse the differences and use them to develop a profile of at-risk populations and how their needs are being met by the assistance sector.

**Targeted Actions:** Based on the gender analysis, make sure that women, girls, boys and men are targeted with specific actions when appropriate. Where one group is more at-risk than others, special measures should be taken to protect that group. Examples could include the provision of safe spaces for women and girls in camps as well as measures to protect boys and men from political violence.

**Coordinate:** Set up gender support networks to ensure coordination and gender mainstreaming in all areas of humanitarian work. Sector actors should be active in coordination mechanisms.

#### V. Why are sex- and age-disaggregated data important in crisis situations?

**Sex- and age-disaggregated data should be collected and analysed routinely to understand the impact of the humanitarian response on the total population.**

Unless we know who is affected — women or men, girls or boys — and who among them is the most at risk, the services we provide may be off-target. Data on the population affected by the crisis should always be broken down by age and sex and other relevant factors such as refugee/non-refugee or urban/rural. Sex- and age-disaggregated data of single-headed households, people with disabilities, orphans and victims of violence should be collected to ensure that their gender-specific needs are being addressed.

Data on who benefits from assistance during an emergency should also be reported by sex and age. Without this breakdown it is impossible to ascertain who benefits from assistance or if it is reaching the population proportionately. For example, if 100% of participants in cash-for-work activities are women, we would ask why men are not represented. Good data and good analysis are key to identifying which groups are being marginalized and for what reasons.

## Key Definitions

**Gender** refers to the social differences between females and males throughout the life cycle that are learned, and though deeply rooted in every culture, are changeable over time, and have wide variations both within and between cultures. Gender, along with class and race, determines the roles, power and resources for females and males in any culture. Historically, attention to gender relations has been driven by the need to address women's needs and circumstances, as women are typically more disadvantaged than men. Increasingly, however, the humanitarian community is recognizing the need to know more about what men and boys face in crisis situations.

**Gender equality** or equality between women and men, refers to the equal enjoyment by women, girls, boys and men of rights, opportunities, resources and rewards. Equality does not mean that women and men are the same, but that their enjoyment of rights, opportunities and life chances are not governed or limited by whether they were born female or male.

**Gender roles** are learned behaviours in a given society, community, or other special group that condition which activities, tasks and responsibilities are perceived as male and female. Gender roles are affected by age, class, race, ethnicity, religion and by the geographical, economic and political environment. Changes in gender roles often occur in response to changing economic, natural or political circumstances.

**Gender mainstreaming** is a globally recognized strategy for achieving gender equality. The Economic and Social Council of the United Nations defines gender mainstreaming as the process of assessing the implications for women and men of any planned action, including legislation, policies or programmes, in all areas and at all levels. It 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.

**Gender analysis** examines the relationships between females and males and their access to and control of resources, their roles and the constraints they face relative to each other. A gender analysis should be integrated into the humanitarian needs assessment and in all sector assessments or situational analyses to ensure that gender-based injustices and inequalities are not exacerbated by humanitarian interventions and that, where possible, greater equality and justice in gender relations are promoted.

**Gender balance** is a human resource issue. It is about the equal participation of women and men in all areas of work (international and national staff at all levels, including in senior positions) and in programmes that agencies initiate or support (e.g. food distribution programmes). Achieving a balance in staffing patterns and creating a working environment that is conducive to a diverse workforce improves the overall effectiveness of our policies and programmes, as well as enhances agencies' capacity to better serve the entire population.

**Gender-based violence** 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 females and males. The nature and extent of specific types of GBV vary across cultures, countries and regions. Examples include sexual violence, sexual exploitation and abuse, forced prostitution, domestic violence, trafficking, forced or early marriage, harmful traditional practices such as female genital mutilation and honour killings.

## INTERNATIONAL LEGAL FRAMEWORK

The international legal framework for humanitarian assistance and protection is primarily composed of three interrelated and mutually reinforcing bodies of treaty law: international human rights, humanitarian and refugee law. These three bodies share a common goal aimed at preventing and relieving suffering as well as protecting the rights and freedoms of women, girls, boys and men. Armed conflict often exacerbates discrimination and inequalities, further impeding progress towards gender equality and women's full realisation of their human rights.

Protection for women in times of conflict is enshrined in international humanitarian law (IHL), which is binding on both States and armed opposition groups. This body of law, which includes the Fourth Geneva Conventions of 1949 and their two Additional Protocols of 1977, provides protection for women as civilians and as captured or wounded combatants. Many of its rules constitute customary law and are therefore binding on all parties to an armed conflict, whether they have ratified the relevant treaties or not.

Women benefit from the general protection afforded by IHL. Along with the rest of the protected population, they must be able to live free from intimidation and abuse. In addition, IHL includes a specific protection regime for women, primarily in respect to their health and hygiene needs and their role as mothers.

Human rights law and refugee law provides further protection for women in times of violence.

Human rights treaties, several UN resolutions and world conferences have sought to strengthen the protection and promotion of women's human rights. These include:

- The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), which was adopted in 1979 to reinforce the provisions of existing international instruments aimed at eliminating discrimination against women and achieving gender equality;
- The 1995 Beijing World Conference on Women, which provides strategic objectives to address the impact of armed conflict on women;
- Security Council resolution 1325 (2000), which recognizes the importance of bringing women's perspective to conflict and post-conflict situations, including: negotiating peace agreements, planning refugee camps and peacekeeping operations, and reconstructing war-torn societies. It emphasizes that civilians, particularly women and children, account for the vast majority of those negatively affected by conflict and calls for measures to ensure that women are more equally represented in all stages of interventions aimed at bringing peace and reconstructing war-torn societies;
- The Guiding Principles on Internal Displacement, which provide states, the UN and other human rights and humanitarian actors with important guidance related to the protection of internally displaced persons against arbitrary displacement, offer a basis for protection and assistance during displacement and also set out guarantees for safe return, resettlement and reintegration. The Principles pay particular attention to gender related problems common in situations of internal displacement and guarantee: (i) freedom from gender-specific violence; (ii) the right to non-discrimination and equality, including employment and economic activities; (iii) the right to the full and equal participation of women in the planning and distribution of assistance and in educational and training programmes; (iv) the right to special medical attention specific to women's needs, including access to reproductive and psychological health care; (v) the right to respect for family life and family reunification; and (vi) the right of women and girls to personal identification and other documentation.

Given this comprehensive infrastructure of law, the challenges women continue to face in today's conflicts do not take place because of gaps in international law, but rather, because the law is not sufficiently respected, implemented or enforced.

# GENDER AND PARTICIPATION IN HUMANITARIAN ACTION

To be effective, humanitarian programmes must be centred on the needs of individuals and communities. The best way to know their needs and solutions, and to design and assess programmes, is through direct dialogue with persons targeted for humanitarian action — women, girls, boys and men — and involving them in programme design and implementation.

## Why is participation important?

The active participation of people affected by crisis in identifying needs and designing and implementing relief programmes to address those needs substantially improves programme effectiveness and sustainability.

Decisions — on **who** participates, **how** they participate and **for what** purpose — also shape the impact of humanitarian action. When sufficient consideration is given to these decisions, participation becomes an extremely effective tool to:

- minimize the risk of exclusion of certain groups during the design and delivery of assistance;
- recognize the power dynamics among groups (political, social, economic, gender, etc.) with control over resources and those without;
- allow for a more holistic understanding, enhance accuracy of needs assessment data and subsequently more effective response;
- help individuals and communities to identify actions to take on their own behalf;
- set the foundation for greater self-sufficiency, safety and protection among individuals and communities, and more sustainable programme results in the long term; and
- ensure that the participation is meaningful and effective for the individual and the humanitarian actor.

The Inter-Agency Gender Needs Survey (April, 2009) reported that 70% of both male and female respondents say they have not been informed about the relief and recovery assistance in their community since the war. In addition, 85% of men and 88% of women cite that they have not been involved in any consultation on the planning of the humanitarian assistance in their community. The highest percentage is amongst female heads of household with 93% of them stating they have never participated in the relief process.

## Who should participate?

Any approach should consider the categories of participants and relevance of their engagement to the humanitarian action, such as:

- **Individuals** — women, girls, boys and men, for example through focus groups, random surveys, registration exercises;
- **Community at-large** — for example through representative collectives such as elders, community decision-makers, teachers, health care workers;
- **Local networks/organizations** — such as local non-governmental organizations, informal youth or women's groups. These may be engaged in service delivery, human rights monitoring, community awareness or sharing issues of common interest.



## What is the policy on gender and participation?

The **IASC Policy Statement on Integration of a Gender Perspective in Humanitarian Operations** commits as a priority to “the participation of women in the planning, designing and monitoring of all aspects of emergency programmes.” The statement singles out women in recognition of their particular needs and contributions in humanitarian crises, and seeks to better ensure their equal access to programme and policy decision-makers. Women typically have less access than men to decision-makers due to factors such as literacy or language skills (which can affect their ability to communicate with service providers), community leadership (typically male representatives in the “formal” decision-making spheres), mobility and time (women and girls undertake childcare or household duties). If not recognized and addressed appropriately, these obstacles can also restrict women’s ability to participate effectively in all aspects of humanitarian action.

The Policy Statement is also committed to integrating capacity building of women’s organizations in humanitarian response and rehabilitation and recovery phases.

### Implement participation standards

Ensuring the highest standard of ethics in participation is key to safeguarding the rights of participants. This can be achieved when it is clearly understood that participants are:

- not required to participate in the assessment if they prefer not to;
- not prompted to give information in public that embarrasses them, makes them feel uncomfortable or causes them to relive traumatic experiences or endangers their lives (i.e. take socio-economic status, class and gender composition of the group into consideration when organizing a consultation);
- told the purpose and process of the assessment and informed of its limitations, so that false expectations are not raised;
- made aware of any potential risks or inconveniences associated with participation in the assessment (e.g. time away from family or job, reminders of traumatic experiences);
- told of the potential benefits arising from the assessment. The information they give might help improve certain conditions for others. However, they may not receive any direct financial or other personal gain from participating (except for possible compensation for travel expenses, if the meeting takes place some distance away from their normal residences);
- reassured that confidentiality of information sources will be respected. Individuals must not be exposed to protection risks because of their participation (e.g. victims/survivors of sexual or gender-based violence (SGBV) becoming known to the community);
- permitted to express themselves freely without interruption and without having the information they provide “challenged” negatively (e.g. if parents say they cannot afford to send their children to school, they should not be asked why they never went to see the social worker). Empathy should guide all interactions with people of concern, facilitated by a balanced representation of women and men in the humanitarian staff allowing women, especially survivors of SGBV, to consult with female staff;
- given the names of contact staff or implementing partners with whom they can follow up in case they have personal questions; and
- kept informed of how the information they provide is being used and of any follow-up actions taken. They should remain involved in the process throughout.

### III. Checklist to assess efforts to ensure equal participation

The checklist below provides a useful tool to remind sector actors of key issues to ensure gender equality programming.

Checklist to assess efforts to ensure equal participation	
1. Women and men of all ages affected by humanitarian emergencies receive information on the programme and are given the opportunity to comment during all stages of the programme cycle.	<input type="checkbox"/>
2. Balanced representation by women and men in all groups is achieved.	<input type="checkbox"/>
3. Programmes are based on the willing cooperation of the affected population.	<input type="checkbox"/>
4. Special fora exist for the participation of women and youth.	<input type="checkbox"/>
5. Programme objectives reflect the needs, concerns and values of all segments of the population affected by humanitarian emergencies.	<input type="checkbox"/>
6. Assessment results are communicated to all concerned organizations and individuals.	<input type="checkbox"/>
7. Mechanisms are established to allow all segments of the affected population to provide input and feedback on the programme.	<input type="checkbox"/>
8. Age- and sex-specific outreach is established for individuals who are marginalized, for example the homebound, disabled or others who may have problems accessing services.	<input type="checkbox"/>
9. Programming is designed to maximize the use of local skills and capacities, including the skills and capacities of women and youth.	<input type="checkbox"/>
10. Gender-sensitive programmes are designed to build on local capacity and do not undermine women's, girls', boys' and men's own coping or other strategies.	<input type="checkbox"/>
11. Programmes support, build on and/or complement gender responsiveness of existing services and local institutional structures.	<input type="checkbox"/>
12. Trainings and workshops are undertaken with the inclusion of representatives from the community, local groups and networks such as youth groups, women's groups and other collectives.	<input type="checkbox"/>



Towards gender equality in humanitarian response: Addressing the needs of women & men in Gaza

# SECTION TWO

# GENDER SECTORAL

# GUIDELINES



# 2

# Education



## Education is a basic human right for everyone

- The right to education is protected by article 26 of the **Universal Declaration of Human Rights (UDHR)**, articles 13 and 14 of the **International Covenant on Economic, Social and Cultural Rights (ICESCR)**, articles 28 and 29 of the CRC, article 10 of **Convention on the Elimination of Discrimination against Women (CEDAW)** and article 5(e) of International Convention on the Elimination of All Forms of Racial Discrimination (ICERD). It entails the right to receive and choose an education in conformity with one's convictions;
- Education is both a human right and an indispensable mean of realizing other human rights. It has a vital role in empowering women and girls and can lift economically and socially marginalized adults and children out of poverty and provide them with the means to fully participate in their communities.

## GENDER AND EDUCATION IN EMERGENCIES

In Gaza, the right to education is impeded by many factors. The blockade and restrictions have severely affected access to education supplies. This has been compounded by deterioration in education facilities where, during the latest Israeli military operations, more than 150 schools were either completely destroyed or partly damaged, resulting in the overcrowding of classrooms. Other factors include irregular attendance and the poor quality of education.

Following the war, households showed the same pattern of increased expenditure on basic needs such as food, water and psycho-social healthcare at the cost of expenditure on secondary needs like education, clothing and general health (UN Gender Task Force Survey, 2009). The loss of livelihoods has also exacerbated the ability of impoverished families to send their children to school.

The crisis has had serious and different impacts on the lives of women, girls, boys and men. Educational needs change and the ability of girls and boys to attend school changes too. Male and female teachers have different experiences and priorities that need to be addressed. To ensure that all girls and boys benefit equally from education in emergencies, it is important to understand the social and gender dynamics that might affect or place constraints on them.

In crisis situations, the right to gender-sensitive education is essential and should be fulfilled without discrimination of any kind. To that respect, providing educational facilities and opportunities contributes immensely to a range of short- and long-term issues of critical importance for girls and boys, such as:

- **Providing safety:** Educational facilities can provide a safe physical environment for children and youth, sheltering them from violence, including gender-based violence;
- **Promoting well-being and normalcy:** Schooling helps to promote and sustain the physical, social and emotional well-being of all learners. Girls and boys have different experiences coping with the crisis and may also have different coping strategies. These should be acknowledged and built on in schools;
- **Channelling health and survival messages:** Education in emergencies provides a channel for conveying health and survival messages and for teaching new skills and values, such as peace, tolerance, conflict resolution, democracy, human rights and environmental conservation. An emergency can be a time to show and teach the value of respecting women, girls, boys and men equally in society;
- **Building the future:** At the same time, ensuring children and youth access to education during times of humanitarian crisis provides the essential foundation for successful economic, social and political systems upon early recovery. Ensuring girls' access to quality education prepares them to play significant roles in reconstruction efforts in their communities and beyond;
- **Building community capacity:** Community participation is crucial. It can be enhanced through capacity building activities with youth leaders and school management committees. Teacher training and capacity-building support for education officials are also important, especially in chronic crisis and early reconstruction contexts. Capacity-building and training programmes are also a venue to highlight issues of gender inequality in education so that trainees are more sensitive to the issues and can be assisted in trying to overcome them.

### Focus on Gaza

Education enrolment levels at the primary and secondary sectors throughout the oPt are relatively equal and high for both sexes, and higher in Gaza than the West Bank. Indicators also show that overall enrolment and achievement levels have actually risen since 2000. Access is aided by the generally low cost of education and the proximity of schools. In addition, schools' segregation by gender has also enhanced access for girls; where there are gender disparities in enrolment, they are now often in favour of girls. Over the past fifteen years, families have been making greater investments in post-secondary education for their children. The loss of well-paid, unskilled jobs for young men (in Israel) seems to have motivated parents to push their sons in pursuing higher education. While young men still outrank women in enrolment at the post-secondary level, there has been an almost doubling of female enrolments at the post secondary level since 2000.<sup>1</sup>

<sup>1</sup> See Birzeit Women's Studies Institute/ World Bank. *The Impact of Israeli Mobility Restrictions and violence on Gender in Palestinian Society 2000-2007*. (June 2009)

General problems in Gaza tend to relate to the quality of education: weak curricula, poorly trained teachers and traditional teaching methods are combined with large student teacher ratios, short teaching days and the poor material environment of schools.

## Issues Confronting the Education and Youth Sector

### I. Problems in Formal Education

#### Teaching Quality:

Boys at the secondary level interviewed in the focus groups showed little respect for their teachers' abilities and complained about the difficulty of the school curriculum. Boys stated that many of their current teachers are new graduates themselves, "substitute teachers," who were hired by the de-facto government in Gaza to compensate for Palestinian Authority (PA) teachers who went on strike at the beginning of the school year in 2008. Students claim that these teachers lack experience in teaching and knowledge of the curriculum. A recurrent complaint is that teachers do not know how to communicate the material to the students and often simply read out loud from the textbook.

*I'm studying for my tawjihi. They've changed the math teacher eight times. Finally they employed one who had just graduated last year. The science teacher also just graduated one year ago. We can't understand anything from them. If only there were tutorial classes we could take, but there aren't any...*  
(Shayma, female secondary student, Khan Younis)

Similarly, girls at the secondary level said in the focus groups that their main problem in school is the poor quality of their teachers, especially given the difficulty of the curriculum. Like the boys, girls negatively compared their current teachers (again, recently hired to compensate for PA teachers who went on strike) with the more experienced ones they had in the past. At the higher secondary and *tawjihi*<sup>2</sup> levels, it seems that many new graduate teachers were brought into the system over the past year without adequate teacher training. Though not emanating from the focus groups directly, there is a concern among sector specialists that girls' education has suffered more from this phenomenon than boys'. Nevertheless, focus group discussions revealed that girls, for the most part, are more likely to consider teachers as allies and positive role models than are boys. Complaints about unfair or violent treatment tend to be about particular teachers or administrators rather than being seen as something systemic, as is the case with boys.

#### School Infrastructure:

Boys commented that the physical environment of their schools is detrimental to their education, with broken desks, windows and poor facilities. They complained about the lack of an orderly and positive learning environment. Girls complained less about poor school infrastructure than boys.

For children with physical disabilities, the specialized schools that serve them only go up to the sixth grade. Those with physical disabilities who can be integrated into the regular school system reported facing the problem that the majority of schools do not have disabled access, which is a cause of great concern to them and their families.

### II. Formal Education and Psycho-social Needs

#### School Students:

The loss of one month of school and general inability of students to concentrate during the Israeli military operations meant that the return to school, for many students, was difficult. Male secondary students reported that teachers returned back to their normal pattern of authoritarianism and do not take the effects of the Israeli military operations into account. Boys said that no psycho-social activities have been held at their schools following the end of the belligerence. Boys mentioned they have been having concentration problems, but their main difficulty has been in trying to catch up for lost school-time, a problem compounded by poor teaching quality.

Secondary level girls also felt that teachers who returned have not taken the effects of the war into account. However, when coming back to school, they had two days of special activities (presumably psycho-social

<sup>2</sup>Tawjihi is the general secondary education examination in the oPt.

activities), which they describe as “painting pictures”. A number of girls said the war made them feel that education was useless and that they now invest less effort in studying. They expressed this reaction as if they carried a sense of guilt, seemingly suggesting that it was selfish to focus on bettering themselves when so many people had lost their lives.

The ability to access and participate in recreational activities plays an important role in contributing to good mental health. For youth, recreational outlets are important under situations of acute socio-economic crisis, but are also particularly important in situations where violence is a possible avenue for their frustrations and energies.

Boys mentioned sport (football) and internet as their main sources of recreation outside of school. A main complaint was that there were not enough recreation centres and activities available to them. Sport pitches were described as disorganized and rudimentary and boys longed for the type of sports grounds that they had seen on television. Many of the boys mentioned the lack of clean and organized recreational environments. As clubs, home and the private sector provide boys with internet access, only a few of them complained about access issues. At the same time, boys reported spending an inordinate amount of time outside their homes. Many of them stated that they prefer to avoid being at home around angry and nervous fathers.

*We girls are not allowed to go out. It's forbidden to go out of the house. I go out, but not often. My father and brothers forbid me and tell me off when I ask, but I so want to go out and have some fun with my girlfriends and sisters.*

*(Aisha, secondary student, Khan Younis)*

Girls suffer from a near total absence of access to recreational and sporting activities. Summer camps were mentioned as their only outlet to play sports and undertake creative and other activities. Girls expressed strong desires to play sports and take part in activities outside of school, but according to the focus groups interviewed, no such facilities existed. In addition, internet access was reported as mostly available to girls whose families have it at home. However, even then, girls reported having to compete with brothers to use it and often losing out.

In addition, there are extreme constraints put on adolescent girls' mobility in Gaza. This is due to family fears in the context of cultural norms that perceive young women's bodily security (including virginity) as crucial to their future life chances in terms of their eligibility for marriage. Adolescent girls can literally be described as living within a social prison within the larger prison of Gaza. Young women complained of boredom and limited horizons due to their restricted freedom of movement. During the peak of the fuel crisis in Gaza, the increase in transportation costs was also a major obstacle to people's movement, especially for low-income families. Combined with the conservative nature of many Gaza communities, this resulted in even further restricted mobility for girls.

For girls, therefore, it seems that school becomes a much greater focus for their aspirations than for boys, since it is their primary way of getting out of the home. Lack of access to recreation outside the home seems to lead to a much greater focus on studying amongst girls; across the oPt, girls consistently outperform boys in terms of grades, including scores in *tawjihi*. Girls still in secondary school described higher education and employment as main aspirations for their future.

#### **Parents:**

*I'm worried about my kids' education. My son, who is in the third grade, had high grades before the war. Now he's doing very poorly. He doesn't study like he used to. His grades really went down after the war.*

*(Siham 35, mother of three, Rafah)*

Throughout Gaza, mothers reported in focus groups that their young boy children, in particular, had problems with their studies following the latest Israeli military operations. Young boys were often cited as the most traumatized, particularly those living at the centre of military violence (Beit Lahiya, Jabaliya). Many women mentioned that boys were doing poorly or failing at school after the Israeli military operations and were very worried about their educational future.



## Children Who Lost a Parent:

*We need special classes for the children of martyrs. Most of my kids are doing badly at school; my daughter is always absent-minded and can't concentrate. I worry about their educational future.*  
(Asmahan, 43, war widow, mother of seven, Shujaiyya)

War widows clearly articulated in the focus groups that many of their children are still suffering from deep traumatic effects, including self-isolation, depression, uncontrollable crying, bedwetting among the young and so forth. The reactions among children differed by gender, with older boys tending towards aggression and isolation, older girls towards depression and nervousness, and children, regardless of sex, towards bedwetting, crying, fear of being left alone at school or day-care and inability to interact with other children.

All war widows in the focus groups remarked that their school-age children are having problems at school and concentrating on studying. Their educational performance has greatly deteriorated following the Israeli military operations and the loss of their fathers. As such, a majority of war widows, when asked about their main priority needs, put a high premium on getting remedial educational support for their children. Many of them feared that their children would not recover in time to be able to continue with their education if such support was not forthcoming. Given that the focus groups among adolescent boys said that teachers continued with the school curriculum and pace as if the Israeli military operations never took place, it is clear that children suffering from trauma may be vulnerable to failing and dropping out of school.

It is not surprising that these children are facing a range of traumatic symptoms affecting their educational achievement. Due to the nature of the Israeli military operations, which did not differentiate between civilian areas and battlefronts, many fathers and husbands were killed in the immediate vicinity of their homes, often in front of family members, including children. In addition, other family members or neighbours were often victims of the same aerial bombing that was experienced by the whole family. As such, the trauma of losing a father was often worsened by witnessing or experiencing the circumstances in which he, and in some cases, other family members, were killed.

### III. Protection Issues

#### Violence at School:

Young boys and adolescent males both suffer from physical violence at school. Focus group findings show that in boys' schools, corporal punishment was the everyday norm rather than the exception. Boys' negative attitudes towards school cannot be separated from the fact that it is the place where they are constantly vulnerable to physical violence from adult authority figures. Boys of all ages perceived school as an environment where their rights were consistently violated and they were treated as if they were a danger to the social order. Abuses at school can lead to alienation from adult authority and a loss of interest in completing education. According to focus group results, however, boys in Gaza try to maintain a positive self-image despite the negative stereotypes imposed upon them by teachers and school officials.

Girls are also vulnerable to violence at school. Once again, corporal punishment meted out by teachers was cited as the norm in the school environment, though at a lesser rate and at a lower level of severity than that facing boys.

#### Violence at Home:

Boys are also vulnerable to physical violence from fathers and older siblings. Similar to the patterns in schools, physical violence was the main means through which family members exercised authority over boys. At the same time, boys in the focus groups suggested that the violence they face from their fathers and older siblings is often an outcome of their general frustration rather than a reaction to a negative behaviour of the boys themselves. Many boys stated that they try to spend as much time outside the home as possible in order to avoid their fathers, who are in a constant state of frustration and anger.

Focus group findings suggest that adolescent girls may be subjected to domestic violence more than their mothers. Older male siblings, in particular, and fathers were cited as using both physical and verbal violence against them. Girls also mentioned that they shy away from their fathers, who were described as angry and

volatile and were also cited as using verbal abuse against them. Young girls described situations at home where they seem to be the outlet for the anger and frustration of other family members, likely because they are the least able to fight back.

#### IV. Livelihood Crisis and its Impacts on Formal Education

##### Drop-outs:

I have three sons who dropped out of school, two of them before the war and one of them after. I can't afford to educate seven children; they have many needs, like pens, books and clothes, and I'm out of work. Now they sell sweets outside the school gates to the students in order to help out at home.  
(Musa, 44, father of ten, Jabaliya)

People are letting their sons leave school in order to work in the tunnels and help better their economic situation. Even if it's dangerous, they bring in 100 shekels a day.  
(Atif, 44, father of twelve, Khan Younis)

Throughout focus groups with parents facing an income crisis, it was clear that their school-age boys were more likely to be pulled out of school to help with family income than their female siblings. In families with large numbers of school-age children, parents said the main reason boys were pulled out from school was the inability to cover the costs of the school kit (uniform, books, etc). In all cases, boys who left school helped their families, either through peddling or by taking extremely low paid jobs. One such boy, who was pulled out from school to help his family, was working in a butcher shop and making ten shekels a day). Boys in large and poor families that depend on a low-skilled, primary breadwinner seem to be the most vulnerable to school drop-out.

Families facing an income crisis sometimes pull girls out of school in order to get them married as a strategy to lessen the number of mouths to feed. Thus, in comparison to boys, girls do not get pulled out of school to generate income. Again, it is school-age girls in large families facing income crises who are most vulnerable to being pulled out of school. One unemployed father of 11 children said that, since 2001, he has married all three of his daughters off before they were 14 years of age and all to relatives. Early marriage of daughters is also higher among female headed households and widows from the recent war. Over time and if not given enough support to keep their girls in school, some may end up taking this route. However, overall indicators show that, since 2001, the percentage of young women getting married before 18 has declined by half its previous rates in Gaza. One of the reasons seems to be that the costs of marriage remain too high for young men and their families, who are also facing income crises. As such, early marriages seem to take place more often among relatives, where marriage costs can be kept to a minimum level.

##### Crisis Meeting Costs of Education:

I'm not able to educate my sons or my daughters. Grooms these days are looking for university educated girls. I can't afford to send them, even to a two year college.  
(Tamam, 51, mother of seven, Rafah)

While in global terms education in Gaza is extremely inexpensive, in the context of ongoing income crises, even the basic costs can become a major hurdle for families, especially given Gazans' relatively large family sizes. Mothers tended to raise concerns more often about their children's education than fathers. This could be partly because of women's greater role in everyday childrearing, but also because, except for taking care of costs, much of the tasks related to children's education is considered women's gender responsibility. Costs that families said they could not meet included:

\*Pre-school

A number of women were unable to enrol their children in pre-school due to low income. Pre-school is one level of the education sector where families have to pay fees.

### \*Transportation Costs

Families with children in university all mentioned the difficulty of paying for transportation. This was especially the case for those living in southern Gaza, and in particular, for many families who are dependent on farming and lost their income due to destruction of agricultural areas. Those families are suddenly facing an economic crisis for the first time following the latest Israeli military operations. University students from these communities, in particular, may be at risk of not being able to complete their education.

### \*School Kit

Among mothers in poor households, after food, coupons for school books and bags were mentioned as priority needs in terms of humanitarian assistance.

### \*Child Labour and Education

*I sell ful (beans) and falafel to help my father with the family income.*  
(Ahmad, secondary student, Deir al Balah)

*I spend my time out of school doing housework and cooking.*  
(Aisha, secondary student, Khan Younis)

Helping out with family income does not necessarily lead school-age children to drop out of school.

A number of boys attending secondary school said they did menial and casual labour after school hours to help their families. Usually this meant working in restaurants or food stands in their immediate neighbourhoods and often with parents or relatives. The boys did not suggest that this had negative effects on their education, but instead seemed proud to be able to continue their education while helping support their families.

In contrast, none of the secondary school girls in the focus groups said they undertook work to help their families. However, all of them had high domestic work burdens. Given that mothers are often overwhelmed with accessing food aid, or running income-generating projects in order to make up for the loss of the family breadwinner's income, young women seem to have taken up much of their mothers' domestic chores.

## V. Participation

It is notable that adolescent boys were the most surprised among all the social groups who took part in focus groups at being asked about their opinions. When queried about whether they had been or should be consulted about issues pertaining to their lives, the very question struck the boys as a complete novelty. Many did not know what to say. It is clear that the intense crisis faced by fathers (breadwinners) has added to the perception of young men and boys as sources of social trouble, which in turn, has led to a situation where young men and boys are left estranged and voiceless in Gazan society. Perhaps telling, the main source of support and "hope" stated among the majority of boys was their mother.

Despite the severely restricted environment of the adolescent girls interviewed in the focus groups, the very fact that they are still in secondary school seemed to be a source of agency and empowerment for them. Girls were much more comfortable voicing their problems and needs than boys of the same age. They had a desire to be heard and express themselves. In addition, while a number of them stated that their mother was their greatest source of hope and support, the majority of girls said that education was their greatest source of hope.

## VI. Issues Raised by Special Needs Students

All of the special needs students interviewed in the focus groups were already enrolled at a particular, specialized school that teaches students with both mental and physical disabilities, which is where the focus group took place. As such, the findings from the focus group only represent this relatively privileged group of special needs students, rather than the many disabled youth all over Gaza who do not have access to formal

education facilities at all. While happy within their current facility, these students and their families all faced the looming crisis that upon reaching sixth grade, there would be no special education facilities to meet their needs. At sixth grade, special needs students who can be incorporated into the regular school system, meaning government schools in coordination with the Ministry of Education, are integrated. Those who cannot must leave formal education altogether and have only the choice of being home-schooled by their families.

### Recommendations to ensure gender equality programming in education:

1. Hygiene should be taken into consideration in girls and boys schools;
2. Prepare maps for existing schools and communities to examine issues of girls' access to schools;
3. Community participation should not be limited to measuring in numbers, but should also measure type, frequency and effectiveness of this participation;
4. A gender analysis should be developed to tackle the informal education system and vocational education system as well;
5. Better mainstream gender into planning, design, implementation, monitoring and evaluation of projects in the education sector;
6. Reconstruct school premises to meet the specific needs of children with disabilities, such as access to and within classrooms, latrines and drinking water facilities.



Towards gender equality in humanitarian response: Addressing the needs of women & men in Gaza

## Checklist for assessing gender equality programming in the education sector:

Educators should review the list below and select the items relevant to your context to develop measurable indicators. For further reference, the INEE Minimum Standards for Education in Emergencies, Chronic Crises and Early Reconstruction provide a broader set of indicators.

<b>CHECKLIST for the EDUCATION SECTOR</b>	
<b>Analysis of gender differences</b>	
1. Breakdown by sex and age group for all education levels (primary, secondary, high school), the number of out-of-school adolescent girls and boys, literacy rates for women and men, and the number of girls and/or boys heading households.	<input type="checkbox"/>
2. Number of displaced girls and boys in host families or camps, how long they have been there and their access to education.	<input type="checkbox"/>
3. Number of girls and boys separated from their families, where they are living and if they are caring for others or being cared for.	<input type="checkbox"/>
4. Effect of the security situation on girls' and boys' access to education.	<input type="checkbox"/>
5. Effect of families' economic situation on girls' and boys' access to education.	<input type="checkbox"/>
<b>Access and Learning Environment</b>	
1. Net enrolment ratio of girls and boys.	<input type="checkbox"/>
2. Sex-disaggregated enrolment rates by grade level.	<input type="checkbox"/>
3. Sex-disaggregated school attendance rates.	<input type="checkbox"/>
4. Sex- and grade level-disaggregated dropout rates.	<input type="checkbox"/>
5. Number of reported security related incidents, incidents of violence, sexual assault and cases of harassment within schools.	<input type="checkbox"/>
6. Existence of a safe, learner-friendly school policy with clear implementation actions (e.g. supplementary feeding, psycho-social support, support to boys and girls with disabilities, mine action awareness, security for accessing schools).	<input type="checkbox"/>
<b>Education personnel and school curriculum</b>	
1. Percentage of teachers who demonstrate attempts to create girl/boy-friendly classroom environments. and use teaching strategies to engage girls/boys.	<input type="checkbox"/>
2. Number of gender-specific lessons and topics in the school curriculum.	<input type="checkbox"/>
3. Percentage of teachers (women/men) involved in in-service training.	<input type="checkbox"/>
4. Number of women/men involved in pre-service teacher programmes.	<input type="checkbox"/>
5. Percentage of teachers (women/men) provided with gender training.	<input type="checkbox"/>
6. Number of male and female teachers, head teachers, teacher trainers/supervisors and other educational personnel.	<input type="checkbox"/>
7. Percentage of women teachers who feel safe and respected in school and in the community and are fully involved in education decision-making.	<input type="checkbox"/>
<b>Education policy and coordination</b>	
1. Number and type of references to gender-specific issues in coordination meetings.	<input type="checkbox"/>
2. Development of materials that address/challenge gender stereotypes and reflect new realities in society.	<input type="checkbox"/>
3. Actors in your sector liaise with actors in other sectors to coordinate on gender issues.	<input type="checkbox"/>
<b>Community participation</b>	
1. Number of women and men involved in community education committees on a regular basis.	<input type="checkbox"/>
2. Number of community members provided with gender training.	<input type="checkbox"/>
<b>Monitoring and evaluation based on sex- and age-disaggregated data</b>	
1. Sex- and age-disaggregated data on program coverage are collected, analyzed, and routinely reported.	<input type="checkbox"/>
2. Plans are developed and implemented to address any inequalities and ensure access and safety for all of the affected female and male students and teachers.	<input type="checkbox"/>

For more information, please visit:

Inter-Agency Network for Education in Emergencies [www.ineesite.org](http://www.ineesite.org)

# Food security and nutrition



## Food

- Article 25 of the UDHR and article 11 of the ICESCR guarantee the right to food. The principle of non-discrimination, protected by these two instruments, also applies to the right to food;
- The right to food is realized when every woman, girl, boy and man, alone or in community with others, has physical and economic access at all times to quality, adequate and culturally accepted food, or means for its procurement. Such access must be guaranteed by the State. The right to adequate food shall not be interpreted in a narrow or restrictive sense which equates it with a minimum package of calories, proteins and other specific nutrients.

# GENDER AND FOOD SECURITY IN EMERGENCIES

In Gaza, the recent military operations have substantially damaged infrastructure and agricultural land, resulting in a 20% increase in food insecurity. The overall level of food insecurity has risen to 75% of the population as estimated by FAO/WFP, adding further risks to nearly 80% of the population already dependent on assistance before the war.

Rates of stunting are on the rise, anaemia levels remain very high and low birth weights are increasing. In 2006, amongst children aged 6-59 months, stunting levels in Gaza were at 13.2%, 10% above the threshold at which it is considered a mild public health problem according to WHO standards. Iron deficiency anaemia increased from 37.9% in 2002 to 47.9% in 2007, affecting nearly half of children under five. Low birth weight rose from 4% in 2002 to 7.3% in 2006 (Initial Needs Health Assessment Gaza, WHO, 2009).

In the aftermath of the recent Gaza crisis, affected communities will need to restart agricultural activities as soon as possible, in order to adequately meet household food security needs and restore resilience. Since emergencies tend to exacerbate existing vulnerabilities, the respective roles and responsibilities of women and men and their constraints, needs and capacities must be analysed and understood in order to ensure that effective assistance is provided.

Household food security refers both to the availability and stability of food, and the purchasing power of the household where food is not produced. In the Gaza Strip, the continued lack of cash has decreased the ability of the affected population to maintain their expenditure pattern. Food security also depends on food adequacy and acceptability to consumers, as well as the availability of clean water and domestic fuel, whereas in Gaza there has been a general lack of access to those supplies due to the blockade. Food processing, conservation and storage are also important considerations when planning food security interventions.

At the household level, individual members may be malnourished while others have sufficient food. Assessing women's and men's access to food and knowing who does what work and carries out what roles in providing for household food security is essential in planning and programming humanitarian assistance.

Whether in terms of labour input, decision-making, access to or control of production resources, gender issues should be mainstreamed in food security, looking at the four dimensions mentioned earlier: **availability, access, utility and stability**. Gender aspects are relevant to most of these issues since women and men are generally affected differently by emergency and displacement, and have different access to and control over finances and resources.

## Focus on Gaza

### I. Assessment of Food Aid Received

#### Primary Source of Aid:

When they give coupons for four bags of flour and oil, those basic rations will keep the family going the whole month.

(Ahmad, 48, father of 14, Jabaliya)

We say coupon day is like wedding day.

(Jamal, 40, father of seven, Jabaliya)

I'd opened a hairdressing salon and then had to close it after five months because of the cost of rent. I moved it to my house and my income declined a lot. It still helps me make enough to take care of some of my family's needs, but I can't cover the costs of the basics like flour.

(Najla, 30, mother of six, Rafah)

The Basic Rations Package distributed regularly by main providers like UNWRA and WFP was rated the most positively by those receiving them on all four dimensions of availability, utility, access and stability. Households needing or receiving assistance all view the package of flour, oil and rice distributed by these main providers as the core of their household's food security and overall livelihood strategy. If they receive the Basic Rations Package, many of them say they have the basis for being able to get through to the next month. In terms of package content, its meeting core food requirements and tastes as well as the stability of its distribution, the Basic Rations Package is the preferred mainstay of household food assistance.

### **Secondary Sources of Food Aid:**

Aid coming from charities and NGOs performs much worse on the four dimensions for measuring gender mainstreaming in food security. Such aid measures much lower in terms of a cost-benefit analysis, given the high and often repeated amount of time and energy it takes to access the aid, while the utility of the aid's content is not always good, especially given that access is unstable. At the same time, income-poor households expend a great deal of energy on accessing secondary sources of aid, which they need to supplement their main food basket. The one exception in terms of positive assessment of charitable aid was by those who had received food distribution from CHF immediately after the war.

### **Low Utility Food Aid:**

Besides past experiences of receiving food from charities that was past its expiry date, the main utility problem households expressed relates to receiving canned foods aid. In general, households say that canned foods, though perhaps a practical remedy during the war, are not part of their food culture and are greatly disliked by many family members. Specifically, women say they would prefer fresh instead of canned vegetables and dried instead of canned pulses. The canned food that is considered diet appropriate, but rarely distributed, is canned tomatoes or tomato paste.

### **High Utility Food Aid:**

Besides the UNRWA/WFP Basic Rations Package, coupons received for getting fresh vegetables were cited by women living in the Beit Lahiya area as the best secondary food aid they had received (provided by the Beit Lahiya Municipality). Respondents who had received food aid from CHF rated it high in terms of utility, since it contained the most important basic food items (flour, etc) as well as other appropriate food and non-food items. However, CHF aid was rated low in terms of accessibility, availability and stability, as respondents did not receive it more than once and attempts to access it again failed.

## **II. Access to Food Aid**

*We go and write our names down to receive food aid, but never see anything.*  
(Bassma, 43, mother of six, Rafah)

*All of the local organizations that supervise food distribution work through *wasta* (connections) and relations, either according to political groups or families, because there's no oversight.*  
(Salim, 64, father of eight, Khan Younis)

### **Food Aid from UN:**

The biggest access problems to UNRWA aid were among non-refugees, who are targeted by INGOs and the World Food Programme. In particular, Gaza villagers, including many who had had their agricultural livelihoods destroyed in the war, complained of an inability to access UNRWA rations. A number of men from these families in need complained that they knew of household breadwinners with stable employment who were able to access UNRWA support simply because they were registered refugees. Many of the respondents in these groups were relatively new to the world of humanitarian assistance and therefore, perhaps did not understand the division of labour between various agencies. In addition, expectations from UNRWA tend to be high since it is the largest and longest standing agency operating in Gaza, and is therefore well-known, while other agencies and INGOs are not.

### **Food Aid from Charities:**

Access to food aid from charities was very mixed. Certain categories of people, such as internally displaced persons (IDPs), especially those living in tents, received a lot of charitable food aid that had simply come to



them. For others, however, getting access to charitable food aid took a lot of time and energy, most of which was exerted by women of the household. Food aid from charities was also seen as much less transparent in terms of access for those left out. A constant refrain was that one gets access to food aid through connections or political affiliation.

### III. Food Aid, Gendered Division of Labour and Control of Resources

Men and women said that men or older sons picked up or registered for UNWRA ration coupons. Women cited themselves and were cited by husbands as doing the main job of accessing charitable and NGO food aid. Many women spent a lot of time and did a lot of networking to find out about secondary food aid opportunities.

In terms of monetary versus food aid, although both men and women mentioned that it would be preferable to be able to choose the content of their family's food basket instead of having it imposed through coupons, this was more the case in relation to secondary rather than UNRWA/WFP primary aid. In addition, a number of women said that when aid did come in monetary form, husbands often used it to buy cigarettes.

### IV. Food-Budgeting: Lowering Consumption

Many poor families mentioned cutting back their family food intake to only one cooked meal a day. This was partly related to the problem of fuel, but as put by one unemployed male breadwinner with a large family, "If we cook fresh food it will cost us NIS 20, but if we depend on fried food that is generally considered to be cheaper and things we buy from outside, it will cost us NIS 60." While it is not clear what specific food items families are cutting back on, one can assume that consumption of costly meat protein in particular has diminished.

### V. Other Food Security Issues

#### Impact of Agricultural Destruction by the Israeli Military:

The loss of agricultural livelihoods in many eastern areas of Gaza due to Israeli military destruction of agricultural areas has grave implications for all Gazans' food security. In many areas, farmers continue to have problems accessing their land due to the presence and proximity of the Israeli military (a number of farmers cite being shot at). In addition, the level of destruction in many areas means that major water and land reclamation works will have to be undertaken before these areas can be returned to farming. Finally, given that much vegetable farming is intensive and depends on expensive agricultural technologies, such as irrigation pipes and greenhouses, many of which are not available within Gaza due to the blockade, farmers will require major capital investment and protection in order to return to meeting the nutritional needs of all Gazans. Until this happens, it is likely that prices of basic vegetables in Gaza will rise, creating another challenge for already critically stretched household resources.

#### Fuel Crisis:

Domestic fuel for cooking is a major problem facing low income Gazan households. Many families are using kerosene, scrap wood and paper in the absence of propane gas, or in order to save income on fuel that can be put towards food. Many families, particularly women, cite chest problems and headaches from the use of cheap and alternative fuel sources. In addition, these "dirty" sources of fuel create extra domestic burdens for men and women in terms of cleaning themselves, their children, as well as their cooking utensils and homes.

#### Recommendations to ensure gender equality programming in the food security sector:

1. Increase women's participation in decision making (selection of beneficiaries, distribution committees);
2. Consult with women regarding food basket components or preferences to better respond to food aid;
3. Ensure that food is given to women to avoid having men sell it;
4. Improve accessibility and safety of food distribution centres to help women avoid facing problems reaching them. It was clearly noticed that women were responsible for bringing the food supplies from the centres;
5. Improve sector coordination and targeting criteria to ensure access to the most vulnerable populations.

## Checklist to assess gender equality programming in the food security sector:

The checklist below provides a useful tool to remind sector actors of key issues to ensure gender equality programming in the food security sector. In addition, the checklist, together with the sample indicators in the Basics of Gender in Crisis chapter, serves as a basis for project staff to develop context-specific indicators to measure progress in the incorporation of gender issues into humanitarian action.

<b>CHECKLIST for the FOOD SECURITY/NUTRITION SECTOR</b>	
<b>Analysis of gender differences</b>	
1. A participatory needs assessment is undertaken, consulting an equal number of women and men, to gather information on: <ul style="list-style-type: none"> <li>• short- and long-term losses of livelihood assets and the coping strategies of women and men;</li> <li>• differences in women's and men's control over and access to food resources and other productive resources;</li> <li>• malnutrition rates for girls and boys in terms of stunting, wasting, weight and micronutrient deficiencies especially among pregnant and lactating mothers;</li> <li>• reasons for inequalities in malnutrition rates between women, girls, boys and men;</li> <li>• roles of women, girls, boys and men in food procurement/collection and preparation;</li> <li>• cultural and religious food restrictions/preferences for women and men;</li> <li>• cultural, practical and security-related obstacles that women, girls, boys and men could be expected to face in accessing services.</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2. The data is analysed and used for programming to ensure activities will benefit women, girls, boys and men directly and indirectly.	<input type="checkbox"/>
<b>Design</b>	
1. Services are designed to reduce women and children's time spent getting to, at and returning from food distribution points (e.g. distribution organized at different time intervals to avoid crowds and long waiting times; to ensure timely distribution and to avoid long waits for food delivery by partners).	<input type="checkbox"/> <input type="checkbox"/>
2. Services are designed to reduce the burden that the receipt of food aid may pose on women beneficiaries: <ul style="list-style-type: none"> <li>• Food distribution points established as close to beneficiaries as possible;</li> <li>• Weight of food packages manageable and efficient for women (e.g. 25 kg vs. 50 kg bags, etc.).</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
3. Nutritional support programmes are designed according to the food culture and nutritional needs of the women (including pregnant or lactating women), girls, boys and men in the target population.	<input type="checkbox"/>
<b>Access</b>	
1. Women's, girls', boys' and men's access to services and information about the services is routinely monitored through spot checks, discussions with communities, etc.	<input type="checkbox"/>
2. Adopt positive measures such as family issuing entitlement cards and ration cards in the name of both the primary female and male household representatives.	<input type="checkbox"/>
<b>Participation</b>	
1. Women and men are systematically consulted and included in food security interventions (e.g. selection of food items, distribution points, etc).	<input type="checkbox"/>
2. Women and men participate equally and meaningfully on registration and distribution committees.	<input type="checkbox"/>
<b>Actions to Address Gender-Based Violence/Targeted Actions Based on Gender Analysis</b>	
1. Both women and men are included in the process of selecting a safe distribution point.	<input type="checkbox"/>
2. Food distribution is done by a gender-balanced team.	<input type="checkbox"/>
3. "Safe spaces" are created at the distribution points for women, girls and those with disabilities.	<input type="checkbox"/>
4. Security and instances of abuse are monitored.	<input type="checkbox"/>

<b>Monitoring and Evaluation based on sex- and age-disaggregated data</b>	
1. Monitoring and evaluating the impact of food distribution on women and men's vulnerabilities, examining how the food needs of women and men have been addressed.	<input type="checkbox"/>
2. Sex- and age-disaggregated data on nutrition programme coverage is collected:	<input type="checkbox"/>
• percentage of girls and boys aged 6-59 months who are covered by vitamin A distribution;	<input type="checkbox"/>
• percentage of girls and boys under five, as well as pregnant and lactating women in the target group who are covered by supplementary feeding programmes and treatment for moderate acute malnutrition;	<input type="checkbox"/>
• Percentage of women, girls, boys and men who are still unable to meet their nutritional requirements in spite of ongoing nutritional programming; and exclusive breastfeeding rates for girls and boys.	<input type="checkbox"/>
3. Plans are developed and implemented to address any inequalities and ensure access and safety for all of the target population.	<input type="checkbox"/>
<b>Sector Coordination</b>	
1. Gender focal points within sector agencies meet regularly to enrich the sector Consolidated Appeals Process (CAP) and other initiatives. The sector's lead/designated member actively and routinely participates in the Gender Task Force.	<input type="checkbox"/>
2. Actors in your sector liaise with actors in other sectors to coordinate on gender issues.	<input type="checkbox"/>



# Health



## The Enjoyment of the Highest Attainable Standard of Health Is a Human Right for All

- The right to health is a fundamental human right indispensable for the exercise of other human rights;
- Article 25 of the UDHR laid the foundations for the right to health;
- Article 12 of the ICESCR provides protection of the right to health in international law. It introduces legally binding provisions that apply to all ratifying States. The additional right to health protection for marginalized groups is contained in group-specific international treaties;
- The right to health is an inclusive right, extending not only to timely and appropriate health care, but also to the underlying determinants of health, such as access to safe and potable water and adequate sanitation; healthy occupational and environmental conditions; and access to health-related education and information, including on sexual and reproductive health (ICESCR);
- The disaggregation of health and socio-economic data according to sex is essential for identifying and remedying inequalities in health (ICESCR);
- The right to health includes the right to seek, receive and impart information and ideas concerning health issues. However, accessibility of information should not impair the right to have personal health data treated with confidentiality;
- The right to health requires that health facilities, goods and services must be available, accessible, acceptable and of good quality;
- Further standards relating to the right to health of specific groups are set out in other documents, such as the Principles for the Protection of Persons with Mental Illness and the Improvement of Mental Healthcare and the Declaration on the Elimination of Violence against Women.

## GENDER AND HEALTH IN EMERGENCIES

Following the war and siege in Gaza, the risk of further morbidity and mortality remains a serious concern, from injuries and from the discontinuation of treatment for chronic conditions due to lack of access to health care services and referral. There are gaps in the quality of health services rendered in Gaza, especially when it comes to the support provided to people with disabilities. In addition, stress, loss and living in deteriorated economic and social conditions have had effects on the mental status of the general population.

Both women and men in Gaza are at risk of exposure to violence, distress and disability. However, available data suggest that there is a pattern of gender differentiation in terms of exposure to and perceptions of risk, preparedness, response, physical and psychological impact, as well as capacity to recover. Men may suffer from other disadvantages depending on the situation and for different reasons in comparison to women because of their gender roles, and vice versa. For example, men's roles as protectors may place greater responsibility or pressure on them to take risks during and after a war<sup>3</sup>.

### Focus on Gaza

While focus group discussions produced minimal information about actual general health problems facing residents of different communities in Gaza, they did, however, reveal a focus by various groups on issues of access to medical services, primarily due to income poverty. Additionally, they also yielded a wealth of information relevant to psycho-social programming.

#### I. General Health Problems

Although questions were asked throughout focus groups about health problems facing various household members, the only issue raised was respiratory problems suffered primarily by women and children. Respondents in three locations (Jabaliya, Khan Younis and Rafah) mentioned respiratory problems that they attributed to Israel's use of phosphorous bombs in their communities during the war. Respiratory issues and headaches were also mentioned by women in the context of discussions about domestic fuel. Many women said that their ongoing use of wood, paper scrap, as well as kerosene as fuel for cooking had caused difficulties in breathing as well as caused headaches.

#### II. Problems of Access to Medical Services

##### “Distance” to comprehensive health care facilities:

There's a clinic near us, but they don't have many specialties, which means we have to go elsewhere and that costs us money. They're also only open during the day. I had a nosebleed last week in the night, which happens a lot after the phosphorous. I had to get an ambulance that didn't come until 3:00 am.  
(Nahida, 46, mother of six, Beit Lahiya)

The clinic is far from our homes so we have to pay for transport and that makes you think twice about whether to go, especially when the service isn't so good, there's no medicine and the doctor doesn't examine you, he just asks what medicine you want. He writes a prescription for medicines that he doesn't have in the clinic and we can't afford to buy them.  
(Focus group with women in Rafah)

In the March, 2009 UN Gender Task Force Survey, a high number of respondents cited “distance” to medical facilities as their main problem of access. This was a surprising finding given the generally universal availability of a diverse infrastructure of health facilities across the Gaza Strip. At the same time, given the impact of sanctions on the health sector and on people's access to necessary treatment outside Gaza's borders, it is not surprising that the focus groups found that “distance” and quality were being used inter-changeably by respondents. Although they expressed their problems in terms of distance, what respondents were talking about was the lack

<sup>3</sup> Gaza Crisis: Psycho-social Consequences for Women, youth and Men, April, 2009. Culture and Free Thought Association, CFTA.

of access in their immediate communities to healthcare facilities that they perceive as well-equipped, better stocked in terms of medicines, higher quality, and more likely to offer comprehensive services.

In communities that only had local clinics, respondents were very critical of their limited infrastructure, low stocks of medicine, limited staff qualifications and the fact that they were only open during the day. In addition, respondents tended to suggest that they were more likely to get free medicine if they went to more developed urban facilities.

#### **Lack of health insurance coverage and lack of income to pay for services:**

I was injured during the war and so was my son, so we got some financial help from the "Development Society," but I still can't afford all the medicines. Some are very expensive and others just aren't available. The doctor gave me a prescription for some medicine that costs NIS 220, but I can't afford it. I have to choose between buying bread and food or the medicine, so of course, I choose bread and food.

(Jamila, 40, mother of five, Beit Lahiya)

My daughter is 14 and is paralyzed. Every week she needs a new colostomy bag, which costs NIS 30 a week. My husband isn't working and we can't afford it. We get no help from anyone.

(Hamda, mother of twelve, Khan Younis)

From the focus groups, it was generally clear that families' income crises were a major obstacle to accessing healthcare services, especially since households with unemployed breadwinners were also the least likely to have any form of health insurance so as to be able to pay for private doctors' fees and buy prescribed medicine. While provision of services in UNWRA and government clinics may be free, medicines are not. Additionally, private health services are perceived as providing better quality care. In these households facing livelihood crises, which represent a huge sector of the Gaza population, healthcare has become seen as a major expenditure that can only be undertaken in situations of emergency. For instance, one father mentioned returning home to find his young son had broken his arm while playing and instead of comforting him, found himself yelling at the boy because he now faced the problem of paying for his medical treatment.

According to focus group respondents, income crises have had varied impacts on family healthcare in Gaza. For instance, high transportation costs have caused some to limit their visits to health services, except for emergency cases. Others have opted to not take prescribed medication if it is expensive and not provided for free by the clinic or doctor. Many with injured family members requiring specialized medical supplies reported facing increased problems in procuring supplies, especially for medical materials pertaining to long-term medical problems rather than recent injuries. In one case, a family could not afford the adult diapers for their paralyzed son. In another case, a family could no longer afford the colostomy bags for their son. Both families reported having more trouble accessing medical supplies for their sons with long-term special needs than obtaining medical care for recent injuries sustained during the war.

The largest sectors among the most income-poor households are those in which the main breadwinners are unemployed or under-employed labourers. Many of these men had worked in the construction and industrial sectors, some formerly in Israel and many in Gaza prior to sanctions. All said that medical insurance was a major priority that they and their families had no access to, while these professions were more likely to result in on-the-job injuries. One unemployed electrician, for instance, had injured himself while doing a one-day job for income in his community, but had no access to subsequent health benefits.

### **III. Findings on Psycho-Social Needs and Access**

My nine year old son has become out of control, he swears and lies and won't listen to anyone.

(Hanan, 33, mother of five, Rafah, home destroyed)

My son, who is in the third grade, is the most affected. He has nightmares and sleepwalks and can't stop remembering the war and what happened to us.

(Samira, 34, mother of five, Khan Younis, home destroyed)

*My fourteen-year-old daughter witnessed the bombing and the killing of her father. She was turning over bodies in front of our door to see which one was her father. In the beginning, she wouldn't drink or eat. My three-year-old wets herself; when she wants something she promises that she won't wet herself.*  
(Saida, 46, widow, mother of 12, Shuja'iyya)

In contrast to the findings of the March 2009 UN Gender Task Force Survey, where it was found that men and women both saw themselves as suffering the most in terms of psychological effects of the war, two months later, both seem to have shifted their focus to the problems faced by their children, in particular their young children. Across Gaza, women and men both said the most affected people are young children. The situation is said to be most acute among children who lost an immediate family member, as well as children living in front-line areas, like Jabaliya, the eastern villages of Khan Younis, areas of Gaza City and Beit Lahiya. While respondents did not specify their ages when talking about young children, it can be inferred from the material that they tend to be children from four to ten years of age. However, children of all ages who lost a family member were cited as facing major problems. War widows, especially, were extremely concerned about their children's psychological health.

Despite women's expressed focus on the needs and suffering of their children, many women also answered that they themselves continued to be very affected by the war, and that they suffered sadness, anxiety, and a continuous fear of "a second war".

### **Symptoms and Behavioural Problems Among Children:**

When describing the symptoms and effects of trauma on their children, women tended to differentiate between boys and girls. Overall, mothers tended to more often mention sons rather than daughters in terms of those still suffering major psychological effects from the war. While boys may have indeed suffered more, it may also be that boys are more "capable" of overtly expressing their anger, due to dominant gender norms in which it is more acceptable for boys to show anger and aggression than it is for girls to do the same. Or this may be because mothers are often more focused on the problems of their sons, due to a strong preference for sons that exists in Gazan society and the oPt generally. A finding that supports the latter supposition is that a number of mothers mentioned hiding their sons in different places than their daughters during the war, seemingly suggesting that they put their sons in more secure locations.

<b>Behavioural Symptoms of Young Girls and Boys in Gaza After the Recent Military Operations</b>		
<b>Behaviour</b>	<b>Boys</b>	<b>Girls</b>
fearful to go outside	✓	✓
nightmares	✓	✓
aggressive behaviour	✓	
withdrawal and isolation	✓	✓
uncontrollable crying	✓	✓
bed-wetting	✓	✓
inability to focus on studies	✓	
playing war games	✓	
talking to themselves	✓	

When discussing the problems faced by older children, especially those who had lost a family member, women said that adolescent boys tended to "withdraw" and adolescent girls tended towards "depression and crying". Given that depression is a psycho-social disorder rather than a behavioural symptom, this suggests the extent to which mothers see the problem as serious. As mentioned, and as is detailed in the Education chapter, mothers are greatly concerned about their children's performance in school.



### **Adult Sufferers:**

From my family, I think I'm still the most affected by the war. I'm much more nervous than I should be, I'm always thinking and I can't cope with my kids; there's no communication between us, I just shout at them. There's no psychological rest. I can't take care of my kids' needs and even when we get aid, it doesn't make me feel better.

(Ahlia, 35, mother of three, home destroyed)

I've become very nervous because of what I saw in the war. I'm anxious all the time and not in control of my nerves. My family gave me pills in water or juice to calm me down because they didn't know how else to calm me. Till now, my nerves are wrecked.

(Maha, 26, mother of four, Beit Lahiya)

Almost all men and women across the various communities stated that everyone, including themselves, was still experiencing varying degrees of stress and tension from the war. In addition, they felt that some level of treatment was needed by most sectors of society, although their level of concern was greatest in regards to children's needs. War widows seemed so overwhelmed with the problems facing their children that they did not seem to have time to concentrate on their own needs and problems.

### **Types of Psycho-social Counselling Received:**

They did a psycho-social program in our area for children aged seven through 12 years old, as the kids' games had become very violent, but the program only targeted kids in this age range and they'd turn away kids who didn't meet the criteria.

(Samah, 30, mother of five, Rafah)

UNWRA did an activity in our area, but they only allowed 60 to 80 children to participate. It's not enough; we have hundreds of children in Khuz'a who need such programs. Even we men need some of this after what we've been through, but there's nothing.

(Salim, 64, father of eight, Khuz'a village)

In our area there are only activities offered to young children, not for women, but I noticed some women participating in the programs with their kids. I saw them drawing pictures to express their feelings about what they faced during the war.

(Hanan, 33, mother of seven, IDP tent camp)

### **Individual Counselling:**

From focus group testimonies, only in the case of those badly injured during the war did a mother and son receive individual counselling (at the Gaza Community Centre for Mental Health). In all other cases where counselling was provided, it was collective in nature.

### **Activities for Children Outside of Schools:**

The children who lost a parent during the military operations received psycho-social services in the form of children's activities. IDP women living in tents mentioned that similar activities were also held for their children. In the eastern Khan Younis villages, a day of activities was held by UNRWA for young children, although respondents said that many village children were excluded.

### **Activities for Children in Schools:**

Girls were more likely to mention that they had psycho-social activities at school than were boys. Adolescent girls mentioned two days of activities at the return to school, which they described as "drawing pictures". It remains unclear whether older boys at school were too shy to talk about the experience, or whether no activities were held at their schools.

### Access Problems and Issues:

It seems clear that children in families who were the most obvious victims of the war received the most access to psycho-social help. Thus, the children of war widows and women IDPs living in tents seem to have had full access to psycho-social services. Children attending school also seem to have been better positioned in terms of access, and girls potentially more so than boys. Thus problems of access seem greatest for:

- Pre-school children who are not part of clearly defined, war-affected target groups;
- Children, including adolescents who are not in school;
- Adults: No men and very few women reported having had access to psycho-social services. However, many women who had taken their young children to psycho-social activities remarked that they themselves had benefited from the activity. All women in focus groups organized for this study commented that the focus group session was in itself an opportunity to “empty” their feelings out and that they would like more of such sessions. In particular, war widows strongly and repeatedly requested that the focus group organizers create more sessions for them to get together and share their feelings;
- Some women commented that husbands would not let them participate in psycho-social activities.

### Other Aspects of Access:

Among those who needed psycho-social counselling and received it, there is also a problem regarding the amount of treatment received. In particular, children who lost a family member in the war (due to the focus group selection of war widows these were primarily children who had lost their father), it was clear that longer-term treatment was needed, but was not available.

### Use of Medications:

Two drugs were mentioned as being taken by family members for psycho-social stress: “mosakinat” (pain killers) and “taramal”. Taramal was taken both in the context of a doctor’s prescription and in the context of self medication “bought over the counter” without medical supervision. Others simply mentioned taking drugs to calm their nerves, without specifying what they were. The majority of individuals mentioned by respondents as taking these kinds of medications were women over 40 years old. Only one man, who was 56 years old, mentioned that he was taking pain killers, although men might have been reticent to mention that they were taking these medications.

### Recommendations to ensure gender equality programming in the health sector:

- Include gender analysis in health projects and programmes from the beginning and at every stage of the project cycle;
- Disaggregate data by sex and age for all data at all levels;
- Ensure that women, men, girls and boys, especially those from vulnerable or marginalized groups, participate equally in the planning, management and delivery of health services in humanitarian crises, and ensure that women are part of the decision-making and implementation process at all levels;
- Specify target groups, including groups with the least access to health and psychosocial care and support;
- Expand activities outside of school to include other categories, such as facility-based and outreach activities;
- Coordinate with health and other partners to avoid overlap and duplication.

## Checklist to assess gender equality programming in the health sector:

The checklist below provides a useful tool to remind sector actors of key issues to ensure gender equality programming in the health sector. In addition, the checklist, together with the sample indicators in the Basics of Gender in Crisis chapter, serves as a basis for project staff to develop context-specific indicators to measure progress in the incorporation of gender issues into humanitarian action.

CHECKLIST for the HEALTH SECTOR	
<b>Analysis of gender differences</b>	
1. Balanced ratio of women and men assessors and translators.	<input type="checkbox"/>
2. Balanced ratio of women, girls, boys, and men who participate in assessments.	<input type="checkbox"/>
3. Balanced ratio of women and men consulted about their health needs.	<input type="checkbox"/>
4. The following data are available and a gender analysis applied:	<input type="checkbox"/>
• Age- and sex-disaggregated cause-specific mortality rates;	<input type="checkbox"/>
• Age- and sex-disaggregated case fatality rates;	<input type="checkbox"/>
• Age- and sex-disaggregated case referrals;	<input type="checkbox"/>
• Security situations, impact of the siege, social structures, poverty, and the roles of men and women;	<input type="checkbox"/>
• Groups with specific needs (including physical and mental disabilities) by age and sex.	<input type="checkbox"/>
<b>Design of services</b>	
1. The timing, staffing, and location of health services ensure equal opportunity for women and men to access them.	<input type="checkbox"/>
2. Health care delivery strategies and facilities address the different health needs of women, girls, boys, and men equitably and recognize the potential barriers that they may face.	<input type="checkbox"/>
3. Percentage of health care facilities with basic infrastructure, equipment, supplies, drug stock, space, and qualified staff for reproductive health services, including delivery and emergency obstetric care services.	<input type="checkbox"/>
4. Percentage of health facilities providing confidential care for survivors of sexual violence according to the IASC Guidelines.	<input type="checkbox"/>
5. Ratio of health care providers disaggregated by profession, level, and sex.	<input type="checkbox"/>
6. Ratio of community-based psycho-social care disaggregated by sex and age.	<input type="checkbox"/>
<b>Access</b>	
1. Proportion of women, girls, boys, and men with access to health services, referral services, psycho-social care and special care for people with disabilities.	<input type="checkbox"/>
2. Determine access of women, girls, boys, and men to food and food aid by monitoring anaemia and malnutrition.	<input type="checkbox"/>
<b>Participation</b>	
1. Balanced ratio of women and men participating in the design, implementation, monitoring and evaluation of humanitarian health responses.	<input type="checkbox"/>
2. Balanced ratio of men and women in decision-making positions by locality.	<input type="checkbox"/>
3. Balanced ratio of local women and men hired and deployed in the health sector.	<input type="checkbox"/>
4. Balanced ratio of international men and women hired and deployed in key positions within the health sector.	<input type="checkbox"/>
5. Women and men participate regularly in group meetings or activities.	<input type="checkbox"/>
<b>Training/capacity building</b>	
1. Balanced/proportionate number of women and men from the community trained to provide health care.	<input type="checkbox"/>
2. Balanced/proportionate number of men and women from the community given employment opportunities in a wide range of medical specialties in the health sector after training.	<input type="checkbox"/>

<b>Actions to address GBV</b>	
1. 24-hour services for victims of domestic and other forms of violence.	<input type="checkbox"/>
2. Staff are aware of and abide by medical confidentiality.	<input type="checkbox"/>
3. Staff are trained on the clinical management of rape.	<input type="checkbox"/>
4. Confidential referral mechanisms exist for health and psycho-social services for rape survivors.	<input type="checkbox"/>
5. Autopsies are conducted and the reason for death documented in all violent and unnatural deaths of women and girls.	<input type="checkbox"/>
6. Information campaigns for men and women about the health risks to the community of sexual violence, early marriage and intra-family marriage (consanguine marriage).	<input type="checkbox"/>
<b>Targeted actions based on gender analysis</b>	
1. Men, women, displaced persons and refugees are targeted with substance abuse, STD and HIV/AIDS messages.	<input type="checkbox"/>
2. Communication strategies are developed and implemented to highlight the specific health risks affecting women and men, as well as targeting adolescent girls.	<input type="checkbox"/>
<b>Monitoring and evaluation based on sex- and age-disaggregated data</b>	
1. Data on demographics, mortality, morbidity, and health services are routinely collected and are disaggregated and reported by age and sex and a gender analysis is applied.	<input type="checkbox"/>
2. Percentage of participatory assessment reports addressing the needs of women, girls, boys, and men equally.	<input type="checkbox"/>
3. Formal monitoring and participatory evaluation mechanisms reporting the health impact of humanitarian crises on women, girls, boys, and men.	<input type="checkbox"/>
<b>Coordinate actions with all partners</b>	
1. Actors in your sector liaise with actors in other sectors to coordinate on gender issues, including participating in regular meetings for the gender task force.	<input type="checkbox"/>
2. Government and non-government stakeholders meet regularly to plan and respond to gender and health issues.	<input type="checkbox"/>



# Livelihoods



## **Human Rights Related to Livelihoods (Defined as the “Capabilities, Assets and Strategies That People Use to Make a Living”)**

The human rights standards of particular relevance to ensuring adequate livelihoods are the right to an adequate standard of living, including security in the event of unemployment or other lack of livelihood (UDHR and ICESCR); the right to work, including the right of everyone to the opportunity to gain her or his living by work which is freely chosen or accepted, and the right to just and favourable conditions of work, including safe working conditions and fair wages and equal remuneration for work of equal value and women being guaranteed conditions of work not inferior to those enjoyed by men (UDHR, ICESCR, CEDAW). Apart from these human rights standards, the following should be borne in mind as principles when promoting livelihoods in humanitarian situations:

- Strategies to enable people to secure their livelihoods should be formulated through a participatory process involving the persons concerned;
- Information on means of gaining access to employment should be accessible to all;
- Women should be guaranteed equal right to training and education to increase their technical proficiency and the right to access credit and loans;
- Income generation activities should be culturally appropriate and consistent with the dignity of the individual;
- A person must not be forced to work or provide other services under the threat of any penalty;
- Safeguards should be in place to ensure that girls and boys are not required to perform any work that is likely to be hazardous or harmful to the child's health or physical, mental, spiritual, moral or social development.

## GENDER AND LIVELIHOODS IN EMERGENCIES

In Gaza, the protracted conflict, the closure regime and the recent Israeli military operations have paralyzed economic development, leading to a high level of poverty, unemployment, and food insecurity. Previously self-reliant families are progressively falling into the poverty trap and are unable to escape from their situation, having lost their homes, productive assets and savings at the same time as employment opportunities continue to recede. It is reported that 7,700 jobs have been lost due to damages to small businesses, larger enterprises (especially those linked to reconstruction) and agricultural establishments during the Israeli military operations. Youth between 14 and 24 years old continue to bear the brunt of the unemployment crisis, while women remain marginalised from the job market, falling back on informal income-generating strategies which have very low margins of return. Thus, job creation must be a top priority for humanitarian interventions.

In humanitarian crises, important windows of opportunity exist to support the early recovery of affected populations, creating the basis for self-sufficiency and future development interventions. In addition, livelihood programmes in emergency situations provide **important opportunities to promote higher levels of gender equality** in economic life, by affirming women's role as economic agents and by promoting equal access to productive resources and to decision-making mechanisms.

**Livelihood strategies** aim at developing self-reliance. Livelihood interventions should be designed and implemented to strengthen women's and men's productive capacity early on, when it matters most, and to promote longer-term self-sufficiency. When designing and implementing livelihood programmes it is important to consider that:

- **Women, girls, boys, and men have different resources available** to them in crisis situations and will turn to different strategies for survival. In general, individuals with greater access to resources and better mobility will have a wider variety of options. Often, women and girls will have different or less access to livelihood assets than men and may be forced to adopt survival strategies for which they are ill-equipped or untrained;
- Specific consideration should be given to the **gendered division of labour, responsibilities and coping strategies within the household**. When designing income generation activities targeted towards women and girls, special attention should be paid to the overwhelming family and household responsibilities they already shoulder. Labour and energy-saving technologies can prove very effective for improving women's participation in training and livelihood initiatives. Providing some form of community child care associated with vocational training opportunities is also a useful strategy in this regard.

### Focus on Gaza

As attested to in the March, 2009 UN Gender Task Force Survey, income-poor households across the Gaza Strip have to depend on multiple strategies to make up their livelihood needs. Household incomes appear to be stitched together from a myriad of piece-meal sources. Sources mentioned in focus groups include partial support from an employed (public sector) relative or immediate family member, remittances from a relative abroad, informal income generation strategies (often undertaken by women in the household), selling of household items, and employment of younger household members in menial and poorly paid jobs. In all these cases, humanitarian aid delivered by main providers such as UNWRA and WFP is perceived by income poor households as crucial to their current livelihood strategies. In the focus groups, a number of men and women referred to the basic monthly food package of flour, oil and rice as the foundation of their livelihood strategy on which all else was built. In contrast to the aid received from main providers, aid from charities and NGOs is seen as less reliable, extremely variable in quality and difficult to access, a task which often falls on women.

While households across Gaza face livelihood challenges, focus groups revealed that it is those that depend on a low or unskilled male breadwinner whose crisis has been the most profound, critical and enduring. Such households represent a huge sector of Gaza's overall population. For these households, the Israeli military operations further compounded the already devastating income losses created by two years of siege and sanctions. In the wake of the Israeli military operations, households were confronted with additional income

burdens, such as costly medical treatment and house repairs. With sanctions ongoing, even basic income-generating projects that had been developed by women and men in these households are under constant threat from lack of access to materials, markets or lack of local demand.

Another group facing major livelihood challenges are agricultural households whose land and agricultural infrastructure was destroyed during the Israeli military operations. In contrast to the former income-poor households, the livelihoods of these agricultural households had seemed to weather sanctions and siege, only to be struck down by the war. As such and in contrast to the former group, these households have had little experience with humanitarian aid. The novelty of their situation means that most of them have yet to develop alternative income-generating strategies.

In terms of livelihood impacts, what unites both groups is the continuing role of sanctions in blocking their ability to move beyond their current state of crisis.

### **LIVELIHOOD CRISIS 1: Poor Urban Households Depending on Income from a Semi or Unskilled Main Breadwinner:**

*My husband had a small aluminium workshop, but he closed it because of the sanctions. There have been no materials entering Gaza during the last few years. We were forced to sell my husband's workshop and use the money we got for it to buy food.*

*(Latimad, 34, ten children, Beit Lahiya)*

*Sanctions is a simple word that doesn't express what it really means, especially not what it means for the workers like us. Sanctions dominate the basics of our life. The basic infrastructure for a healthy family life is no longer available. My children are still small, but simple citizens can't achieve their most basic needs. We strive to better ourselves, but even the cultural aspects of society are affected by the sanctions from every direction, even education.*

*(Anwar, 35, six children, Jabaliya)*

*I used to work at Erez industrial zone. We made 200 shekels a day. Now I'm out of work and my two sons are working in Gaza. They make ten shekels a day.*

*(Ahmad, 48, fourteen children, Jabaliya)*

Demographically, the largest group facing formidable challenges in terms of livelihoods is made up of households dependent on incomes from an unskilled or semi-skilled main breadwinner. These families have faced long-term protracted crises, some since the closure of Israel to Gazan workers, while others cite the period of sanctions as the beginning of their livelihood crisis. The collapse of living standards among these households that used to have an earner with access to work in Israel or at Erez industrial zone has been dramatic.

Many of the male breadwinners in these households had worked in the construction sector. Without access to work in Israel, they had been able to work on sites within Gaza, although at much lower wages, or if they were semi-skilled workers, like welders, electricians, and so forth, had been able to gain secondary income as self-employed handymen. While construction work had decreased dramatically since the beginning of the sanctions, opportunities for construction work have further worsened since the war due to the lack of access to building materials in Gaza. In addition to the blockade, Israeli military operations destroyed local factories that produced cement and other building materials, also causing the loss of hundreds of jobs. Among some of these households, unemployed sons had worked as agricultural labourers for farmers, but now too face the loss of these jobs due to Israeli military operations.

### **I. Impacts of Livelihood Losses**

Families in these situations had already been living with critically reduced income for the last few years. Therefore, it is difficult to clearly differentiate between the impacts of the protracted sanctions, the Israeli military operations and households' coping strategies. However, a number of impacts mentioned in the focus groups include:



### **Pulling sons out of school to help with family income:**

A father of 11 said that since the blockade, three of his school-age sons had left school to help with family income generation schemes. Wages for one school-age son working at a butcher shop were as low as ten shekels a day. Others claimed that school-age sons were pulled out of school because families could not afford their school kits.

### **Pulling daughters out of school to get them married:**

Since daughters (unless they had higher education) were not seen as possible contributors to family income in the immediate future, poor families were more likely to pull them out of school in order to get them married, thus helping to reduce the number of household dependents.

### **Limiting food consumption:**

Many families in this situation said they were making only one cooked meal a day, both in order to cut back on costs of domestic fuel, as well as to compensate for the dramatic price increases of meat and poultry during the period of sanctions.

### **Cutting back on healthcare:**

Adequate healthcare was clearly a primary victim of household income poverty. Since none of these households had access to health insurance, seeking private doctors and buying medicines were seen as major expenditures that could only be undertaken in emergency situations. One father mentioned returning home to find his young son had broken his arm while playing and instead of comforting him, found himself yelling at the boy because he now faced the problem of having to pay for his medical treatment.

Families with an injured family member in need of specialized materials reported facing additional problems and reductions in medical care. In one case, a family could not afford the adult diapers needed for their paralyzed son, while in another instance, a family could not afford their son's colostomy bags. In both cases, it was mentioned that the sons had been injured over the past seven years, rather than during the recent Israeli military operations. These two cases suggest that there is less access to medical support for those with long-term special needs than for those recently injured. However, even a woman injured during the recent war, now in a wheelchair, mentioned that despite having received free medical care, she was still unable to afford one of the medicines prescribed to her. Although not asked or mentioned in focus groups, the reductions in access to medical care probably mean that women are not only minimizing their general healthcare, but also pre- and post-natal care.

### **Family Conflict/ Domestic Violence:**

Both men and women in focus groups said that income crisis was the main source of domestic conflicts, which could sometimes become violent conflicts. Adolescent boys and girls all spoke of their fathers as aggressive, angry and frustrated, and admitted that they tried as much as possible to avoid them. Men themselves spoke of their frustration and anger and said that sometimes the pressure they felt could make them violent, though they claimed this predominantly took the form of verbal violence. Many men mentioned feeling shamed in front of their wives and claimed their wives were often less respectful and loving towards them. However, in other cases men and women talked of their increased cooperation in order to cope with the family income crisis. Some men mentioned how much more they appreciated their wives after having seen their ability to struggle and find ways of coping. Women overall also pointed to economic crisis as the main cause of domestic conflict with their husbands and said that it could sometimes take the form of physical violence. However, women overall also expressed strong feelings of understanding and empathy towards their jobless husbands.

## **II. Coping Strategies: Active Women, Passive Men, Working Children**

Before the sanctions, I had a home food processing project, but I had to stop because of the sanctions. The NGO I worked with used to sell my products outside of Gaza, but the sanctions made it impossible. So I had to stop even though I'd been able to furnish my house from the income I made.  
(Latimad, 49, nine children, Beit Lahiya)

I had a small grocery store in my home before the war. I still have it, but I'd put all my income into an informal savings group and it was lost during the war. Now my situation is really hard.

(Saida, 48, ten children, Beit Lahiya)

I teach supplementary after-school lessons at home. I teach all of the different subjects. I'm unmarried and I take care of the whole family. It's better than nothing.

(Samah, 30, Rafah)

I tried to do a number of projects. I learned embroidery and hairdressing in an activities centre. I was doing knitting for a while, but people aren't interested in hand-knit products anymore and the sanctions meant I couldn't get wool. So I tried to do hairdressing, but my children are small and they need my attention, and I have nowhere to put them while working.

(Ibtihal, 32, four children, Rafah)

I collected some things from around the house in order to sell them, but my husband found out and stopped me.

(Siham, 35, three children, Rafah)

Many income poor and unemployed men in focus groups seemed to be in a state of paralysis regarding their situation. In contrast, wives in these households seemed fully focussed and very active in finding practical everyday solutions. Wives in households facing long-term crisis of the main breadwinner income were clearly playing pivotal roles in livelihood strategies. Women themselves, as well as men, mentioned a range of livelihood activities that women were undertaking. These include:

#### **Income generating activities:**

Prior to the siege, a number of women had quite successful small businesses that, after the siege, had been unable to continue. After the siege, for instance, a woman cross-border trader could no longer access Egypt to get goods. She, like a number of other women, adapted to the situation by changing her work (in this case to embroidery production). Others in similar situations moved their activities to the home so as to save on paying rent for a public location. In both cases, "adaptation" meant much less income than before. Other women seemed to have started income generating activities after the sanctions when their husbands lost their jobs. Married women with children from a variety of ages and educational backgrounds undertook projects such as: embroidery, seamstressing, hairdressing, home food-processing and peddling of foods such as sweets. In some cases, husbands and wives cooperated, for example, peddling home-made sweets in front of the family home. However, in many other cases, the women seemed to run their activities independently. A number of unemployed men from these households commented on the importance of their wives' income-generating activities.

#### **Obstacles and Needs:**

Many women reported facing crises with their income-generating activities, mainly due to a lack of capital with which to obtain inputs for expanding their projects or for covering rent if the projects were located outside the home (such as hair salons). A number of women mentioned the lack of access to credit, and indeed, none of them were currently receiving any. In addition, women faced problems getting materials, especially women engaged in embroidery work. Finally, the blockade effectively closed marketing possibilities for products that had been produced for marketing outside of Gaza. In terms of the latter, a woman lost work in home food processing because the cooperative NGO that had marketed the goods could not get them out of Gaza. Similarly, women engaged in embroidery said that the market was smaller than before because of lack of commercial access to markets outside of Gaza.

#### **Networking to get access to secondary forms of assistance:**

Women were also very active in trying to access secondary forms of aid from charities and NGOs. Men and women said that male family members tended to collect the coupons and rations from UNRWA, but that women were the household members sent to access aid from charities. Women talked about how much time they spent running around to organizations and trying to get the family signed up on charity rolls. In

addition, where they existed, many younger women were active with local female charities and NGOs, often on a voluntary or work-for-food basis. Housewives were clearly highly involved in informal networking in order to get information and access to a range of humanitarian assistance.

#### **Household Thrift:**

Women were also undertaking a range of strategies to make scarce resources stretch to prevent waste, and in a crunch, sometimes resorted to selling items from their own homes. Many men commented positively on their wives abilities to stretch a meal, reuse uneaten bread, renew clothes to fit another child or barter food items with neighbours. Women also managed to make cleaning materials stretch further by diluting them. In a number of cases, women had collected household items to sell, such as unused cooking pots, and husbands who had found out had tried to stop them out of feelings of shame.

#### **Child labour:**

As previously mentioned, longer-term impacts of income poverty in large, poor households have included pulling male or female children out of school, the former to work and the latter in order to marry them off. However, in terms of short term strategies for many income-poor families, there is also a gender division of labour regarding children. Young boys who have not been taken out of school often help the family by doing small jobs after school. For instance, boys mentioned working at food stands in the evenings. Girls, on the other hand, often take up many of the household tasks that their mothers are too busy to undertake, especially cleaning.

#### **Payoffs for Female Higher Education:**

A number of households with unmarried girls who were university or college graduates were involved in UNRWA and charities' food-for-work schemes. While families complained that the girls had not gotten access to permanent employment, in the current crisis, the extra assistance they got for the family was seen as crucial. Some educated daughters had been able to find employment in local charities and NGOs and were seen as important assets to the family, even though the pay was low. Finally, a number of mothers explained the importance of women's higher education in terms of their better marriage prospects and long-term security. More than one mother commented that young men want educated wives.

### **III. Priorities in Terms of Assistance**

#### **Employment:**

\* For Male Breadwinners

For all involved in the focus groups, the top priority was employment for unemployed male breadwinners and young men. At the same time, it is clear that male breadwinners have a basic minimum in terms of what type of work they find acceptable, with the level of pay being perhaps the most decisive criteria. Unemployed male breadwinners, for instance, would take sons out of school to work for very low wages that they themselves would feel humiliated to accept. While men were not explicit regarding the salary level they would not accept, some of their sons were working for wages as low as NIS 20 per day.

\* For Educated Daughters

As mentioned, families who had invested in daughters' education saw their secure employment as a priority. PCBS labour force surveys show that in contrast to young women, young men with educational qualifications are the least likely sector of the male labour force to be unemployed.

#### **Credit/ Raw Materials:**

This was a main priority mentioned by women with income-generating projects, as well as by their husbands. In addition, a number of men who had been self-employed in professions like carpentry and ironsmithing said that even if raw materials were available, they would still lack the starting capital to be able to afford them.

#### **Healthcare Insurance/Support:**

Given that this sector has no medical insurance coverage and that family healthcare has been a main victim of the sector's income crisis, financial support to get access to healthcare is a priority.

### **Non-Food Items (NFIs):**

Besides healthcare priority items mentioned, domestic fuel and school kits (including books) are needed, with household cleaning items constituting a lesser priority.

### **LIVELIHOOD CRISIS 2: Agricultural Households in Front-line Areas:**

We have 17 people in the house between my children and my brothers' children. We were able to look after all of them from our agriculture, but it was all destroyed. They bulldozed all our fields and we haven't received any compensation. I have a son and daughter at university. Now I can't even pay for their transportation.  
(Muhammad, 52, father of five, Khuz'a)

We had fields and greenhouses and used to live on the income from them. Then the occupation forces destroyed all of it and we have no source of income anymore. And now, I don't know how to work in anything but agriculture.  
(Fawzia, 50, mother of eight, Khan Younis)

I don't do anything after they destroyed our crops and fields that I used to work on with my husband.  
(Saada, 50, mother of eight, Kahn Younis)

In three locations where focus groups took place, agricultural households had their livelihoods devastated by Israeli military actions. The worst hit seems to have been in the eastern villages of Khan Younis, but also in Beit Lahiya and parts of Rafah. In terms of loss of livelihood, these agricultural households were the most affected groups by the war itself.

#### **I. Primary Losses**

Primary losses suffered by agricultural households in front-line areas, who were the population group most affected by the war, included agricultural goods like livestock, as well as agricultural infrastructure such as greenhouses, irrigation pipes, machinery and so forth. In addition, the level of destruction in many cases was such that the land itself would have to go through major reclamation in order to be suitable for planting again.

#### **Continuing Obstacles to Rebuilding Livelihoods:**

Capital for inputs was a major obstacle facing many of the devastated agricultural households, in addition to access to water due to destroyed irrigation infrastructure. In the Khan Younis area villages, farmers continued to face security threats from the Israeli military. Many had been shot at while others were too fearful to even attempt working on their land.

#### **II. Impact of Livelihood Loss and Coping Strategies**

Many of the families in these circumstances seemed to still be in shock at their losses. Quite a few mentioned the problem of keeping sons and daughters in university, as they were unable to cover transportation costs. This suggests the extent to which many of these households were doing relatively well before the war, and only now, face a critical situation.

In terms of coping, some had gotten coupons and other aid, while others found it shameful to have to depend on humanitarian aid (some mentioned it was the first time in their lives that they had taken "handouts"). Additionally, all of them mentioned that wives were primarily involved in agricultural production as well. As such, wives did not have alternative income-generating schemes to help cope with the current crisis. Instead, women's critical role in family livelihoods was also lost with the destruction of agricultural holdings.

In a number of cases in southern Gaza, one solution had been for sons to go to work in the tunnels where the pay was relatively good because of the danger involved. Sons who were mentioned working in the tunnels were always in their early twenties.

### III. Participation, Access and Knowledge

Few of the men and women in these situations had been consulted about their needs, nor had they received information about programs and support for re-establishing livelihoods. Especially in the Khan Younis area, many were new entrants to the sphere of humanitarian aid and showed little knowledge of the systems and schemes involved in accessing it. At the same time they were often very distrustful of leaders who were supposed to represent their needs.

#### Recommendations to ensure gender equality programming in the livelihoods sector:

1. Assess and design “intervention strategies” rather than “coping strategies” to emphasize efforts to deal with the situations in order to better serve women and children;
2. Improve database and gender analysis in order to create better responses;
3. Improve coordination in order to better include the participation of women in the planning and design of livelihoods interventions;
4. Include other places in the study (i.e. buffer zones);
5. Give equal opportunities to access job creation programmes for both men and women;
6. Support and build on small income generating projects;
7. Strengthen women’s skills in order to increase their opportunities for finding employment;
8. Improve the financial and technical support to women’s centres and include them in the consultation and implementation processes.



## Checklist to assess gender equality programming in the livelihoods sector:

The checklist below provides a useful tool to remind sector actors of key issues to ensure gender equality programming in the livelihoods sector. In addition, the checklist, together with the sample indicators in the Basics of Gender in Crisis chapter, serves as a basis for project staff to develop context-specific indicators to measure progress in the incorporation of gender issues into humanitarian action.

<b>CHECKLIST for the LIVELIHOODS SECTOR</b>	
<b>Analysis of gender differences</b>	
<ol style="list-style-type: none"> <li>1. Information is gathered from women, female youth, male youth and men about:               <ul style="list-style-type: none"> <li>• Their different skills and talents, needs and vulnerabilities;</li> <li>• Their distinct roles and responsibilities in the family and community;</li> <li>• Their coping strategies;</li> <li>• Their access to, and control over, resources;</li> <li>• The different obstacles they face in devoting time to income generation (i.e. conflicts with education, child care, household duties, and community duties).</li> </ul> </li> <li>2. This gender analysis is reflected in planning documents and situation reports.</li> </ol>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>Design</b>	
<ol style="list-style-type: none"> <li>1. Single sex focus groups are conducted so men and women have input into the local labour market analysis and jobs that are created.</li> <li>2. Females and males have a voice in deciding what jobs they are willing to do.</li> <li>3. When feasible, training and support is built into the program to accommodate males or females who chose to undertake income-generating activities that are not conventional for their sex.</li> <li>4. Implementers of job creation programs are aware of their obligations to create jobs for men and women that ensure a safe working environment and equal pay. Procurement guidelines and contracts reflect these obligations. Monitoring and reporting are designed to analyze the level of compliance.</li> <li>5. Males and females receive equal pay for equal work.</li> <li>6. Due to the extremely low rate of women and youth activity in the Gaza Strip workforce, set incrementally higher annual targets are set for women and youth job creation.</li> </ol>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>Access</b>	
<ol style="list-style-type: none"> <li>1. Assess gender access and mobility issues to ensure the inclusion of males and females.</li> <li>2. Women and female youth have equal access to all categories of jobs – unskilled, skilled, professional and internships.</li> <li>3. Women's, girls', boys' and men's access to jobs is routinely monitored through spot checks, discussions with communities etc.</li> <li>4. Obstacles to equal access are promptly addressed.</li> </ol>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>Participation</b>	
<ol style="list-style-type: none"> <li>1. Males and females are participating in consultative meetings/discussions in equal numbers and with regular frequency.</li> <li>2. Child care or family care provisions are in place to allow women and youth access to programs, trainings and meetings. Timing and location are male and female friendly.</li> <li>3. Strategies are implemented to raise family and community awareness of the value of women's active role in the formal and informal economy.</li> <li>4. Equal numbers of male and female in field and implementing teams demonstrate the commitment to gender equality.</li> </ol>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>Capacity Building and Training</b>	
<ol style="list-style-type: none"> <li>1. Training programs target the specific needs of male and female adolescents/youth and provide them with practical skills that they can use, including non-traditional skills.</li> <li>2. A gender balance of trainers exists or is being created.</li> </ol>	<input type="checkbox"/> <input type="checkbox"/>

<b>Actions to Address Gender-Based Violence</b>	
1. Implementers of job creation projects are aware and accountable for complying with a code of conduct that specifies equal respect for females and males and zero tolerance of gender-based violence.	<input type="checkbox"/>
2. Programs and workplaces are monitored and instances of discrimination or gender violence are referred to appropriate service providers.	<input type="checkbox"/>
<b>Monitoring and Evaluation</b>	
1. Sex- and age-disaggregated data on program coverage and impact are collected, analyzed and routinely reported.	<input type="checkbox"/>
2. Job creation monitoring explores the satisfaction of female and male beneficiaries.	<input type="checkbox"/>
3. Job creation performance indicators track and reflect gender dimensions. (i.e. CAP, emergency appeals).	<input type="checkbox"/>
<b>Sector Coordination</b>	
1. Gender focal points within sector agencies meet regularly to enrich the sector CAP and other initiatives. The gender focal point of the sector lead agency convenes these meetings.	<input type="checkbox"/>
2. The sector's member(s) actively and routinely participate in the Gender Task Force.	<input type="checkbox"/>





# Protection



## GENDER AND PROTECTION IN EMERGENCIES

The wider political environment fundamentally determines the all encompassing state of uncertainty, violence and insecurity that continues to mark the lives of all Gazans. The ongoing lack of accountability for violations of international law by responsible duty bearers (primarily the government of Israel, but also the Palestinian Authority and the Hamas authorities) added to the extreme constraints placed on humanitarian access, have left Gazan men, women and children in a profound state of vulnerability and insecurity, while simultaneously denying them access to the most basic mechanisms of protection and justice.

In international law, protection is first and foremost the responsibility of the State. In the context of Gaza, with no State as such, there are multiple and conflicting duty bearers (Israel, Hamas authorities, and the Palestinian Authority) with differential levels of power, differing attitudes towards protection responsibilities, as well as differing practical abilities to implement protection, even when willing to do so.

However, human rights and humanitarian actors also have protection responsibilities based in international legal protocols. Policies, programmes and operations should all correlate with principles emanating from international human rights, humanitarian and refugee laws and should ensure the rights to protection of all members of the affected population. In addition, humanitarian actors have the responsibility to ensure that their actions are in accordance with the principles of gender equality that are enshrined in international protocols. Gender equality is, first and foremost, a human right. Mainstreaming a gender perspective in all of our policies, programmes and operations in order to achieve gender equality forms an important aspect of our protection responsibilities.

Protection responsibilities of humanitarian actors fall into three broad categories of action:

- Responsive action — activities undertaken in the context of an emerging or established pattern of abuse and aimed at preventing its recurrence, putting a stop to it and/or alleviating its immediate effects;
- Remedial action — activities aimed at restoring women's, girls', boys' and men's dignity and ensuring adequate living conditions through effective remedy and reparation, including supporting due process of law and justice for victims while combating impunity; and
- Environment building — activities aimed at creating or consolidating an environment conducive to full respect for the rights of individuals.

Activities for protection will vary according to specific institutional mandates and capacities. For example, human rights workers may protect women and girls by monitoring and investigating abuses and working with national authorities to open judicial inquiries and pursue prosecutions of perpetrators. Humanitarian workers protect women, girls, boys and men by, for instance, ensuring the delivery of critical relief supplies or improving the physical security of people affected by conflict or disasters. The complementary relationship between the work of human rights and humanitarian organizations is of special importance since both aim to protect people from rights violations and ensure that they can live their lives in dignity and safety. In addition, reporting and monitoring of human rights violations should inform and ensure appropriate response through referral services or advocacy.

This argument could be further strengthened by referring to the link between reporting and monitoring human rights violations and the need to ensure appropriate response through referral services or advocacy.

Practices within a community, including cultural, traditional or religious practices, may violate the rights of women and girls and serve as obstacles to achieving gender equality. In such situations, it bears noting that international law is negotiated by States, which then voluntarily agree to be bound by it. The international human rights treaties, including the International Covenant on Civil and Political Rights (ICCPR), the International Covenant on Economic, Social and Cultural Rights (ICESCR), the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and the Convention on the Rights of the Child (CRC), contain minimum acceptable standards. While culture and social factors should be considered, humanitarian actors should at all times respect and promote respect for these standards and work with all parties, including States and the communities concerned, to ensure that the rights of women and girls are respected, promoted and fulfilled.

## Focus on Gaza

The recent 23-day military bombardment by Israel exemplifies the extent to which Gazan men, women and children suffer from a profound and comprehensive lack of protection. However, the war should be seen in some sense as the culmination of a much longer and systemic context of violence in which Gazans have lived. Physical insecurity, lack of ability to protect one's family, lack of access to basic rights of movement (even for critical medical cases), vulnerability to internal violence, added to deep economic crisis have been the dominant experience of all Gazans for almost a decade.

At the same time, the causes, experiences of, and vulnerability to human rights violations and abuses are multi-layered. All Gazans, regardless of age, gender or socio-economic status, collectively suffer the effects of violations generated by external actors, such as siege, sanctions, and military violence at the hands of the government of Israel. Within Gaza, however, individuals are differentially vulnerable to a range of violations generated by internal actors. Rights can and often are violated due to reasons of political affiliation, gender, age, poverty and family or clan membership. Violators of rights can include governmental authorities and their allied institutions (including everything from ministries, courts, the police, medical and educational staff), paramilitaries, local informal leaders, the extended family, individual family members and finally, humanitarian actors and organizations.

### Security and Protection Issues in Gaza

Within Gaza, different sectors of the population are vulnerable to different security and protection abuses and violations.

#### I. Protection Issues Facing Men

*In this (focus group) discussion there's security, there's no fear and I talk freely, but in other contexts I feel that there may be danger. I couldn't talk about these issues and problems. Security opens the horizon to everything we need in life.*

(Ahmad, 48, father of fourteen, Jabaliya)

*We need protection for farmers and their agricultural lands, land that we completely depend on for our livelihoods. I was waiting for the grain crops the whole year, but now I can't even get to my fields to harvest them because the Israeli military fires at us. I can't guarantee that I'll live and return to my family if I try and reach my land.*

(Atif, 44, father of twelve, Khuz'a)

#### Physical Violence:

In the UN Gender Task Force survey and various focus group discussions, the findings showed that men are primarily vulnerable to forms of public and political violence. These include perceived and real vulnerability to Israeli military violence (especially by young men), but also to inter-factional, political and clan violence, whether at the hands of local military authorities or paramilitaries. Men expressed a high sense of anxiety about the potential violence they face in the public sphere and the lack of recourse to justice and protection from the local authorities, who are often the source of the violence itself. In addition, there is the continuing Israeli military violence that confronts farmers across the eastern areas of Gaza who try and get access to their agricultural lands, lands which their livelihoods depend on and that also play a pivotal role in providing for Gaza's overall food security.

#### Labour Rights:

Among male labourers and the self-employed, there is an acute lack of labour rights and protection. Former workers in Israel, now unemployed, have no forms of unemployment compensation. Within Gaza, workers outside of the public sector do not have the bare minimum of labour rights and protections. Men who have taken up unskilled jobs within Gaza's private sector have no rights to minimum wage, health insurance, compensation or indemnity for injury or loss of work. In addition, self-employed workers do not have access to health insurance.

## II. Protection Issues Facing Boys and Adolescents

My father, he's always nervous and bad tempered. He's always hitting me and my younger brothers and our mother. At school, the teacher beats boys who miss class; they get eight hits with a stick. He has a special stick for beating us.

(Mahmud, secondary school student, Deir al Balah)

My brother beats me and my younger brothers all the time.

(Ahmad, secondary school student, Deir al Balah)

There's a lot of pressure from our families. I want to go out and they won't let me, they always want me home because they're scared for me. The society is all violence.

(Iyad, secondary school student, Deir al Balah)

### Physical Violence:

Young boys and adolescent males both suffer from physical violence at school. Focus group findings show that in boys' schools, corporal punishment was the everyday norm rather than the exception. Boys' negative attitudes towards school cannot be separated from the fact that it is the place where they are constantly vulnerable to physical violence from adult authority figures. Boys of all ages perceived school as an environment where their rights were consistently violated and they were treated as if they were a danger to the social order. Abuses at school can lead to alienation from adult authority and a loss of interest in completing education. According to focus group results, however, boys in Gaza try to maintain a positive self-image despite the negative stereotypes imposed upon them by teachers and school officials.

Boys are also vulnerable to physical violence from fathers and older siblings. Similar to the patterns in schools, physical violence was the main means through which family members exercised authority over boys. At the same time, boys in the focus groups suggested that the violence they face from their fathers and older siblings is often an outcome of their general frustration rather than a reaction to a negative behaviour of the boys themselves. Many boys stated that they try to spend as much time outside the home as possible in order to avoid their fathers, who are in a constant state of frustration and anger.

## III. Protection Issues Facing Married Women

Yes, there's violence in my home, I find myself hitting my wife and my sons. It's uncontrollable sometimes, when I'm feeling really nervous.

(Anwar, 44, unemployed, father of six, Jabaliya)

Violence between husbands and wives rose after the war; they fight about the lack of work and the lack of money.

(Jamila, 40, mother of five, Beit Lahiya)

### Physical Violence:

Women are primarily vulnerable to violence in the domestic sphere rather than the public sphere. Throughout both the survey findings and focus groups, the issue of rising domestic violence against wives was a main concern consistently voiced by both men and women. At the same time, the most common form of domestic violence against wives voiced in the focus groups appeared to be verbal rather than physical or sexual abuse. Young wives in extended family households were more likely to suffer from physical abuse than other women. The degree of recurrence and severity of domestic violence against wives needs to be carefully assessed when developing interventions to protect female victims of domestic violence, with a priority for women who suffer severe and repeated forms of abuse. In addition, given that the majority of women in the UN Gender Task Force survey said that female victims of domestic abuse go primarily to female family members for support, it is clear that the norm is to keep the issue a female family matter. Taking such cases into the public, therefore, is perceived as extremely negative and women who do so are likely to suffer familial and social retribution. As such, programs need to be highly sensitive and provide support that is appropriate to the context and that does not further put afflicted women at risk.

#### IV. Protection Issues Facing Divorced and Widowed Women

Women who have lost a spouse/male breadwinner are among the most vulnerable and least protected of all women in society. In terms of livelihoods, this fact is recognized by both UNRWA and the Ministry of Social Welfare; female headed households are the one social category in the oPt who are eligible for permanent social safety nets, however minimal. Culturally, legally and physically, women are assumed to be under the protection and guardianship of men. Thus a woman who has lost a spouse and does not have a male child at the legal age of adulthood, is seen as extremely vulnerable. Protection in these cases is not from the possibility of physical violence, as strong social control and sanctions mitigate against harassment and abuse of women in the public sphere and outside the familial context. Instead, divorced and widowed women suffer a lack of protection in accessing rights to child custody and guardianship, as well as control over inheritance from a deceased spouse.

In the case of divorced women, custody rights are often used as leverage to get a woman to give up her divorce settlement and maintenance rights. Divorce is seen as one of the worst of all possibilities for a woman; not only does she lose male protection, access to income and housing, but worst of all, divorce involves the possible loss of custody or even visitation rights to her children. Though prevailing family law in Gaza does offer divorced women some minimal guarantees and rights, Shari'a court judges are often loathe to get involved in divorce cases since judges run the risk of incurring problems for themselves with the extended family of whichever spouse he has judged against. Instead, judges prefer to throw negotiating a final settlement back on the families of the two spouses and rubber stamp the resulting agreement. Given that women's rights in divorce cases are already an extreme minimum, they are often further weakened when negotiated between contending families, with the more powerful family usually defining the outcome.

#### V. Protection Issues Facing War Widows and their Children

I have a problem with my husband's family. His brothers went and wrote down our name to get assistance, but they collect and keep all the money that should be for the wives and children of martyrs. Every time there's some help that comes, my husband's family takes it. I even hid my husband's car to keep it for my kids when they get older, but they found it and took it.  
(Abir, 35, war widow, mother of five)

My father-in-law takes my husband's pension. He got people to put pressure on me to write him down as my executor. The pension is USD 600 and he only gives me and my children USD 100 of it. On top of that, he and my husband's family take all the other assistance that we're supposed to get from charities that give to wives of martyrs and their children.  
(Fathiyyeh, 58, war widow, mother of ten)

My father-in-law takes all of the money that's supposed to come to me and my children and gives us only NIS 100 a week. NIS 100 can't begin to cover our needs. When assistance comes for us he makes sure he escorts me to the bank and after I've signed all the papers he takes the money and puts it in his pocket. I can't do anything about it. I'm scared of problems and scandal and more than anything, I keep quiet so that I can keep custody of my children. They never stop threatening that they can take my children from me at any moment. My husband had a small shop. His family sold it and pocketed the money. My husband and I had sold all my gold to buy that shop and now his family has taken everything.  
(Asma, 26, war widow, mother of five)

The 23-day Israeli military operations created more than 800 new widows who, along with their children, face a range of new protection issues and challenges. Culturally and politically, war widows and orphans receive extended formal, material and moral support from political groups and the governing authorities, as well as informal support from the society at large. At the same time, in the extremely resource poor environment of Gaza, they are vulnerable to many of the same challenges faced by divorced women in terms of access to family property and child custody.

The majority of war widows interviewed in focus groups faced major challenges to their rights from their deceased husband's family upon his death. These included fights, threats and manipulation by fathers and

brothers-in-law to get control of pensions, martyr payments from the government, existing bank accounts, movable assets such as businesses or cars, as well as immovable property such as housing. In no cases was physical violence reported, but more prominent were threats that the widows would lose custody rights of their children. Many women were also put under pressure to marry brothers-in-law (another ruse to keep deceased husbands assets in the extended family), though all had refused. A common refrain among war widows was that the hardest thing they faced was lack of protection, especially mentioned by women who did not have a son of legal maturity.

In these cases, the law as well as public opinion is with the widows and their children. For instance, one young widow consulted a religious leader who guaranteed her rights. The problem in these cases is social; widows do not want to bring shame on their children or the memory of their husband by going public (including to a court) with their problems. In addition, their children's belonging in the kin framework of Gaza is to their deceased father's family, if only in name. Thus, many widows prefer the long term security of good relations with their spouse's family for the future of their children, rather than material rights for them in the present. The majority of war widows, two months following the loss of their spouse, had left their husband's home if it belonged to their husband's extended family (which is theirs by legal and cultural right) and moved in with their own parents. Only one woman, whose husband's home was separate and owned (bought or built) outright by him, remained living in it after his death. None of the women had considered opening a legal case against their in-laws.

## VI. Protection Issues Facing Adolescent Girls

There's a lot of violence in my family practised by my father and brothers against us (women and girls). If they ask for something and I don't do it they swear and hit me and they get angry with my mother and sisters.

(Isra', secondary school student, Khan Younis)

My mother hits me when I don't want to go to school. She beats me until I go.

(Alia, secondary school student, Khan Younis)

My father and my brothers are very nervous. The first thing I do when they get angry is to get out of their sight so they won't hit me.

(Alia, secondary school student, Khan Younis)

### Physical Violence:

Focus group findings suggest that adolescent girls may be subjected to domestic violence more than their mothers. Older male siblings, in particular, and fathers were cited as using both physical and verbal violence against them. Girls also mentioned that they shy away from their fathers, who were described as angry and volatile and were also cited as using verbal abuse against them.

Girls are also vulnerable to violence at school. Once again, corporal punishment meted about by teachers was cited as the norm in the school environment, though at a lesser rate and at a lower level of severity than that facing boys.

### Mobility Restrictions:

There are extreme constraints put on adolescent girls' mobility in Gaza. This is due to family fears in the context of cultural norms that perceive young women's bodily security (including virginity) as crucial to their future life chances in terms of their eligibility for marriage. Adolescent girls can literally be described as living within a social prison within the larger prison of Gaza. Young women complained of boredom and limited horizons due to their restricted freedom of movement. Lack of access to recreation outside the home seems to lead to a much greater focus on studying amongst girls; across the oPt, girls consistently outperform boys in terms of grades, including scores in *tawjihi*.

## Recommendations to ensure gender equality programming in the protection sector:

1. Focus on sources of different forms of violence, making sure to include social and economic dimensions and not solely political causes of violence;
2. Integrate the concept of rights and protection in all sectors in order to ensure it is a fundamental aspect of the work of organisations and associations in their interactions with beneficiaries;
3. Call for establishing alliances to support the varying protection issues relevant to adolescents, children, women and men;
4. Promote awareness of protection issues among household members (particularly the most influential), community and polity across geographic areas and sectors;
5. Widen services related to protection (counselling, legal aid, etc) to other sectors (i.e. education, healthcare, etc);
6. Strengthen the Rights-Based Approach in outreach and service provision to beneficiaries.



## Checklist to assess gender equality programming in the protection sector:

The checklist below provides a useful tool to remind sector actors of key issues to ensure gender equality programming in the protection sector. In addition, the checklist, together with the sample indicators in the Basics of Gender in Crisis chapter, serves as a basis for project staff to develop context-specific indicators to measure progress in the incorporation of gender issues into humanitarian action.

<b>CHECKLIST for the PROTECTION SECTOR</b>	
<b>Checklist for Assessing Gender Equality Programming for Protection</b>	
1. A comprehensive assessment has been conducted of the protection needs of women, girls, boys and men, including assessment and analysis of customary and other practices preventing women and girls from enjoying equal rights and achieving full equality with men and boys.	<input type="checkbox"/>
2. Gender analysis of national legislation has been carried out to identify gaps and advocate for reform as required.	<input type="checkbox"/>
3. The capacity of individuals, communities, NGOs, civil society and local authorities has been assessed to prevent and respond to protection risks and problems.	<input type="checkbox"/>
4. Human rights protections are integrated into humanitarian needs assessments, programming, monitoring and evaluation, including the Common Humanitarian Action Plan (CHAP) <sup>4</sup> .	<input type="checkbox"/>
5. Equal numbers of men and women in affected populations are trained on their rights, including the specific rights of women and girls such as CEDAW and Security Council resolution 1325.	<input type="checkbox"/>
6. All UN humanitarian workers and partners are aware of and understand the UN policy on protection from sexual exploitation and abuse (SEA) and ensure accountability for any staff engaged in SEA in the humanitarian field.	<input type="checkbox"/>
7. Women, girls, boys and men participate in assessments, implementing and evaluating policies and programmes.	<input type="checkbox"/>
8. A mechanism for monitoring and reporting human rights violations exists, is easily accessible to the affected population and responds to the particular needs of women, girls, boys and men.	<input type="checkbox"/>
9. An analysis of how humanitarian programmes affect human rights, in particular the rights of women and children, is routinely undertaken.	<input type="checkbox"/>
<b>Possible Protection Activities: Responsive Action</b>	
1. Alleviate immediate suffering by means of appropriate material assistance, medical assistance and psycho-social care to affected persons and their families.	<input type="checkbox"/>
2. Provide direct services to persons exposed to abuse by means of their presence in the affected areas, IDPs/refugee camps, places of detention, etc. Such services could include transfers / evacuations, registering persons, re-establishing/maintaining family links (tracing missing relatives, organizing family visits, exchanging messages and/or letters), information and communication (e.g. about human rights conditions, conditions for return, information about the work of various organizations, location of resources, and so forth).	<input type="checkbox"/>
3. Monitor and document protection issues, including providing information to officials at UN headquarters, inter governmental human rights mechanisms and other such bodies.	<input type="checkbox"/>
4. Pressure the authorities concerned through public disclosure into taking the required measures to stop and prevent abuse.	<input type="checkbox"/>
5. Contribute to obtaining respect for judicial rights of the individual by providing legal assistance /support to the persons subjected to a judicial process and their families; supporting and protecting institutions (government, local NGOs, etc), working toward respect for rights as well as individuals working as human rights defenders.	<input type="checkbox"/>

<sup>4</sup> The CHAP is a strategic plan for humanitarian response in a given country or region. The CHAP is the foundation for developing a Consolidated Appeal or, when crisis breaks or natural disasters strike, a Flash Appeal.



<b>Possible Protection Activities: Remedial Action</b>	
1. Provide direct services to the persons affected by abuse by means of: their presence in affected areas, displaced/refugee camps, places of detention, etc; help in voluntary repatriation/resettlement/return of property, housing and land; restitution/(re)integration/final arrangements; maintaining family links; contributing to the setting up of mechanisms to clarify the fate of missing persons; facilitating information and communication.	<input type="checkbox"/>
2. Promote and/or support the due process of law and justice for both perpetrators and victims.	<input type="checkbox"/>
3. Integrate protection services within the package of public services (i.e. health and social care).	<input type="checkbox"/>
<b>Possible Protection Activities: Environment Building</b>	
1. Disseminate, promote and apply international human rights and humanitarian standards (i.e. CEDAW, SCR 1325).	<input type="checkbox"/>
2. Promote the drafting and adoption of treaties and the development of customary law.	<input type="checkbox"/>
3. Promote the administration of a fair system of justice providing for punishment and reparation for violations of international human rights and humanitarian law.	<input type="checkbox"/>
4. Promote knowledge of and adherence to human rights and humanitarian law instruments and principles among all groups concerned.	<input type="checkbox"/>
5. Undertake advocacy; bring violations to the attention of human rights monitors and protection officers so that they may make representations to the relevant authorities.	<input type="checkbox"/>
6. Provide protection training for international staff, national authorities, non-state actors, civil society, the judiciary, the police, prison staff, etc.	<input type="checkbox"/>
7. Institutionalize HR and protection issues within the strategic plans for Governmental and NGO's entities.	<input type="checkbox"/>
8. Support the building coalitions and networks against GBV on public, community and institutional levels.	<input type="checkbox"/>

# Shelter



## **An Adequate Standard of Living, Including Housing, Is a Human Right for Everyone**

- UDHR, Art. 25 and ICESCR, Art. 11 guarantee the right of everyone to a standard of living adequate to ensure health and well-being, including food, clothing, housing, medical care and necessary social services. This right also implies continuous improvement of living conditions. In emergency situations, participatory planning must be undertaken to ensure the right to an adequate standard of living for people. Although emergency shelter per definition normally does not meet the criteria of “adequate housing,” a number of minimum human requirements are still applicable in the emergency shelter context, i.e. shelters should be designed in such a way as to ensure the right to privacy (Art. 12 UDHR, Art.17 ICCPR), the right to security of a person (Art.3 UDHR, Art. 9 ICCPR), the right to health (Art. 25 UDHR, Art. 12 ICESCR) and the right to food (Art. 25 UDHR, Art. 11 ICESCR), etc;
- Planning must include assessing and ensuring that shelter distribution and allocation to families and households are made in a non-discriminatory manner, without distinction of any kind as stated above. The rights and needs of women, girls, boys, female-headed households, widows and other groups to specific needs should be addressed, possibly through the adoption of affirmative measures like targeted actions that positively impact specific groups.

## GENDER AND SHELTER IN EMERGENCIES

The latest Israeli military operations have resulted in the total destruction of over 4,000 housing units and the damaging of 11,500 housing units. An estimated 75,000 people have been displaced or remain in very difficult conditions<sup>5</sup> (UNDP survey, 2009). The two year blockade of the Gaza Strip exacerbated the already difficult living conditions there, as stocks of construction materials for emergency repairs remain restricted from entering Gaza. Most persons displaced by the Israeli military operations are staying with host families or in rented houses, while hundreds of others are staying in tents on the ruins of their houses.

In the initial stages of an emergency where populations have been displaced, shelter is especially important for safety, protection and human dignity, as well as to sustain family and community life. Gender considerations have to be integrated into shelter planning and programmes in order to ensure that women, girls, boys, and men affected by crisis benefit equally from adequate shelter.

Assigning sites for individuals or communal shelters should take into consideration proximity to services. Close proximity to basic services frees up time for women, girls, boys and men to undertake other useful activities. Girls and boys will have more time to attend school, and women and men to work and participate in community activities.

Privacy is especially challenging in communal shelters, especially since they can become overcrowded quickly. The privacy and security of families and individuals is essential, particularly during the night. Separate facilities, like bathrooms and toilets, should be constructed for women and men. In addition women and girls usually expect to have private spaces for changing clothes, etc.

In emergencies, some of the elderly, people with disabilities and female headed households may be unable to construct their shelters and may require support, especially persons with disabilities who require specific facilities to accommodate for their special needs.

In situations of displacement, there is always loss of personal property. In addition to food, people affected by crisis need basic life-saving non-food items (NFIs) for their survival, including items such as blankets, sleeping mats, plastic sheeting, clothes and shoes to safeguard them from environmental conditions. Kitchen sets are essential items for every family, as well as soap and washing powder to ensure personal hygiene. Jerry cans are needed to collect drinking water and to keep it safe from contamination. In addition, women and girls need sanitary supplies. Children, too, have specific needs, especially those who have been orphaned and require baby food, clothes, diapers, and so forth.

The logistics of NFI distribution can also make a big difference. It is important to consider who receives the NFIs or when the NFIs are distributed to ensure that women, girls, boys and men benefit equally from these commodities. It is important to hold discussions with community members in order to receive feedback on distribution mechanisms and make modifications wherever feasible so that women, girls, boys and men all have access to distribution points and are all able to receive the NFIs for their use.

### Focus on Gaza

The concept of shelter usually alludes to the home as a secure and private space. In the context of war and emergencies, however, the meaning of shelter expands to encompass a safe haven from military violence.

Providing a secure home for one's family is among the most important of men's gender responsibilities in most societies, but particularly so in the family-oriented, male-dominated context of Gaza. The words for home and family are almost inter-changeable in Arabic, attesting to the fact that founding and developing a family are considered profoundly dependent on the ability to provide them with a legally and physically secure dwelling. Men's duties to provide a home go beyond their own family's immediate needs, but also carry over to the next generation; historically fathers have a duty to help establish a home, usually in the form of an extension to the original structure, for their sons upon marriage. While the latter remains a perceived duty of fathers, there is social acceptance for the lack of its achievement given the profound crisis facing male breadwinners in contemporary Gaza.

<sup>5</sup>"Inside Gaza: Attitudes and perceptions of the Gaza Strip, residents in the aftermath of the Israeli military operations," UNDP, February 2009.

The findings of the UN Inter-Agency Gender Needs survey attest to the anxiety men face in trying to accomplish the socially prescribed gender responsibility of providing a home for their families. While male IDPs were more uncertain than female IDPs about their ability to return to their homes, men in general were much more likely to see access to justice issues in terms of lack of access to a home or land than women. In the focus groups, many women remarked that against their husbands' will, they took their children and fled to safer quarters, leaving behind husbands who refused to leave the family home, even when it was at the centre of military bombardment. Many men said they sent their wives and children to stay with family, but would not themselves leave their home, also attesting to the profound responsibility men carry in relation to providing and preserving a home for their families.

The secure private family space of the home for women and girls is also of exceptional importance in Gaza due to dominant norms of female modesty and varying degrees of gender segregation. Segregation operates according to expected norms of modest behaviour and is also situational. The workplace, public offices, public transport the market and school are all places where non-related women and men mix and interact. In these places, their segregation is not physical, but is accomplished through men and women's proper comportment and behaviour in public interaction. However, in general, public space as a whole is perceived as a male arena. Women only enter it in order to accomplish particular tasks, while for men, the street, coffee house or the area in front of one's shelter are all places to relax and socialize. Thus, the majority of women and girls' time is spent within the confines of the family home and it is perceived as the preferred place for them. Segregation norms within the home are accomplished by the creation of reception areas where male visitors will not have to interact with female members of the household nor disrupt their ability to move throughout the house.

In this light, it is not surprising that the UN Inter-Agency Gender Needs survey found that families who were displaced or lost their homes during the war expressed an acute sense of vulnerability towards the bodily safety and security needs of their female family members. In addition, displaced women were more likely than other women to say they felt unsafe using a bathing or latrine facility.

### I. Shelter and the 23-day Israeli military operations

I had problems when we sought shelter at my wife's family's house. They have women and I cannot see the wives of my brothers, as they are non-relatives. So I'd stay outside on the street during the day, around the house. Even though it was dangerous, there was no alternative, so the women could feel free in the house or free going to the bathroom. I felt like I was a real burden on them.

(Ramzi, 34, father of four, Jabaliya)

My whole extended family and I went to a school shelter where 60 people were crammed into a classroom. The first night we almost died from the cold. So we asked the people who were already there for blankets. There was nothing: no water, no food, no covers. My whole life I'll never forget sleeping on the bare floor tiles, sleeping in a room with 60 people, most of them young men. In my life I've never slept near anyone. We'd cover our heads in our sleep and wake covered up.

(Suzanne, 34, unmarried, Rafah)

While tens of thousands of families fled their homes during the 23-day Israeli military operations, seeking safe haven with relatives or in UNWRA schools, the vast majority returned to their homes after its end. For all, terrifying memories still lingered months later. However, for those who had spent the war in *ad hoc* shelters in UNRWA schools, an additional burden of memory existed in feelings of shame due to the way in which the facilities could not provide for norms of gender segregation and modesty to be observed. Un-related women, girls, boys and men were forced to sleep in the same space, crammed into classrooms due to the lack of available space. In addition, school toilets had to be shared with no division according to gender. The schools and their infrastructure were not designed to house families in the case of war, nor was there an expectation that they would be used in this way. As such, the school shelters neither had basic living facilities for cooking and sleeping, nor did their bathrooms suffice to meet the needs of large numbers of un-related men, women and children. The problem was compounded by the fact that families who sought shelter in schools often did so because, due to their large numbers, they could not be accommodated by relatives.

## II. Issues Facing Households with Moderate Damage to their Shelters

The range of damage to homes included complete destruction of entire structures to more superficial damage of windows and water storage tanks. Among those most heavily hit were farmers in the eastern areas of the Gaza Strip, who suffered both destruction of their agricultural livelihoods as well as their family homes.

We haven't gotten any type of assistance; even our water storage tank is unusable because it was directly hit by ammunition. No one is compensating us and we can't afford to buy a replacement for the one that was destroyed, even though they are available in the market.  
(Khalil, 57, father of eight, Khan Younis)

Throughout the interviews with men and women across Gaza, many reported lesser and varying amounts of destruction to their shelters, with the most common problem being destruction to household water tanks that they could not afford to replace. Though not a representative sample, only one family in the focus groups cited getting a grant from UNDP to fix their home and stated that it did not even cover the costs of fixing a few windows. All participants in need of repairs to their homes understood that the blockade and sanctions on Gaza were the main obstacle to carrying out the repairs. Many men in poor households had previously worked in the construction sector and simply needed the materials in order to make the necessary repairs. However, most had little idea of programs underway to help with home repairs and rehabilitation. Men showed a great lack of confidence towards how such aid would be distributed.

I live on the seventh floor of an apartment building. There's no place to make a fire. We lived the whole war on canned foods. Only when there was electricity did we cook.  
(Siham, 35, mother of three, Rafah)

A different problem that is also related to shelter is the scarcity of cooking fuel which was raised by households across the Gaza Strip. Many have resorted to using scrap wood and carton when gas and kerosene are not available. Families living in high rises and/or with no access to outside areas have more limited choices of alternatives because they cannot make fires within the home.

## III. Categories of Households with Severely Damaged or Destroyed Shelters and Issues They Face

### Categories of IDPs

When we got back to our home it was all burnt. It was only two rooms and there was nothing left: no clothes, no furniture, nothing. We cleaned out one room and that's where we're living.  
(Suzanne, 24, unmarried)

I went to one of the schools during the war and like the others said, it was one nightmare in the school and then when I came back to my house, it was destroyed and that was 100 nightmares. Today I'm in a tent. There's nothing: no water, no sewage and no toilet. My husband, our four kids and I go sit in front of our destroyed house during the day and at night we come back to the tent. It's hot and...(she breaks down crying).  
(Aisha, 48, mother of four)

After our house was destroyed I came to my family's house with my husband and children. There's a tent for us, but my family won't let me stay there. My husband stays out of the house until nine at night, even though he's a relative, he doesn't want to make life difficult for the women of the house.  
(Rania, 25, mother of three)

Families who have lost their home can be divided into four main categories of IDPs according to their current living situation:

\* Renters

The luckiest are those with a steady income who have been able to rent a dwelling. Renting was the preferred solution stated by all of the IDP women interviewed in focus groups. The current problems among this group are lack of NFIs, a relatively lower level of access to humanitarian aid, as well as uncertainty about the future possibility of returning to and rebuilding their homes.

\* Living with Relatives

Many in this situation do not find it an ideal solution. Relatives on either side are often already over-crowded. The large family size of most Gazan families (including among IDPs) and often large numbers of small children, means that moving in with relatives is a huge burden on them and provides many opportunities for friction, a situation that dependent families can ill afford. In cases where an IDP family goes to the wife's family, this creates a modesty problem for the host's female family members, especially if the husband is not a blood relative. In this case, a woman remarked that her husband stays out of her family home all day in order not to create a burden for her sisters and mother. Again, among this group there was a lower level of access to humanitarian aid.

\* Those Living in Parts of Their Destroyed Home

Among some IDPs, living in part of their destroyed house was still seen as preferable to staying in a tent, regardless of the state of the remaining house. These cases had better access to humanitarian aid.

\* Those Living in Tents

Finally, it is those with absolutely no other options who, two months after their homes were destroyed, are staying in tents, either next to their destroyed homes or in tent camps. The main problems facing IDP women in tents will be discussed below.

### Issues and Priorities Voiced by all categories of Women IDPs

*The best assistance is if they would just let building materials get into Gaza so we could re-build our houses, after that I don't need anything else.*  
(Aisha, 48, mother of four)

Regardless of their current living situation, all IDP women shared some basic similar concerns. These included:

\* Non-food items (NFIs)

Most IDPs interviewed fled their homes in fear for their lives, so took almost nothing with them. Almost all of them lost most of their possessions with the destruction of their homes.

Clothing for all family members, but especially for women and children, was a main priority, although women who received used clothing found it an extremely humiliating experience. Few charities provided new clothing. A second issue was the need for bedding (covers, pillows, etc), although this seems to have been taken care of quite quickly following the end of the war.

Only one woman said that she received cooking implements and was extremely positive about receiving them.

### IV. Access to NFIs and other aid

Women still living in tents have clearly had much greater access to all forms of humanitarian and charitable aid. Women staying with relatives or returned to half-destroyed houses had much less access to NFIs specifically, although they were equally in need of them.

**Preferred form of assistance:**

All women preferred to receive cash assistance to buy their own NFIs, as well as to select their own food items.

**Issues of Critical Concern to IDP Women Living in Tent Facilities****The need for sanitation facilities to meet the required norms of female modesty:**

All IDP women interviewed continued to talk about the anguish of staying packed together with non-relative males in school shelters for the duration of the war. In addition, school toilets and bathing facilities gave women no sense of physical security and did not provide the desired level of normative modesty. Now in the tents, they continue to relive the anguish of the lack of modesty they faced in the school shelters. Women find it absolutely impossible to use the public latrine facilities and maintain a sense of physical modesty, which is profoundly linked to their sense of physical security and well-being. Some women said that they were using a bucket inside their tent rather than using the latrines, which potentially could lead to a health and sanitation hazard. In addition, all of them were going to private homes of relatives in order to shower, some only once a fortnight, but the majority once a week. These modesty issues extend to their adolescent and young daughters as well, who they say have problems keeping clean in such circumstances. Additionally, women state that the already critical sanitation issues they face worsen during their menses, where they do not have a suitable facility in which to accomplish their most basic hygienic needs in a modest and acceptable way.

**Cooking facilities:**

Women see being able to cook as a main way that they can play a role in returning their families to some semblance of normalcy. The lack of cooking facilities in most IDP tent environments is therefore not just an issue of nutrition, but one of providing a sense of a return (no matter how limited) to normal life. Although canned items were a practical response by humanitarian actors to IDPs' nutritional needs, all IDP women express strong distaste, even repugnance, towards the majority of canned foods, which they say are not part of their regular diet.

**Participation:**

All women said that only one organization had consulted with them on their needs (CARE International). Otherwise, they said the only people to ask them about their needs were the steady stream of journalists reporting on the Israeli military operations. They had limited specific information about plans underway to rebuild. They all expressed a strong desire and need to be consulted on their current situation as well as their future needs.

**Shelter rehabilitation:**

It is clear that payments to families who lost their homes have not been systematic. Some have received a few thousand Euros, which they said would not be enough to replace lost furniture, let alone rebuild. Those who had received this aid (from the de facto government authorities) tended to use it to get out of tents and into rental apartments. However, most of those interviewed had not received any compensation. The only woman (a widow) who received help in rebuilding/refurbishing the remains of her home received help from her local community organization. All the women stated that their main priority is "for the borders to open and building materials be let in," so that they can rebuild their homes.

**V. Other Sectors Facing Shelter Issues in Gaza****Adolescents with Special Needs:**

Lack of disabled access in UNWRA and government schools is a main concern and issue raised by adolescents with special needs, especially given that special needs schools only go up to the sixth grade. In addition, for those living in apartment buildings, the lack of elevators means that family members have to physically carry them in and out of the house. Clearly, given the number of injured individuals with special needs throughout the Gaza Strip, reconstruction of both shelters as well as public facilities needs to take into account building in access for those with disabilities.

### Recommendations to ensure gender equality programming in the shelter and NFI sector:

- Design well accommodating shelters;
- Implement outreach activities where everybody knows about the current activities and can get knowledge about the programmes in the shelter sector and how to access these programs;
- Provide safe passages for groups moving to the shelters;
- Involve persons with disabilities and their families in the planning and decision-making of the reconstruction process in order to ensure accessibility in shelters;
- Rebuild adapted houses/shelters for persons with disabilities in order to address their specific needs or provide assistance to persons with disabilities and their family members who are building their own shelters.





## Checklist to assess gender equality programming in site selection, design, construction and/ or shelter allocation:

The checklist below provides a useful tool to remind sector actors of key issues to ensure gender equality programming in the shelter/NFI sector. In addition, the checklist, together with the sample indicators in the Basics of Gender in Crisis chapter, serves as a basis for project staff to develop context-specific indicators to measure progress in the incorporation of gender issues into humanitarian action.

<b>CHECKLIST for the SHELTER/NFI SECTOR</b>	
<b>Analysis of Gender Differences</b>	
1. Information is gathered on cultural, practical and security-related obstacles that women, girls, boys and men could be expected to face in accessing temporary shelter or shelter services.	<input type="checkbox"/>
2. Information is gathered on ownership of land and property (including housing) before displacement and upon return for men and women.	<input type="checkbox"/>
3. Focus group discussion on shelter construction, allocation and design conducted with women, girls, boys and men of diverse backgrounds, including those with disabilities, and results fed into programming.	<input type="checkbox"/>
4. Information is gathered from women, girls, boys and men about family structure and NFI needs based on age and sex, with the distribution system set up accordingly.	<input type="checkbox"/>
<b>Design</b>	
1. Women and men, as well as people with disabilities, participate equally in the design of houses, the registration process and in information-sharing meetings.	<input type="checkbox"/>
2. People with disabilities, the elderly and female heads of households have access to dignified shelter. Inhabitants, especially women or groups with specific needs, are not disadvantaged by poor shelter design; shelter design is in line with customs, cultural values or concerns.	<input type="checkbox"/>
3. Public spaces for social, cultural and informational needs of women, girls, boys and men are provided and used equitably.	<input type="checkbox"/>
4. Family entitlement cards and ration cards for NFIs are issued in the name of the primary female and male household representatives.	<input type="checkbox"/>
5. Women and girls have sanitary materials and hygiene kits, including soap, underwear, head scarf, etc.	<input type="checkbox"/>
<b>Access</b>	
1. Male and female heads of households, as well as displaced women and men, have the same access to information about reconstruction of shelter and access to housing and shelter supplies.	<input type="checkbox"/>
2. Women's, girls', boys' and men's access to NFIs is routinely monitored through spot checks, discussions with communities, etc.	<input type="checkbox"/>
<b>Participation</b>	
1. Equal numbers of women and men are trained to provide guidance and timely referrals regarding safety and groups with specific needs.	<input type="checkbox"/>
2. Equal opportunities exist for training women, girls, boys and men in construction skills.	<input type="checkbox"/>
<b>Targeted Actions Based on Gender Analysis/Actions to Address Gender-Based Violence</b>	
1. Obstacles to women's and men's equal access to registration and documentation of damaged houses are addressed.	<input type="checkbox"/>
2. Obstacles to women's, girls', boys' and men's equal access and benefits from NFI distributions are promptly addressed.	<input type="checkbox"/>
3. Routine spot checks and discussions with communities to ensure people are not exposed to sexual violence due to poor shelter conditions or inadequate space and privacy.	<input type="checkbox"/>
4. A mechanism is in place for monitoring security and instances of abuse, where people can report any harassment or violence.	<input type="checkbox"/>
5. A referral system for reporting of security and abuse incidents is operational.	<input type="checkbox"/>

<b>Monitoring and Evaluation</b>	
1. Sex- and age- disaggregated data on programme coverage is collected, analyzed and routinely reported on.	<input type="checkbox"/>
2. Information is available by age and sex of individuals and groups with specific needs requiring specific protection services and assistance.	<input type="checkbox"/>
3. Plans are developed and implemented to address any inequalities and ensure access and safety for all of the target population.	<input type="checkbox"/>
<b>Sector Coordination</b>	
1. Gender focal points within sector agencies meet regularly to enrich the sector CAP and other initiatives. The sector's lead/designated member actively and routinely participates in the Gender Task Force.	<input type="checkbox"/>
2. Actors in your sector liaise with actors in other sectors to coordinate on gender issues.	<input type="checkbox"/>

# Water, Sanitation and Hygiene



## The Right to Water

- ICESCR recognizes the right of everyone to an adequate standard of living, including the right to water. The right to water is also inextricably linked to the right to the highest attainable standard of health (Art. 12) and the rights to adequate housing and food (Art. 11);
- Article 14 of CEDAW stipulates that State parties shall ensure to women the right to enjoy adequate living conditions, particularly in relation to water supply. The CRC requires State parties to combat disease and malnutrition through the provision of adequate nutritious foods and clean drinking water;
- In its General Comment No. 15, the UN Committee on Economic, Social and Cultural Rights specified the human right to water so as to entitle everyone to sufficient, safe, acceptable, physically accessible and affordable water for personal and domestic uses;
- The Geneva Conventions guarantee this right in situations of armed conflict.

## GENDER AND WATER, SANITATION AND HYGIENE IN EMERGENCIES

The 23-day Israeli military operations destroyed most of the water and sanitation services in the Gaza Strip<sup>6</sup>. Restrictions in the supply of industrial diesel into Gaza have reduced the power supply to a minimum level, resulting in thousands of people without access or sufficient access to water. The high cost of water has become an added burden to the population. Water quality is also a major concern. Sewage flooding into populated areas and farmland poses a public health risk to the population, especially children who are prone to water borne diseases. According to WHO guidelines, over 80% of drinking water sources in Gaza are not safe for human consumption.

Water is essential for life and health. In emergencies, when adequate and appropriate water, sanitation and hygiene are not available, major health hazards can result. However, simply providing water and sanitation facilities will not by itself guarantee their optimal use or impact on public health. Understanding gender, culture and social relations is absolutely essential in assessing, designing and implementing an appropriate water, sanitation and hygiene programme that is effective and safe and restores the dignity of the affected population.

As elsewhere, women in Gaza significantly influence the public health of their household members. It is women who are most immediately charged with responding to the daily problems and effects on their families' well-being, including sourcing domestic water supplies during shortages or scarcity. Understanding the special needs of women and girls for sanitary facilities is essential in the selection and design of sanitation facilities and programmes, which are important aspects of promoting dignity, especially in schools.

**Effectiveness in reducing public health risks:** Women are key actors in influencing the public health of the household. They are also a huge, often untapped, source of knowledge regarding the community and culture. Inappropriately designed programmes where key stakeholders, such as women and children, have not been involved can result in putting whole communities at risk of epidemic disease outbreaks.

**Reinforcing and reducing inequality:** Water, sanitation and hygiene programming has the potential to give a voice to members of communities who often do not have a say. This increased participation of different members of the community, including women, girls, boys, and men, can give a sense of worth and dignity, especially to those who have had it stripped away in conflict.

**Safe communities and conflict:** Inappropriate design and location of water and sanitation facilities can put a great pressure on vulnerable groups such as women and children, with increased risk from lack of privacy to access problems due to insecurity or violence. The engagement of all actors in a participatory approach can help to reduce such vulnerabilities.

### Focus on Gaza

Our water storage barrel on the roof was ruined by bullets and we can't afford a new one. From the war until now, I've been collecting the water in plastic bottles, the kind you drink from. We use the water like that for everything: for cooking, drinking and bathing. Our lives have become miserable. I can't wash our bedding because there's not enough water and I wash the kids only once a week with water from the bottles.  
(Suhaila, 44, mother of six, Beit Lahiya)

Gazan households overall do not face basic problems of access to water, although quality of potable water is an issue that causes additional burdens on household expenditures for many communities who must buy it. In terms of water for sanitation purposes, the main problem is irregularity of supply. Although sanitation infrastructure was damaged in a number of areas during the war, overall, general sanitation issues (such as lack of sewage networks) were not raised as problems by respondents in any of the communities interviewed in focus groups. As such, the water, sanitation and hygiene (WASH) issues that did emerge from focus groups tended to be more specific to particular social sectors whose homes or communities suffered total or heavy destruction during the war.

<sup>6</sup> According to Coastal Municipalities Water Utility (CMWU) Damage Assessment Report "Water and Waste Water Infrastructure and Facilities", (Gaza; 27 Dec. 2008 – 19 Jan. 2009) damages to the water and sanitation sector in the Gaza Strip as a result of the conflict amounts to almost USD 6 million.

## I. WASH Issues Facing Most Gazan Households

Across the various regions where households were connected to the water network, the main issue raised by women was the irregularity of supply. Women have to organize the range of household sanitation tasks around the availability of the water supply. In particular, laundry presents a problem because of the irregular supply of electricity as well. Sometimes there is water, but no electricity and vice-versa. All mentioned cutting back on bathing, both among adults and also for children, the latter being their first priority.

In addition, WASH issues were raised in relation to problems of fuel supply. Fuel was mentioned across the board by households as a major source of everyday crisis. Many turned to depending on scrap wood and cardboard and said that a major problem was the smoke and ash it created, as well as the difficulty of cleaning pots. Women said that the use of wood for cooking always led to a greater use of water for cleaning, including having to bathe themselves and children who could not be kept away from the fire.

## II. WASH Issues Specific to Female IDPs Living In Tents

For 18 days we slept in an UNWRA school. Then we came here to the tent camp. The tents were empty and there were no blankets, nothing, no water, no toilet. When you go to the toilets everyone watches you. I planted a bucket inside my tent in the sand (as a toilet) and when the kids go outside, I use it. In terms of bathing, every ten days I go to my brother's house. Our situation in the tents is miserable. If I tried to count the number of flies they'd reach thousands.

(Ahliya, 35, three children)

I'm in the tent 24 hours a day. There's no water and no decent toilets and at the moment I have my period. I don't know how to go out and change to keep clean. I put a bucket inside my tent for a toilet; it's a bit more modest. But when I walk to the toilets outside, everyone watches me.

(Manal, 34, four children)

Of critical concern among these women was the need for sanitation facilities to meet the required norms of female modesty. All IDP women interviewed continued to talk about the anguish of staying packed together with non relative males in school shelters for the duration of the war. In addition, school toilets and bathing facilities gave women no sense of physical security and did not provide the desired level of normative modesty.

Now in the tents, they continue to relive the anguish of the lack of modesty they faced in the school shelters. Women find it absolutely impossible to use the public latrine facilities and maintain a sense of physical modesty, which is profoundly linked to their sense of physical security and well-being. The problem does not seem to be a lack of barriers around the latrines, but the sense that as they make the trip across the camp to use them, women feel they are being watched. Thus, a very intimate and private act becomes experienced as a very public and embarrassing show. In order to avoid this situation, many women maintained that they were using a bucket inside their tents rather than use the latrines, which could potentially lead to a health and sanitation hazard.

In addition, all of them were going to private homes of relatives in order to shower, some only once a fortnight, but the majority once a week. These modesty issues extend to their adolescent and young daughters as well, who they say have problems keeping clean in such circumstances. Additionally, women state that the already critical sanitation issues they face worsen during their menses, where they do not have a suitable facility in which to accomplish their most basic hygienic needs in a modest and acceptable way.

## III. WASH Issues Facing Agricultural Households in the Eastern Villages of Khan Younis

This group faces major livelihood issues related to water access. The levelling and bulldozing of agricultural lands, including greenhouses and other irrigated agriculture, has devastated the livelihoods of farmers in these areas. Water systems as a whole, but particularly irrigation pipes for agriculture, were completely ruined by military bulldozers. Prior to the war, farmers were relatively better off than other social sectors and now many of them claimed to be receiving aid for the first time.

A fundamental aspect of rebuilding their agricultural livelihoods will be replacing devastated agricultural irrigation systems. Ultimately, this also has implications for food security for all Gazans given that these areas are crucial providers of vegetables for the local market.

#### IV. WASH Issues Facing Poor Households in Front-line Areas

I lost my living in the war. I worked as a farmer. I had a dunum and a half that I grew vegetables on and the Israelis completely destroyed it. All of our water tanks are un-usable; they're full of bullet holes. My family suffers from the water situation daily, especially now that's its summer and hot.  
(Majid, 43, six children, Khan Younis)

In the eastern villages of Khan Younis, Beit Lahiya, and Jabaliya, many poor households faced the inability to replace damaged water storage barrels. In some areas (eastern villages), water storage barrels for domestic consumption were totally destroyed, while in others they were severely damaged by bullet holes and were patched but leaking. Women in households with destroyed barrels spent a lot of time hauling water into the house by bucket and many mentioned that in these circumstances they had to cut back on aspects of family hygiene because it was too labour intensive.

In areas where there had been heavy use of phosphorous (Beit Lahiya, Khan Younis area and Rafah), households feared whether water storage barrels were harbouring chemicals that could impact their health, although proper scientific assessment still needs to be undertaken to see whether this is really the case.

#### Recommendations to ensure gender equality programming in water, sanitation and hygiene:

1. Locate sufficient latrine facilities just outside of the camp so as to allow easy access, privacy and security. Involve women in the camp in coming up with acceptable and practical designs;
2. Empower women with useful information on how to cope with sanitation in the context of irregular water supplies;
3. Check water quality by using simple test kits for chemical residues or pollutants;
4. Educate women and care givers on useful use of waste water for farming, home gardening and other domestic purposes;
5. Promote hand washing after crucial times with women and school children as critical partners.

#### Checklist for assessing gender equality programming in the water, sanitation and hygiene sector:

The checklist below provides a useful tool to remind sector actors of key issues to ensure gender equality programming in the WASH sector. In addition, the checklist, together with the sample indicators in the Basics of Gender in Crisis chapter, serves as a basis for project staff to develop context-specific indicators to measure progress in the incorporation of gender issues into humanitarian action.

## CHECKLIST for the WASH SECTOR

### Analysis of Gender Differences

- |  |                          |
|--|--------------------------|
| 1. Information is gathered from women, girls, boys, and men about.   | <input type="checkbox"/> |
| • cultural beliefs and practices in water and sanitation use;  | <input type="checkbox"/> |
| • hygiene habits;  | <input type="checkbox"/> |
| • needs and roles in operation, maintenance and distribution;  | <input type="checkbox"/> |
| • methods and time spent in water collection;  | <input type="checkbox"/> |
| 2. Data disaggregated by sex and age are used to develop a profile of at-risk populations with special water requirements. | <input type="checkbox"/> |

### Design

- |   |                          |
|---|--------------------------|
| 1. Water sites, distribution mechanisms and maintenance procedures are accessible to both women and men, including those with limited mobility.   | <input type="checkbox"/> |
| 2. Shared or communal latrine and bathing cubicles for women, girls, boys, and men are culturally appropriate, provide privacy, are adequately illuminated and are accessible by those with disabilities. | <input type="checkbox"/> |
| 3. Water and sanitation infrastructure is hygienic and meets the needs of both males and females.   | <input type="checkbox"/> |

### Access and Participation

- |   |                          |
|---|--------------------------|
| 1. Access to safe water for women, men, boys, and girls is determined using water analysis, stool analysis and prevalence/incidence of diarrhoea.   | <input type="checkbox"/> |
| 2. Women's, girls', boys', and men's access to information, services including sanitary materials and facilities is routinely monitored through spot checks, discussions with communities, etc. | <input type="checkbox"/> |
| 3. Obstacles to equal access are identified, advocated for, and addressed.  | <input type="checkbox"/> |

### Training/Capacity Building

- |  |                          |
|--|--------------------------|
| 1. Women, girls, boys and men are aware and sensitized in hygiene and environmental issues.  | <input type="checkbox"/> |
| 2. Women, girls, boys and men are trained in the use and maintenance of facilities.  | <input type="checkbox"/> |
| 3. Women, girls, boys and men are aware of the scarcity of water resources and are sensitized/trained on water use and water management. | <input type="checkbox"/> |

### Actions to Address GBV

- |   |                          |
|---|--------------------------|
| 1. Separate restrooms are provided in schools or universities.                                      | <input type="checkbox"/> |
| 2. Facilities and collection points are safe, provide privacy and are accessible (locks, lighting). | <input type="checkbox"/> |

### Targeted Actions Based on Gender Analysis

- |  |                          |
|--|--------------------------|
| 1. Unequal knowledge levels on hygiene and water management are addressed through trainings.   | <input type="checkbox"/> |
| 2. Women and men's access to water and control over use of water are monitored and inequities are addressed.                                   | <input type="checkbox"/> |
| 3. Discriminatory practices hindering women's participation in water management groups are addressed through sustainable empowerment programs. | <input type="checkbox"/> |

### Monitoring and Evaluation Based on Sex- and Age-disaggregated Data

- |   |                          |
|---|--------------------------|
| 1. Sex- and age-disaggregated data on program coverage is collected, analyzed, and routinely reported on.                         | <input type="checkbox"/> |
| 2. Plans are developed and implemented to address any inequalities and ensure access and safety for all of the target population. | <input type="checkbox"/> |

### Coordinate Actions with all Partners

- |   |                          |
|---|--------------------------|
| 1. Actors in your sector liaise with actors in other sectors to coordinate on gender issues.                  | <input type="checkbox"/> |
| 2. Actors in the WASH Sector collaborate on gender issues and share their learning from using this checklist. | <input type="checkbox"/> |



Towards gender equality in humanitarian response: Addressing the needs of women & men in Gaza



# ABBREVIATIONS

CAP	Consolidated Appeals Process
CFTA	Culture and Free Thought Center
GenCap Adviser	Gender Capacity Adviser
GTF	Gender Task Force
HCT	Humanitarian Country Team
INGO	International Non Governmental Organization
NEC	Near East Consulting
NFI	Non Food Items
NGO	Non Governmental Organization
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
oPt	occupied Palestinian territory
PA	Palestinian Authority
PCBS	Palestinian Central Bureau of Statistics
BPFA	Beijing Platform for Action
UNCT	United Nations Country Team
UNDP/PAPP	UN Development Program/ Program of Assistance to the Palestinian People
UNFPA	United Nations Population Fund
UNIFEM	United Nations Development Fund for Women
UNRWA	United Nations Relief and Works Agency for Palestine Refugees in the Near East
UNSCO	Office of the United Nations Special Coordinator for the Middle East Peace Process
WHO	World Health Organization

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