

CALL TO ACTION **on Protection from** **Gender-Based Violence** **in Emergencies**

Road Map 2016–2020
2019 Progress Report

Acknowledgments

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The Government of Canada is the current global lead of the Call to Action on Protection from Gender-Based Violence in Emergencies until December 2020. The information and views set out in this report do not necessarily reflect the views of the Government of Canada.



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Acronyms

AoR	Area of Responsibility
CASI	Child and Adolescent Survivors Initiative
CERF	Central Emergency Response Fund
CSOs	Civil Society Organizations
DFID	Department for International Development
ECHO	Directorate-General for European Civil Protection and Humanitarian Aid Operations
GAM	Gender with Age Marker
GBV	Gender-Based Violence
GBViE	Gender-Based Violence in Emergencies
HPC	Humanitarian Program Cycle
HRP	Humanitarian Response Plan
IASC	Inter-Agency Standing Committee
INGO	International Non-Governmental Organization
IRC	International Rescue Committee
LAW	Legal Action Worldwide
M&E	Monitoring and Evaluation
NGO	Non-Governmental Organization
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
PSEA	Protection from Sexual Exploitation and Abuse
REGA	Regional Emergency GBV Advisors
UN	United Nations
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
VAWG	Violence against Women and Girls
WASH	Water, Sanitation and Hygiene
WGSS	Women and Girls' Safe Spaces
WHO	World Health Organization

Foreword

The Call to Action on Protection from Gender-Based Violence in Emergencies (Call to Action) aims to drive change and foster accountability of the humanitarian system to address gender-based violence (GBV) from the earliest phases of a crisis. The Call to Action is pleased to present the 2019 Progress Report as a demonstration of this accountability. In 2019, 85 states and donors, international organizations, non-governmental organizations (NGOs) and local civil society organizations (CSOs) took important steps to advance the six outcomes of the 2016-2020 Road Map. This report explains the importance of each outcome to drive change within the humanitarian sphere so that every humanitarian effort prevents, mitigates and responds to GBV from the earliest phases of a crisis. It provides concrete examples of accomplishments and highlights the challenges partners face in advancing GBV prevention, mitigation and response from field level implementation to global advocacy.

We encourage you to read this Progress Report along with the Partner Self-Reports for a comprehensive understanding of key actions taken in 2019. The Partner Self-Reports are available on the Call to Action website.

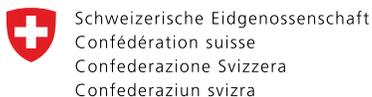
While this report reviews accomplishments in 2019, a number of collective achievements were achieved in 2020 as well. Call to Action partners not only came together to address the exponential rise of GBV as a result of the COVID-19 pandemic, but also agreed on the strategic way forward for the initiative through 2025 through the development of an updated Road Map.

Since the last Progress Report, Call to Action partners also came together to use their collective voice to advocate for and effect change. This included the issuing of three Joint Statements: for the Global Refugee Forum, for the Beijing+25 process, and on the COVID-19 pandemic and GBV.

The Call to Action likewise made strides on localization through the country Road Map work in the Democratic Republic of the Congo and in Northeast Nigeria and by welcoming ABAAD's regional representation and voice to the Steering Committee and as co-chair of the NGO Working Group. While already core to the Call to Action, localization has increased in focus in the 2021-2025 Road Map – partners are encouraged to act through commitments and implementation. The formal launch of the 2021-2025 Road Map will be an opportunity for partners to highlight their bold, measurable commitments against the updated Road Map.

We invite Call to Action partners and those interested in our collective work alike to read this report. We hope you will be encouraged by the illustrations of progress and possibly identify synergies to explore with fellow partners. For partners, we hope you will be inspired to strengthen the delivery of your commitments. We hope that others will be motivated to do more to address GBV and consider becoming a partner of the Call to Action. We recognize how challenging—and incremental—change can be. We believe in the impact of joint action, collaboration, and our ability to accomplish more together than we each can accomplish alone.

Call to Action Steering Committee 2020



Swiss Agency for Development
and Cooperation SDC



Foreign, Commonwealth
& Development Office



Call to Action Lead January 2019 - December 2020



Overview

The Call to Action on Protection from Gender-Based Violence in Emergencies (Call to Action) is a groundbreaking global initiative that aims to fundamentally transform the way gender-based violence (GBV) is addressed in humanitarian action. The goal is to drive change and foster accountability so that every humanitarian effort, **from the earliest phases of a crisis**, includes the policies, systems and mechanisms necessary to mitigate and respond to GBV, especially violence against women and girls. Partners in this multi-stakeholder initiative are states and donors, international organizations, non-governmental organizations (NGOs) and local civil society organizations. In 2019, the partnership grew to 85 members.

The need for a call to action on GBV was clearer than ever in 2019. At the start of the year, an estimated 131.7 million people were in need of humanitarian assistance.¹ By the end of the year, the figure had grown to over 167 million.² The number of people forcibly displaced from their homes and communities stood at 70.8 million. Gender-based violence remained an unacceptable reality in all crises. As the United Nations Secretary-General wrote in his 2019 report to the Security Council on Women, Peace and Security, “This year also demonstrated the impact of underlying gender inequality and violence against women as root causes and consequences of conflict issues...”³

“Globally, one in three women experiences physical or sexual violence in their lifetime. Together, we must fight gender-based violence wherever it occurs, and end the stigma that too often surrounds survivors.”

- Justin Trudeau, Prime Minister of Canada

Guiding Framework for the Call to Action: 2016-2020 Road Map

Shortly after the Call to Action initiative was launched in 2013, partners created a five-year Road Map to guide their work. The 2016-2020 Road Map lays out six priority Outcomes and actions to achieve three interlinked objectives:

- Ensure Services for Survivors: Establish specialized services and programs that are accessible to anyone affected by GBV and are available from the onset of an emergency.
- Mitigate the Risks of GBV: Integrate and implement actions to reduce and mitigate GBV risk across all levels and sectors of humanitarian response from the earliest stages of an emergency and throughout the program cycle.
- Address Gender Inequality: Gender equality and the empowerment of women and girls are mainstreamed throughout humanitarian action.

1 Global Humanitarian Overview, 2019, p. 4, <https://www.unocha.org/publication/global-humanitarian-overview/global-humanitarian-overview-2019>.

2 Global Humanitarian Overview 2020 p. 4, <https://www.unocha.org/global-humanitarian-overview-2020>.

3 Report of the Secretary General to the Security Council on Women, Peace and Security, October, 2019, p. 10, <https://reliefweb.int/sites/reliefweb.int/files/resources/Report%20of%20the%20Secretary-General%20on%20women%20and%20peace%20and%20security%20%28S-2019-800%29.pdf>.

The Call to Action is about concrete action and tangible impact. Collective action and accountability are key to its success. Global partners are expected to make measurable commitments under the Road Map and to report annually on progress in meeting their commitments. Partner reports are published on the Call to Action website.⁴ This report draws from the 2019 self-reports submitted by 48 partners, data collected from the indicators in the Road Map's Monitoring Framework⁵ and additional materials provided by partners.

A Year of Achievement, New Opportunities, Ongoing Challenges

Overall, partners reported progress under all six Outcome areas of the Call to Action Road Map. Among the highlights for the partnership in 2019:

- Launch of Inter-Agency Minimum Standards for GBV in Emergencies Programming⁶: The development of these Standards is a priority action under Outcome 5 of the Road Map on Specialized GBV Programming. This resource presents 16 Minimum Standards for GBV best practice on prevention and response programming. As one partner noted, "With the release of the Minimum Standards, we can now say: We know what to do."

- Improved GBV Risk Mitigation Work: Notable progress continues on GBV risk mitigation across sectors. Examples from several humanitarian clusters are detailed on page 21. By the end of 2019, the inter-agency team supporting the uptake of the IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action had trained over 3,600 practitioners across 12 sectors/clusters in 37 countries on risk mitigation in three years.
- Seizing Opportunities for Collective Advocacy: The Call to Action issued its first collective advocacy joint statement in conjunction with the May 2019 Oslo Conference on Ending Sexual and Gender-Based Violence in Humanitarian Crises.⁷ Conference co-hosts included Call to Action partners Norway, OCHA and UNFPA. Norwegian Church Aid also provided support. Donors pledged US\$363 million for GBV work. The Oslo statement was followed by a Call to Action advocacy statement issued at the first Global Refugee Forum in December 2019.⁸ Parties came together at the Forum to make commitments on implementation of the Global Compact on Refugees endorsed by the United Nations in 2018.
- Ongoing Efforts to Strengthen Field Implementation: Beginning in 2018, a number of Call to Action members joined with national and local partners in two pilot countries to develop Call to Action field-level road maps. Piloting of the Northeast Nigeria Road Map continued in 2019 and the Democratic Republic of the Congo Road Map was launched early in the year. Based on the learning from these pilots, a Guide to Developing Field-Level Road Maps is now available on the Call to Action website.⁹

4 <https://www.calltoactiongbv.com/general-documents>.

5 Call to Action on Protection from Gender-based Violence in Emergencies Road Map 2016-2020, pages 33-44, https://1ac32146-ecc0-406e-be7d-301d317d8317.filesusr.com/ugd/49545f_a1b7594fd0bc4db283dbf00b2ee86049.pdf.

6 Inter-Agency Minimum Standards: <https://www.unfpa.org/minimum-standards>.

7 Oslo Statement: https://1ac32146-ecc0-406e-be7d-301d317d8317.filesusr.com/ugd/486f7d_fb9d58d0ee124865808ef7188273d7e0.pdf.

8 Global Refugee Forum Statement: https://1ac32146-ecc0-406e-be7d-301d317d8317.filesusr.com/ugd/1b9009_8e85aee4c93b4867a27e3bcda064b7d0.pdf.

9 Guide to Developing A Field Level Road Map: https://1ac32146-ecc0-406e-be7d-301d317d8317.filesusr.com/ugd/1b9009_651f078e8a8749f2b3c197c1ef6a2444.pdf.

Persistent challenges that continued to impede partners' progress include:

- Inadequate Funding: GBV prevention and response remains a severely underfunded area of humanitarian work. Tackling the funding issue is further complicated by poor systems for tracking and reporting on funding, including for GBV risk mitigation, and challenges in securing GBV funding at the country level.
- Lack of Human Resources and Capacity: The pool of rapidly deployable GBV experts is still quite limited and increasing demands from the field for technical support cannot be met.
- Insufficient Partnerships with National and Local Organizations: Strong partnerships with these organizations, particularly women's organizations, is seen by Call to Action partners as one of the keys to success. However, much more must be done to ensure partnerships are mutually beneficial and that local partners are at the decision-making table. Partners noted the need for innovative approaches that break down the barriers for local and women-led GBV responses.

- Gaps in the Evidence Base: Partners specifically pointed to gaps in measuring the effectiveness of GBV risk mitigation and the outcomes of such actions for women and girls.

Each year, the Call to Action partnership seeks to strengthen its foundation, build on progress to date, and better address challenges through collective advocacy, learning and implementation in the field. This report contributes to those objectives.

Members of the Call to Action must make at least two measurable commitments under the Road Map, one of which must be under the foundational Outcome 1. Many partners have made multiple commitments across Outcomes.

In 2019, partners made progress in Key Action Areas under all six Road Map Outcomes.



The Importance of the Work: In Their Words

“The Call to Action pilot in the DRC put women’s rights and women-led organizations at the decision-making table....We are the first responders....We are the ones who have the most to say on how to have an impact on eliminating gender-based violence. Thanks to the Call to Action our voice is much more listened to. Now we need more donor trust to directly access funding.”

-Julienne Lusenge, SOFEPADI, March 2019,
Oslo Conference

“I have not been at any formal course of GBV before, thus the participation in MGBViE [Managing Gender-Based Violence in Emergencies] is a milestone...in my career life. I appreciate different strategies to make the learning sustainable and persistent, like the mentorship workshop, mentorship support, Community of Practice and so on. I am proud to be part of it.”

-Participant in International Medical Corps (IMC) Training
Program: Managing GBV in Emergencies

“For years I had wanted to get help but did not know where to go. On hearing of the legal support provided by UNFPA [UN Population Fund] and its partners, I finally received the help I needed. I now have custody of my children and a commitment from my ex-husband to pay all the expenses for my kids. My life is so much easier.”

-GBV survivor in Yemen

“We are filling some of the biggest gaps in humanitarian response and doing so with cost-effective programs that are making a real difference in our communities. We are the best value operators in town!”

-Angelina Nyajima Simon Jial, South Sudanese civil society
activist speaking to UN Security Council

“Before this project started, I was already a Burundi Red Cross Volunteer, but I was not sensitive at all to SGBV victims/survivors. I blamed them and always believed it was their fault....I learned a lot from this project. I am now an activist in my community and have also changed my attitude at home. I am very grateful to my trainer and colleagues who guided me in making this change.”

-Male Volunteer, Burundi Red Cross

“I am a mother with a disability living with two children in a marketplace. No one, including my relatives, supports me, even when where I sleep was destroyed by rain. Dignity kit items and case management support I got from IRC [International Rescue Committee] has really helped me feel like I am still part of the community.”

-South Sudanese woman supported through Ireland-IRC
partnership

“After taking the GBV protocol training, I now realize that GBV cases should be given priority in the clinic. Now I know how to apply survivor-centered skills in a practical way. I also learned about proper documentation of GBV cases and how to store documents in a confidential way.”

-Mid-wife, Afghanistan; WHO training participant





Progress on Road Map Outcomes

Outcome 1:

Humanitarian actors adopt and implement institutional policies and standards to strengthen gender equality, prevent and respond to GBV, and enhance accountability for taking action.

To reach the goal of the Call to Action, organizations, states and donors must ensure that they have the policies, plans, tools, guidance documents and human resources in place to work effectively on GBV and gender equality in humanitarian contexts. Investment in these building blocks is critical for Call to Action partners, and all partners have made a commitment under this Outcome as part of their membership. The advocacy that partners do, individually and collectively, is another important contributor to achieving progress in the humanitarian system's response to GBV and gender inequality.

In 2019, partners from all stakeholder groups continued to create strong foundations for work on GBV and gender equality within their respective institutions and sectors.

Policies

Partners reported on their work to update and finalize humanitarian strategies and policies; National Action Plans on Women, Peace and Security; GBV in emergencies policies and strategies; and policies on Protection from Sexual Exploitation and Abuse (PSEA). Several donors developed and implemented policies that required funding recipients to mitigate GBV risks, address GBV, and include gender equality considerations in their work.

"We cannot always control whether or not humanitarian emergencies happen. But we can control how we prepare and how we respond. How we support survivors of violence. How we empower local women's groups who are the frontline responders. And how we prevent GBV from happening in the first place."

- UNICEF Executive Director Henrietta Fore

DFID's Humanitarian Funding Guidelines were adapted in 2019 to ensure that GBV is considered across all humanitarian response programming. All DFID humanitarian partners are expected to mitigate risks of GBV within their operations. Use of the Inter-Agency Standing Committee (IASC) Guidelines for Integrating Gender-based Violence in Humanitarian Action is mandatory for recipients of DFID humanitarian funds.

Finland's Humanitarian Policy, released in 2019, aims to reduce GBV and ensure access to sexual and reproductive health and rights. Finland pays particular attention to ensuring access to rights of persons with disabilities, access to sexual and reproductive health and rights of women and girls, and to preventing GBV in conflict areas.

Tools and Guidelines

Partners invested in the development, adaptation, translation and rollout of tools and guidance to support work on GBV and gender equality in humanitarian settings. They strengthened program design, implementation and monitoring and evaluations. See below for several examples. A more extensive list of resources produced by 26 partners can be found in Annex C.

- The revised **GBV Area of Responsibility's (GBV AoR) Coordination Handbook**, and accompanying GBV Coordination in Emergencies training modules.
- Inter-Agency [Minimum Standards](#) for GBV in Emergencies Programming.
- **ABAAD's** toolkits and curricula, including a [self-care manual](#) for frontline workers.
- **International Medical Corps (IMC) and International Rescue Committee's (IRC)** Women and Girls' Safe Spaces (WGSS) [Toolkit](#) to guide the establishment and implementation of WGSS in emergencies; developed with support from the US Department of State's Bureau of Population, Refugees, and Migration.
- The Gender Equality Toolkit for **International Planned Parenthood Federation** Member Associations: [Gender Assessment Tool](#).
- **Norwegian Church Aid's** GBV in Emergencies Rapid Assessment Tool.
- **Premier Urgence International's** Gender Pack, which includes a gender mainstreaming brief note, a gender analysis toolkit, a gender project diagnosis tool, a note with tips to strengthen gender mainstreaming and key gender resources.

- **WHO's** [curriculum](#) for training health-care providers on caring for women subjected to violence; also, [RESPECT women](#): Preventing violence against women, a framework endorsed by 13 other UN agencies and bilateral organizations.
- The [Guide to Developing Field-Level Road Maps](#) produced by the **Women's Refugee Commission in partnership with UNFPA, the GBV AoR and European Union (DG-ECHO)**, based on learning from the Road Map pilot projects in Northeast Nigeria and the Democratic Republic of the Congo.

Capacity Development and Support

In 2019, partners worked to enhance the humanitarian system's capacity to address GBV and gender inequality in humanitarian settings. A lack of sufficient capacity remains a significant challenge for the system's work on GBV. Partners developed training materials, trained staff and partners, and deployed experts to support system-wide work on GBV and gender equality. Examples include:

- **WHO** trained over 1,000 frontline health providers on first-line support for intimate partner/domestic and sexual violence, clinical management of rape, mental health and psychosocial support, and coordination.
- In South Sudan, **Legal Action Worldwide (LAW)** trained lawyers on collection of evidence and preparation of cases of conflict-related sexual violence, using a gender sensitive approach. It also facilitated three trainings on GBV documentation with paralegals in its partner organizations. The training included collecting evidence, interviewing survivors, and supporting GBV survivors through referral mechanisms. In Bangladesh, LAW began working with a group of Rohingya male survivor advocates, who were trained by LAW to provide support to male survivors of sexual violence.

- **UNFPA** now has over 140 trained, assessed and ready-to-deploy GBV specialists on its surge roster to respond to immediate needs. In 2019, UNFPA deployed 71 GBV specialists to 20 countries for a total of 225 months of deployment.
- Through the Managing GBV in Emergencies program, **International Medical Corps** continues to manage the GBV AoR Community of Practice and support emerging GBV specialists with training, networking and mentorship opportunities.
- **Trocaire** supported staff and partners to develop their skills and competencies on gender equality and GBV through professional development, mentoring and clinical supervision. In 2019, this included delivery of specialized GBV in emergencies (GBViE) capacity strengthening support to staff and partners in Somalia, South Sudan, Ethiopia, Lebanon, Myanmar, Uganda and DRC.
- **IOM** introduced its Institutional Framework for addressing GBV in Crisis through dedicated trainings, workshops and webinars across the organization's operations. Country-level GBV action plans were developed in South Sudan, Nigeria and Bangladesh, which encompassed detailed commitments by all programs and sectors.
- **UNICEF** – in collaboration with the GBV Information Management System (GBVIMS) Steering Committee – conducted in-country trainings of trainers on GBV case management for operations in Libya, Yemen, Niger and Bangladesh. Of the 77 participants who were trained on the [Interagency GBV Case Management Guidelines and subsequently had their skills evaluated](#), 65% (50 total) were certified as case management trainers. By the end of 2019, this group had reached a total of 456 additional staff through step-down trainings on GBV case management.
- **The GBV AoR** rolled-out the Coordination Handbook with 12 coordination trainings held at the regional and national level across four regions (Middle East, East Africa, South America and Asia-Pacific).
- **UN Women** provided gender expertise in 24 countries to humanitarian cluster systems and refugee coordination mechanisms to help ensure that all facets of the UN-coordinated response considered gender and GBV priorities.

Enhanced Accountability

Accountability for action on GBV in humanitarian settings is essential to achieving the objectives of the Call to Action. In 2019, partners worked to develop and improve accountability systems for GBV and gender equality work. For example:

Save the Children's Real Time Review Guidance was approved in August 2019. It is designed to align to the Core Humanitarian Standard to provide insight on the quality of responses, and to reflect the organization-wide minimum standard that all programs are gender-sensitive.

In 2019, **Islamic Relief Worldwide** developed its own accountability mechanism (Ihsan) self-assessment tool for the monitoring and evaluation (M&E) of programs, which includes systems for PSEA, safeguarding, complaint mechanisms and inclusion and protection standards. Ihsan is currently being rolled out in all Islamic Relief field offices, with a direct focal point from M&E teams. In addition, Islamic Relief is now certified by the Core Humanitarian Standards, with field offices undergoing two audits over the past two years.

Advocacy

From the start, the Call to Action was meant to leverage the individual and collective voices of its partners to advocate for transformative change in how the humanitarian system addresses GBV. In 2019, Call to Action partners engaged in a range of advocacy efforts aimed at prioritizing GBV and gender equality on the humanitarian agenda.

ActionAid, Ireland and UN Women co-organized an ECOSOC Humanitarian Affairs Segment side event, “Making Gender Equality a Reality: From Standards to Transformation.” Panellists included women leaders and frontline responders from Liberia, Lebanon and Indonesia. Call to Action considerations were integrated into the event.

Another ECOSOC Humanitarian Affairs Segment side event, “From Commitment to Action: Oslo Conference Outcomes on Ending Sexual and Gender-based Violence in Humanitarian Crises” was co-sponsored and organized by **Norway, UNFPA, OCHA, IFRC, CARE, World Vision International** and Iraq, Somalia, and United Arab Emirates. The side-event discussed how to take the GBV agenda further in light of global humanitarian challenges and Oslo commitments.

Canada and UNFPA co-hosted a side event on GBV at the annual meeting of the UN General Assembly. **OCHA, the European Union**, the government of the Democratic Republic of the Congo and others co-sponsored the event, which included a discussion of the value of the GBV Accountability Framework and the DRC Call to Action Road Map in strengthening GBV prevention and response and a survivor-centered approach.

LAW organized a side event to the 42nd session of the Human Rights Council in Geneva, co-sponsored by the **UK, Canadian and Swedish** permanent missions to the UN. The event brought together members of the Independent Fact-Finding Mission on Myanmar to discuss how survivor-centered justice can be secured for gendered crimes.

“Every time I go to the scene of humanitarian crises, I meet and hear about women and girls, and sometimes men and boys, who have suffered and survived GBV. Thirty-five years ago when I first started this work, these issues were barely recognized or acknowledged. They were a hidden horror. They are not hidden anymore.”

- Mark Lowcock, Under-Secretary General for Humanitarian Affairs

Feature: Collective Advocacy

The Call to Action partnership released a Call to Action [Joint Statement](#) ahead of the “Ending Sexual and Gender-Based Violence in Humanitarian Crises” Conference in Oslo. The statement urged attendees to consider the multiple forms that GBV takes, the critical role of local women-led organizations, and the role that all actors have to play in risk mitigation, prevention and response to GBV. It referenced the complementarity of the Oslo and Call to Action commitment processes and called for increased and more flexible funding to address GBV in humanitarian settings.

The Call to Action also issued a [joint statement](#) on behalf of all partners at the first Global Refugee Forum held in Geneva, Switzerland, in December 2019. The joint statement called for attendees to make financial and political commitments to: support GBV programming in refugee and forced displacement settings and address gender inequality, the root cause of GBV; promote gender-responsive localization and increase direct funding to local women’s groups; ground programming in best practices and dedicate the financial resources necessary for effective use of technical tools to prevent and respond to GBV in all refugee settings; and reinforce the key actions of the 2016-2020 Call to Action Road Map.

Outcome 2:

All levels within the humanitarian architecture promote effective and accountable inter-agency/inter-sectoral GBV leadership and coordination.

Good, timely coordination and leadership are key to achieving the systemic changes the Call to Action seeks. This is true for all levels of humanitarian response and it also requires support for local leadership. In 2019, the GBV AoR and other Call to Action partners worked to strengthen coordination and promote local leadership. For example, in Yemen the GBV Sub-Cluster Co-Coordinator is from the Women's Union. At the sub-national level in Gaziantep (part of the Whole of Syria response), leadership is tripartite, led by one UN agency, one international NGO (INGO) and one local NGO.

In 2019, the Regional Emergency GBV Advisors (REGA) team provided mission support to 17 countries working closely with GBV coordinators, as well as government counterparts and humanitarian leadership. Successes included effective GBV coordination and monitoring reinforced at country level, advocacy through strategic partnership and resource mobilization, revision and launch of the GBV coordination handbook, strengthening capacity of local actors, new academic partnerships, regional collaboration with relevant actors and contributions to global advocacy events.

In 2019, **CARE** continued to support the participation and leadership of women and women's organizations in humanitarian action at various levels through expanded implementation of its Women Lead in Emergencies approach. This approach is focused on supporting local women's groups to take a lead in responding to the crises that affect them and their communities. It is the first practical toolkit for frontline CARE staff and partners with guidance on how to promote women's participation and leadership in humanitarian settings. The approach is currently being implemented with refugees, IDPs and communities facing natural disasters in Colombia, Mali, Niger, the Philippines and Uganda

Through the Child and Adolescent Survivors Initiative (CASI), the **GBV AOR** and Child Protection AoR continued to strengthen the coordination and response to adolescents and children with two deployable staff, CASI coordinators, providing in-depth support to GBV and CP AoRs in four pilot countries – Iraq, Myanmar, Niger and Sudan – and additional countries upon request.

Feature: Primero/GBVIMS+: Improving Coordinated Case Management

Delivering quality GBV case management services requires structured supervision and support for frontline staff. Yet, in emergency contexts the locations where local caseworkers deliver GBV services are often physically inaccessible to their supervisors. In such contexts, remote supervision is an increasingly important strategy to ensure quality care for GBV survivors. Primero/GBVIMS+ is a technological solution for GBV case management that contributes to improved quality of care for survivors. The system offers a protected platform that allows electronic referral of cases and facilitates remote collaboration between caseworkers and their supervisors.

In multiple countries, Primero/GBVIMS+ users have indicated that the platform has improved monitoring of trends in reported cases of GBV, strengthened caseworker supervision and quality control, and helped identify solutions to complex case management issues. Through application of technology, Primero/GBVIMS+ is improving GBV service provision in emergency settings and increasing accountability to survivors. In 2019, with support from an inter-agency technical team, the system “went live” in Bangladesh, Libya and Nigeria. The platform is now used by more than 340 individual service providers. In 2020, the GBVIMS+ technical team plans to roll out the system in Syria-Turkey cross-border operations, South Sudan, Somalia, Iraq and Myanmar.

Outcome 3:

Needs Assessments, analyses and planning processes support effective and accountable integration of GBV prevention and response and gender equality in humanitarian response efforts.

The inclusion of GBV and gender equality considerations in assessments and key planning processes is key to appropriate risk mitigation, prevention and response actions.

A review of twenty four 2019 Humanitarian Response Plans (HRPs)¹⁰ found that none fully included GBV and gender considerations in the strategy, response plan and indicator sections. Two HRPs – Nigeria and Iraq – came very close to meeting the criteria for indicator 3B which suggests concerted and coordinated efforts in these settings. Another notable advancement is that the majority of reviewed HRPs (20/24) included sex- and age-disaggregated data for all sectors/clusters.

The biggest noted gaps were that few (4/24) HRPs included sex-disaggregated targets for relevant indicators, and few (4/24) included specific reference to different impacts/needs by sex and age throughout the country strategy section of the HRP. It is unclear whether the data were not collected or simply not included in the HRP. The findings also suggest that more can be done to reflect GBV risk mitigation in HRPs as only 5/24 HRPs included references to GBV risk mitigation by each cluster/sector.

OCHA managed the first ever thematic Inter-Agency Humanitarian Evaluation on Gender Equality and the Empowerment of Women and Girls. The evaluation included field missions to four countries (Bangladesh, Colombia, Iraq and Nigeria) and desk-based document reviews of six additional responses (Chad, Myanmar, Palestine, Pakistan, Somalia and Yemen).

WHO revised its template for conducting rapid health assessments at the beginning of an emergency to include guidance on gathering information related to GBV. This ensures that GBV is integrated into planning considerations at the start of an emergency.

The **GBV AoR** provided information management technical support to 21 countries.

UN Women in Nigeria trained over 100 humanitarian workers from CSOs, UN agencies and INGOs in Maiduguri and Damaru. This training contributed to improving the integration of gender concerns across the Humanitarian Needs Overview and the application of sex- and age-disaggregated data in the 2019 Humanitarian Response Plan 2019-2022.

¹⁰ Afghanistan, Burundi, Cameroon, CAR, Chad, DPR Korea, DRC, Ethiopia, Haiti, Iraq, Libya, Madagascar, Mali, Myanmar, Niger, Nigeria, oPt, Somalia, South Sudan, Sudan, Syria, Venezuela, Yemen, Zimbabwe.

Feature: What Works to Prevent Violence

2019 marked the culmination of DFID's groundbreaking £25 million What Works to Prevent Violence research and innovation program, which has generated an extensive body of evidence from 23 studies across 15 countries in Africa and Asia that have the potential to be taken to scale. It also researched the prevalence, drivers and effective responses to violence against women and girls (VAWG) in conflict and humanitarian emergencies. For example, research in South Sudan revealed that up to 73% of girls and women experienced intimate partner violence in their lifetime. Up to 33% of women experienced sexual violence from a non-partner, with many of the incidents directly related to a raid, displacement or abduction. The What Works to Prevent Violence research and innovation program has tested interventions in a variety of countries, including Pakistan, the Democratic Republic of the Congo and Afghanistan, that managed to reduce violence against women by up to 50% in less than three years.

The final evaluation of the program concluded that What Works has shaped discourse and attitudes around violence prevention and influenced policy and practice in many different dimensions, including prompting promises of more investment and informing the architecture of future programming.

Building on the first phase of What Works, DFID has announced a new £67.5 million program – What Works to Prevent Violence: Impact at Scale in 2019. This new program will scale up and rigorously evaluate effective interventions to prevent violence against women and girls across development and humanitarian contexts. It will also invest in innovation to develop new solutions in the most challenging areas, including testing what works to prevent VAWG in conflict and humanitarian settings.

Outcome 4:

Funding is available for GBV prevention and response for each phase of an emergency, from preparedness and crisis onset through transition to development.

“Funding allocated to gender-based violence in emergencies is inadequate and only covers a fraction of what is required to prevent and respond to needs.”

- UN Secretary-General's 2019 Report on Women, Peace and Security

GBV remains a severely underfunded area of humanitarian work. As in previous years, the absence of a consistent approach to reporting by donors, and the lack of a reliable tracking mechanism for humanitarian GBV funding, complicates efforts to specify what funds were allocated to GBV programming in emergencies. It

is also not currently possible to capture what resources have been allocated to GBV risk mitigation activities in other sectors. That said, a number of partners included public information on funding for GBV and gender equality work in their 2019 reports. For example:

Of 15 humanitarian responses monitored, **ActionAid** channelled some 62% of the total funds received to local partners. These funds were distributed to 37 local organizations, working in eleven countries. Sixteen of these organisations (43%) received multi-year capacity building funding from ActionAid.

UN Women provided financial and technical support to 752 local women-led and women's rights organizations, enabling them to participate in and guide humanitarian response and recovery, including in relation to regional refugee and resilience response plans.

In its report, **OCHA** indicated that of the US\$538.7 million allocated by [Central Emergency Response Fund \(CERF\)](#)¹¹ in 2019, \$109 million (or 20%) was allocated to projects with a score of four on the [IASC Gender with Age Marker \(GAM\)](#).¹² These projects are likely to contribute to gender equality, including across age groups. Another US\$130 million (or 24%) of 2019 CERF funding was provided to projects with a GAM score of three.

These projects are likely to contribute to gender equality, but without attention to age groups. Eight percent

of CERF-funded projects in 2019 had GBV protection as their main objective. CERF allocated \$23 million to these projects. Another 60% of CERF-funded projects included GBV components.

Switzerland allocated a total of CHF 10.63 million to combatting GBV in humanitarian contexts. This included CHF 7.63 million in humanitarian funds for GBV, and an additional CHF 3 million of development funds for SGBV interventions in contexts with humanitarian needs (Colombia, Myanmar, DRC and Burundi).

In 2019, **Canada** met its financial commitment made at the Oslo Conference to disburse CAD \$33 million to address GBV. This constitutes funding to international organizations and NGOs specifically for GBV programming.

Feature: Oslo Conference

In May 2019, Norway, Iraq, Somalia, United Arab Emirates, UN OCHA, UNFPA, ICRC and other partners hosted an international conference on Ending Sexual and Gender-Based Violence in Humanitarian Crises in Oslo, Norway.

The key objectives of the conference were to 1) mobilize stronger political commitment, 2) mobilize additional financial resources and 3) highlight best practices and lessons learned from efforts to prevent and respond to GBV in humanitarian situations.

The conference brought together states, civil society organizations, international and regional organizations, survivors and experts. Several hundred commitments were made related to standards and legal frameworks, operational support, GBV prevention and response services, leadership and coordination, advancing gender equality and women's empowerment. Participating actors gave particular focus to implementation of legal frameworks and strategies, as well as an increase in operational support to ensure that survivor-centered services, care and protection are available in all crises. Twenty-one donors committed US\$363 million for 2019, 2020 and beyond, including US\$226.2 million for 2019.

Norway and other co-hosts are working to follow up on commitments made at the conference and track the obligations of states and organizations.

Outcome 5:

Specialized GBV prevention and response services are implemented in each phase of an emergency, from preparedness and crisis onset through transition to development

Specialized services for GBV survivors in emergencies are lifesaving. The development of comprehensive inter-agency guidance on core services is a priority action under Outcome 5. The Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming were launched in 2019 — an important success for the Call to Action. Implementation will greatly improve service provision and programming.

This Outcome also calls for ensuring the relevant technical expertise to support the provision of core services.

“We cannot forget that humanitarian crises often lead to collapsed health systems, which means there is less available access to sexual and reproductive healthcare and services. Or, in other words, the difference between life and death for a survivor of rape.”

- Alvaro Bermejo, Director-General, IPPF

Specialized Services

In 2019, partners supported specialized health, legal, case management and psychosocial services for survivors of GBV in humanitarian contexts around the world.

All of **IOM's 23** supported facilities in Cox's Bazar provided Clinical Management of Rape services in 2019.

Coalition for Humanity established five women and girls' safe spaces in South Sudan, providing them with needed equipment and tools.

Expertise

Having relevant expertise in place is essential to effective GBV programming. Partners reported on the deployment of experts, including through rosters, to support responses in multiple settings.

Substantive progress was also made on the implementation of the GBV AoR's Capacity-Building Strategy. This included expanding training opportunities via partnerships with academic institutions, providing capacity support to GBV specialists in the field through the Community of Practice and GBV AoR Helpdesk, and capacity building on GBV coordination.

UNHCR deployed senior-level GBV staff to 25 emergency operations during the last six years, including 10 in 2019 covering all L3 emergencies. According to an evaluative review, these experts helped operations to more than double the coverage (25% to 59%) and the efficiency (35% to 82%) of GBV programming.

Feature: The GBViE Minimum Standards

In 2019, the Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming were finalized and launched, achieving a key target of the 2016-2020 Call to Action Road Map.

The guidance presents 16 Minimum Standards for the prevention of and response to GBV in emergencies. These define what agencies working on specialized GBV programming need to achieve to prevent and respond to GBV and deliver multi-sectoral services. The objective of the Minimum Standards is to clarify what is understood to constitute minimum prevention and response programming in emergencies. The standards are universal; they are relevant for all emergency contexts.

The GBV AoR Task Team on the Global Inter-Agency GBV in Emergency Minimum Standards, led by UNFPA, UNICEF and IRC, developed the standards through extensive field consultations and testing, inter-agency consultations and expert review. The Task Team also worked to ensure synergies with Child Protection and Protection Standards, and other standards and frameworks.

Outcome 6:

Those managing and leading humanitarian operations have and apply the knowledge and skills needed to foster gender equality and reduce and mitigate GBV risk.

Transformative change is only possible if all humanitarian actors are fully engaged in efforts to prevent and mitigate the risks of GBV as set out in the revised IASC Guidelines for Integrating Gender-based Violence Interventions in Humanitarian Settings. The 2019 Partner reports indicate use of the GBV Guidelines in a range of humanitarian responses and by different sectors.

Inter-agency GBV risk mitigation work – with strategic guidance from a Reference Group of 15 UN agencies and NGOs – focused on capacity building for high-impact entry points within the humanitarian response system. These included standby partner rosters; global clusters' rapid response teams; emergency preparedness specialists; coordination staff; and donor partners.

The Guidelines Implementation Support Team also developed a training package on preparedness and GBV risk mitigation that was rolled out with colleagues from eight countries in the Asia-Pacific Region. IOM, UNICEF and the GBV AoR facilitated a stocktaking workshop on GBV risk mitigation as it relates to Shelter, WASH and Camp Coordination/Camp Management (CCCM) programming with colleagues in five humanitarian contexts. The workshop provided an opportunity to take stock of the advances made on GBV risk mitigation and to identify opportunities for continued collaboration.

A review of projects in humanitarian plans found that some showed an increase in the percentage of projects that integrate actions from the IASC GBV Guidelines. In some crises, the increase from 2016 was significant. For example, an increase in the Iraq humanitarian plan from 8% to 39%, and in Nigeria from 12% to 30%. See indicator 6a in annex B.

UNICEF maintains [the GBV Guidelines Knowledge Hub](#), the only global repository for tools and resources on GBV risk mitigation in other humanitarian sectors.

By the end of 2019, 29 sector-specific national action plans were being implemented by **UNHCR** country operations in order to operationalize and contextualize the IASC GBV Guidelines and detailing concrete commitments to address sector gaps. In Bangladesh, **UNHCR** reduced identified risks of GBV by installing 2,500 streetlights, distributing 86,706 shelter locks, and issuing 85,000 households with liquid petroleum gas canisters, thereby reducing the risks associated with firewood collection, a task that is often carried out by women and girls.

WFP worked with communities and partners in a number of humanitarian responses, including Syria, Mali and Bangladesh, to inform the integration of GBV risk mitigation elements into food assistance.

Feature: Integration of GBV in the Work of the Global Clusters

Clusters and sub-clusters continued to work on GBV integration at the global and field levels in 2019:

Global Education Cluster (GEC): Integration of GBV and PSEA considerations into the GEC's revised Needs Assessment Package online learning platform.

Global Nutrition Cluster (GNC): Revision of the GNC's Harmonized Training Package to incorporate gender and GBV risk mitigation.

Global WASH Cluster: Integration of GBV considerations in the WASH severity ranking for 2020 Humanitarian Needs Overview/Humanitarian Response Plans HNO/HRPs, which means that issues such as access, safety and other protection considerations now act as key indicators to select priority locations for WASH interventions. The WASH Quality Assurance and Accountability Project, which began in 2019, includes GBV components.

Global Health Cluster: Revision of the *Health Cluster Guide* and inclusion of new sections outlining responsibilities related to addressing GBV within health programs. The Global Health Cluster also started the process of revising global indicators for health programming and integrated indicators on GBV to ensure that progress to address survivor needs is monitored.

Global Camp Coordination / Camp Management Cluster: Efforts to incorporate GBV mainstreaming as a core competency of CCCM operations were fulfilled through 139 capacity-building events for 3,709 participants.

Child Protection Area of Responsibility: Led the development of Standard 9 (“Sexual and gender-based violence”) in the revised Child Protection Minimum Standards (CPMS), launched in November 2019, and ensured recommendations from the GBV Guidelines and Inter-Agency GBVIE Minimum Standards were incorporated into the CPMS.

Global Shelter Cluster: Included gender and GBV in the first inter-agency Site and Settlement Planning training for site planning and site settlement experts.

Reflections on Keys to Success

As in previous years, partners were asked to share key lessons learned from their individual and collective work on GBV and gender equality in emergencies. Partners noted that their individual work benefits from and is enabled by the support of collective, global initiatives such as the Call to Action. They highlighted the following as essential to success:

- Dedicated technical expertise, staff and funding.
- Meaningful, substantive engagement with local organizations that is mutually beneficial.
- Financial support for partnerships and the Call to Action Road Map.
- Community and national system engagement in work to prevent and respond to GBV.

Challenges

Partners also detailed recurring challenges that impede their work, such as:

Insufficient resources: Partners frequently cited challenges related to insufficient financial and human resources. These included funding shortages at country level and a limited pool of rapidly deployable technical experts on GBV, particularly individuals who can work in languages other than English. They noted this is coupled with increasing demands from the field for GBV technical support – both for GBV-specialized programming and risk mitigation.

Funding priorities: Several partners found it challenging, given donor priorities, to secure funding for specific areas of GBV program work, such as intimate partner violence and mental health.

Tracking funding: Decentralized funding mechanisms and lack of robust internal sector-based financial tracking systems make it difficult to track uptake of policies and funding allocations. It is particularly difficult to identify funding for GBV risk mitigation and other activities embedded in the work of other sectors.

Gaps in evidence base: Partners noted that more evidence is needed on innovative approaches to overcome barriers for local and women-led GBV responses. Another gap relates to measurement of the effectiveness of GBV risk mitigation – both how risk mitigation actions affect program quality and the outcomes of such actions for women and girls.

Looking Forward

Partner reports on the Call to Action website include information on their planned activities in the year ahead. Below are initiatives particularly relevant to the collective work of the Call to Action.

- **Measuring impact of risk mitigation efforts:** UNICEF, in partnership with the Harvard Humanitarian Initiative and VOICE, have developed a methodology for measuring the effectiveness of GBV risk mitigation, which will be piloted in 2020.
- **Inter-agency thematic evaluation on gender:** The Inter-Agency Humanitarian Evaluation on Gender Equality and the Empowerment of Women and Girls is expected to be completed by September 2020. The scope of the evaluation is global. It focuses on gender-responsive programming; capacity building; and the participation of all relevant population groups in the design and delivery of humanitarian programs and accountability mechanisms. The evaluation explores how consistently and coherently existing system-wide policies, program guidance and tools on gender are implemented among IASC members.
- **UNHCR GBV Policy:** The first comprehensive UNHCR Policy on Prevention, Risk Mitigation and Response on Gender-Based Violence will be issued in 2020.
- **GBV in Emergencies Minimum Standards rollout tools:** UNFPA and partners will continue to roll out the Minimum Standards for GBV in Emergencies and manage a consultative process on initiatives to support the rollout. These include development of an M&E framework; M&E tools to assist humanitarian agencies to measure their progress towards achieving the Standards; a facilitator's guide; contextualization tool; and other products.
- **Management of GBV in Emergencies training:** MGBVIE training content will be organized into a web-based platform, facilitating easy download and use by all partners. International Medical Corps will focus on additional remote connectivity and learning, including mentorship pairings.
- **2021-2025 Road Map:** Partners will draw on the cumulative learning from implementation of the current Road Map to develop an updated 2021-2025 Road Map. The updated Road Map will be launched in September 2020 at the annual meeting of the United Nations General Assembly.

Conclusion

It is encouraging that again this year, partners reported progress under all six Outcomes of the Call to Action Road Map and remain committed to achieving the transformational goal of the initiative. This commitment must be manifest at every level within partner organizations and throughout the humanitarian system — from global leadership to field leadership to technical staff in all sectors. It is imperative to secure much stronger funding for GBV prevention and response, invest in additional human resources to support the work and further strengthen GBV risk mitigation. The launch of the Minimum Standards provides an invaluable opportunity to improve programming and deepen impact. The commitment to expand partnerships with local organizations, including women’s organizations, must guide efforts in 2020 and beyond and fully inform the development of the 2021-2025 Road Map. Transformational change in humanitarian action on GBV and gender quality may be hard, but it cannot be slow. Too many lives are in the balance.

Annex A: Current List Of Partners

States & Donors

- Australia
- Belgium
- Bulgaria
- Canada
- Czech Republic
- Denmark
- European Union
- Finland
- France
- Germany
- Ireland
- Italy
- Japan
- Latvia
- Luxemburg
- Netherlands
- Norway
- Peru
- Portugal
- Slovenia
- Spain
- Sweden
- Switzerland
- United Kingdom
- United States

- Genderforce
- Geneva Call
- Global Communities
- Heartland Alliance International
- HelpAge
- Hope Revival Organization
- Humanity & Inclusion
- InterAction
- International Center for Research on Women (ICRW)
- International Medical Corps(IMC)
- International Planned Parenthood Federation (IPPF)
- International Rescue Committee (IRC)
- Islamic Relief
- Legal Action Worldwide
- Marie Stopes International
- NGO Working Group on Women, Peace & Security
- Norwegian Refugee Council (NRC)
- Norwegian Church Aid
- Oxfam
- Plan International UK
- PAI
- Première Urgence Internationale (PUI)
- Refugees International
- Save the Children
- Syria Relief & Development
- Tearfund
- Trócaire
- WAHA International
- War Child Canada
- War Child UK
- WaterAid
- Women Deliver
- Women Empowerment Organisation (WEO)
- Womenfor Women International
- Women's Refugee Commission (WRC)
- World Vision International
- Yemen Family Care Association (YFCA)

Non-Governmental Organizations

- ABAAD
- ActionAid UK
- Action Against Hunger
- American Refugee Committee
- Asamblea de Cooperación Por la Paz
- CARE International
- Christian Aid
- Coalition for Humanity
- Danish Refugee Council (DRC)
- Doctors of the World

International Organisations

- Elrha/Humanitarian Innovation Fund
- Food and Agricultural Organization of the United Nations (FAO)
- Gender-Based Violence Area of Responsibility (GBV AoR)
- International Federation of the Red Cross and Red Crescent Society (IFRC)
- International Organization for Migration (IOM)
- UNESCO
- OCHA
- OECD
- United Nations Children's Fund (UNICEF)
- United Nations Population Fund (UNFPA) · United Nations Office of the High Commissioner for Refugees (UNHCR)
- United Nations Relief and Works Agency (UNRWA)
- UN Women
- United Nations World Food Program (WFP)
- United Nations World Health Organisation (WHO)

Annex B: Progress on High-Level Indicators

Indicator		Baseline	2017	2018	2019
1a	% of partner organisations that have established enforceable institutional policies/standards on GBV and on gender equality for programming in humanitarian settings.	N/A	6.5% (3/46)	24.5% (14/57)	20/33 (51%)
1b	% of state partners with national policies and implementation plans on GBV and on gender equality.	N/A	18% (4/22)	40% (10/25)	10/14 (71%)
2a*	% of global-level GBV AoR members satisfied with leadership, performance, and accountability of the global humanitarian GBV coordination mechanism.	19% (3/16)	47% (7/15)	74% (14/19)	76% (16/21)
2b	% of new crises with a country-level humanitarian GBV coordination mechanism established within 14 days of cluster activation.	N/A	100% (2/2)	100% (1/1)	100% (4/4)
2c	% of countries with a Humanitarian Coordinator that have a national-level humanitarian GBV coordination co-led/ led by a national actor.	17% (4/23)	35% (12/34)	38% (11/29)	41% (12/29)
3 ^a	% of selected inter-sector/inter-cluster and sector/cluster assessment tools that integrate GBV and gender equality.	N/A	20% (1/5) ^{^^}	20% (1/5) ^{^^}	20% (1/5) ^{^^}
3b	% of Humanitarian Program Cycle (HPC) countries where GBV and gender equality are integrated into HPC processes and reflected in documents.	N/A	0% (0/18) [^]	0	0% (0/24) ^{###}

Indicator		Baseline	2017	2018	2019
4a	# projects to implement core GBV services in strategic response plans, by country.	N/A	Measurement of this indicator was scheduled to begin with the 2019 HRPs	N/A	N/A ¹³
4b##	# Humanitarian crises where a funding tracking mechanism for GBV is in place.	N/A	Measurement of indicator scheduled to begin in 2018	0	0
5a	Set of core GBV services for all crisis phases is established and agreed to by Call to Action partners.	N/A	N/A	Finalized and launched	N/A
5b	Finalization and implementation of a comprehensive capacity development strategy targeting national and international GBV specialists.	Strategy adopted by AoR	Some progress	Progress	In 2019, substantive progress – (see AoR report)

¹³ Minimum Standards released in 2019 – did not impact 2019 HRP developed in 2018.

Indicator		Baseline	2017	2018	2019
6a	% of projects in Strategic Response Plans that incorporate actions from the revised IASC Guidelines for Integrating GBV in Humanitarian Action, by country.	See below	To be included in 2018 annual report	N/A	See below***
		Burkina Faso:16.4%; Cameroon:13.1%; Chad:16.7%; Iraq: 8.1%; Mali:11.5%; Mauritania:14.6; Niger: 7.4%; Nigeria: 12.2%; oPt:** 8.5%; Sahel: 0%; Senegal: 0%; Somalia: .8%; South Sudan: 19.4%; Syria: 8.0%; Ukraine: 11.4%			Bangladesh 27.71%; Cameroon 16.33%; Chad 11.95%; Haiti 6.25%; Iraq 39.34%; Libya 14.71%; Mali 15.91%; Niger 12.44%; Nigeria 30.05%; oPt 14.78%; Pakistan 1.27%; Somalia 30.97%; South Sudan 34.34%; Sudan 16.19%; Syria 23.16%; Ukraine 7.84%; Venezuela 5.21%

^ Reporting on 2018 HRP. Iraq 2018 HRP not available at time of analysis.

^^ Only the HNO met the criteria.

Per GBV AoR – OCHA FTS has a sector for GBV. Please note that some GBV funding would also be captured under the broader sector of Protection and the GBV search likely underrepresents GBV funding.

Afghanistan, Burundi, Cameroon, CAR, Chad, DPR Korea, DRC, Ethiopia, Haiti, Iraq, Libya, Madagascar, Mali, Myanmar, Niger, Nigeria, oPt, Somalia, South Sudan, Sudan, Syria, Venezuela, Yemen, Zimbabwe.

* Represents only those GBV AoR members that chose to complete the survey.

**47 oPt projects were not accessible so were excluded.

*** Data were not available for Iran, Madagascar, Mozambique, North Korea and Zimbabwe.

Annex C: Call to Action 2019 Tools, Resources and Reports

Partner	Title	Link
ABAAD	Gender-Sensitive Media Coverage in Conflict and Post-Conflict Situations (in Arabic)	Link
	Basic Life Skills: A project for Women & Girls survivors or at Risk of GBV	Link
	<i>SenseMaker® as a Monitoring and Evaluation Tool for Gender-Based Violence Programs and Services in Lebanon: Lessons Learned About Feasibility and Added Value</i>	Link
	Safe Shelters Toolkit (in Arabic)	Link
	Caught in Contradiction: Making Sense of Child Marriage among Syrian Refugees in Lebanon	Link
	Rapid GBV Assessment Syria Report 2019	Link
	Self-Care Manual For Front-Line Workers	Link
ActionAid	Safety with Dignity: Women-Led Community-Based Protection manual	Link
	Leading the way: Women-led localisation in Central Sulawesi: Towards gender transformative action	Link
	Funding a localised, women-led approach to protection from Gender Based Violence: What is the data telling us?	Link
	Making the Local Global: Guidance Note	Link
	Shifting power to young people in humanitarian action: How young people can lead and drive solutions in humanitarian action	Link
Canada	A Feminist Approach: Gender Equality in Humanitarian Action	Link
	Feminist International Assistance Gender Equality Toolkit for Projects	Link

Partner	Title	Link
CARE International	Rapid Gender Analysis: A Commitment to Addressing Gender and Protection Issues in Cyclone- and Flood-Affected Malawi, Mozambique and Zimbabwe	Link
	Rapid Gender Analysis: Latin America & Caribbean: Venezuelan Migrants & Refugees in Colombia	Link
	Rapid Gender Analysis: Bardarash Camp	Link
	A Framework for Addressing Gender-based Violence in Emergencies	Link
	Humanitarian Transformation or Maintaining the Status Quo? A Global Study on GBV Localization through Country-Level GBV Sub-Clusters	Link
	Gender, cash assistance, and conflict: Gendered protection implications of cash and voucher assistance in Somalia/Somaliland	Link
	Rapid Gender Analysis and its use in crises: from zero to fifty in five years	Link
Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO)	EU Action Plan on Women, Peace and Security (WPS) 2019-2024	Link
	2018 Annual Implementation Report of GAP II	Link
Elrha	<i>Rapid Review of the inclusion of People with Disabilities and Older People in Gender-Based Violence (GBV) Humanitarian Interventions</i>	Link
Gender-Based Violence Area of Responsibility (GBV AoR)	<i>Handbook for Coordinating Gender-based Violence Interventions in Emergencies</i>	Link
International Federation of Red Cross and Red Crescent Societies (IFRC)	<i>Action by Red Cross and Red Crescent National Societies to Prevent and Respond to Child Marriage: Case Study Report</i>	Link
	<i>Sexual and Gender-based Violence: Good Practice from Colombia</i>	Link
	<i>Sexual and Gender-based Violence: Good Practice from South Sudan</i>	Link
	<i>Sexual and Gender-based Violence: Good Practice from Kenya</i>	Link
	<i>Sexual and Gender-based Violence: Good Practice from Burundi</i>	Link
International Medical Corps (IMC)	Women and Girls Safe Spaces: A Toolkit for Women's and Girls' Empowerment in Humanitarian Settings	Link

Partner	Title	Link
International Organization for Migration (IOM)	<i>Manual on Capacity Building MHPSS in Emergencies and Displacement</i>	Link
	<i>Improving Participation and Protection of Displaced Women and Girls: Women's Role in Coordination</i>	Link
	<i>Improving Participation and Protection of Displaced Women and Girls: "When they speak, you listen": The Role of Older Women in Displacement</i>	Link
Ireland	A Better World: Ireland's Policy for International Development	Link
	Women, Peace and Security: Ireland's third National Action Plan for the implementation of UNSCR 1325 and related resolutions	Link
	Safety First: Time to deliver on commitments to women and girls in crisis (IRC)	Link
	IRC Women's Protection and Empowerment (WPE) Learning Brief	Link
Norway	The Norwegian Government's Action Plan: Women, Peace and Security (2019-2022)	Link
	Norway's International Strategy to Eliminate Harmful Practices 2019-2023	Link
Organisation for Economic Co-operation and Development (OECD)	<i>Engaging with men and masculinities in fragile and conflict-affected states</i>	Link
	<i>DAC Recommendation on Ending Sexual Exploitation, Abuse, and Harassment in Development Co-operation and Humanitarian Assistance</i>	Link
	<i>DAC Recommendation on the Humanitarian-Development-Peace Nexus</i>	Link
	<i>Social Institutions and Gender Index 2019 Global Report</i>	Link
	<i>Social Institutions and Gender Index 2019 Regional Report for Eurasia</i>	Link
Oxfam	Social and feminist design in emergency contexts: The Women's Social Architecture Project, Cox's Bazar, Bangladesh	Link
Plan International UK	Left Out, Left Behind: Adolescent Girls' Secondary Education in Crises	Link
	The Trafficking of Girls and Young Women: Evidence for Prevention and Assistance	Link
Trócaire	Partnership in Practice: Steps to Localisation	Link

Partner	Title	Link
UN Women	<i>Gender Profile for Humanitarian Action, and across the Humanitarian-Peace-Development Nexus</i>	Link
	<i>Good Practices Brochure: Integrating Gender into Cash and Voucher Assistance in Humanitarian Settings</i>	Link
	<i>How to Promote Gender Equality in Humanitarian Cash and Voucher Assistance</i>	Link
	<i>IASC Gender in Humanitarian Action Handbook (now available in Arabic, French and Spanish)</i>	Link
	<i>Leveraging blockchain technology in humanitarian settings – opportunities and risks for women and girls</i>	Link
	<i>The effect of cash-based interventions on gender outcomes in development and humanitarian settings</i>	Link
	<i>The IASC Gender Policy Accountability Framework Report</i>	Link
	<i>Virtual Knowledge Centre to End Violence against Women and Girls: Conflict/ Post-Conflict Module</i>	Link
United Nations Educational, Scientific and Cultural Organization (UNESCO)	<i>Ending school-related gender-based violence: a series of thematic briefs</i>	Link
	<i>2019 Gender report: Building bridges for gender equality</i>	Link
	<i>The Big Conversation: Handbook to Address Violence Against Women in and through the Media</i>	Link
	<i>Reporting on violence against women and girls: a handbook for journalists</i>	Link
	<i>Global guidance on addressing school-related gender-based violence</i>	Link
	<i>Connect with respect: preventing gender-based violence in schools; classroom program for students in early secondary school (ages 11-14)</i>	Link
United Nations High Commissioner for Refugees (UNHCR)	<i>Tearing Down the Walls: Confronting the Barriers to Internally Displaced Women and Girls' Participation in Humanitarian Settings</i>	Link
	<i>Cash assistance and the Prevention, Mitigation and Response to Sexual and Gender-Based Violence (SGBV): Findings from research in Lebanon, Ecuador and Morocco</i>	Link
	<i>UNHCR's Approach to Age, Gender and Diversity</i>	Link

Partner	Title	Link
The United Nations Children's Fund (UNICEF)	Updated GBViE Helpdesk	Link
United Nations Office for the Coordination of Humanitarian Affairs (OCHA)	Strengthening of the coordination of emergency humanitarian assistance of the United Nations - Report of the Secretary-General	Link
	International cooperation on humanitarian assistance in the field of natural disasters, from relief to development - Report of the Secretary	Link
	Report of the Secretary-General on the protection of civilians in armed conflict	Link
United Nations Population Fund (UNFPA)	<i>The Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming</i>	Link
World Food Programme (WFP)	<i>The Potential of Cash-Based Interventions to Promote Gender Equality and Women's Empowerment</i>	Link
World Health Organization (WHO)	<i>Caring for women subjected to violence: a WHO curriculum for training health-care providers</i>	Link
	<i>RESPECT women: Preventing violence against women</i>	Link
Women Deliver	Feminist Humanitarian System Building Block I: Advancing Gender-Transformative Localization	Link

Partner	Title	Link
Women's Refugee Commission	Age, Gender, and Diversity Tip Sheet for Global Refugee Forum Pledges	Link
	Empower Women and Girls and Gender as a Cross-Cutting Issue: 2019 Analytical Paper on World Humanitarian Summit Self-Reporting on Agenda for Humanity Transformation 3D	Link
	Minimum Initial Service Package for Sexual and Reproductive Health In Crisis Situations: A Distance Learning Module	Link
	Utilizing Cash and Voucher Assistance within Gender-based Violence Case Management to Support Crisis-Affected Populations in Ecuador	Link
	"More Than One Million Pains": Sexual Violence Against Men and Boys on the Central Mediterranean Route to Italy	Link
	"We Have a Broken Heart": Sexual Violence against Refugees in Nairobi and Mombasa, Kenya	Link
	Energy, Gender, and GBV in Emergencies	Link
	Call to Action on Protection from Gender-Based Violence in Emergencies: Guide to Developing a Field-Level Road Map	Link

