Preventing Gender-Based Violence After Typhoon Yolanda; Responding to Survivors’ Needs

As the international community continues to respond to the massive relief and recovery needs in the Philippines, it is imperative that assistance is delivered from the start in ways that mitigate protection risks and ensure safe and equal access for women and girls as well as men and boys.

The Gender-based Violence Area of Responsibility (GBV AoR) reminds all humanitarian partners that in the chaotic aftermath of a disaster, women and children are particularly vulnerable to gender-based violence, including rape and other forms of sexual and physical violence by strangers, those distributing aid, and family members. Women and children are also at increased risk of sex trafficking or transactional sex in order to provide the basic necessities for their families. Depending on the context, women may also be isolated from accessing critical aid and information on services.

The humanitarian community must not forget a critical protection lesson highlighted in the Inter-Agency Real Time Evaluation in Haiti three months after the 2010 earthquake. Writing about mainstreaming cross cutting issues including gender and protection in the response, the evaluators found: “...agencies adopted the position that they could come back to fix these issues once time pressure had decreased. However after three months it is clear that factors which are not designed into a project from the very beginning rarely get fixed later on.”

Gender-based Violence Considerations in Aftermath of Typhoon Yolanda

According to the Philippine National Demographic and Health Survey (2008) one in five women between the ages of 15 and 49 reported having experienced at least one incident of physical violence in their lifetime and 9% reported at least one incident of sexual violence. We know that displacement exacerbates GBV-related risk in every emergency context so it is particularly concerning that the three regions most affected by the Typhoon (Western Visayas, Central Visayas and Eastern Visayas) had somewhat higher reported rates of physical and/or sexual violence than the national average.

Trafficking, particularly sex trafficking, was a significant issue before the disaster and remains a serious protection concern. Samar and Leyte, areas heavily impacted by the Typhoon, were known centers for trafficking even before the current emergency. Data from the Reception and Diagnostic Centre after Typhoon Pablo in 2012 offers a cautionary tale. Following that disaster, there was an increase in reported GBV cases, including trafficking, and an increase in adolescent boys and girls involved in commercial sex work.

Current conditions in the areas impacted by Typhoon Yolanda that raise significant protection concerns and increase the risks of GBV include:

- Overcrowded evacuation centers with limited security, inadequate bathing and latrine facilities and lack of privacy. The displaced persons remaining in these centers are often those who have no financial or other means to find alternative shelter, and are therefore particularly vulnerable.
- Inability to meet basic survival needs and access supplies such as bathing, washing and hygiene materials; lack of electricity in many affected areas; deteriorating food security; loss of livelihoods and large-scale economic vulnerability.
Women reporting feeling insecure and fearful particularly at night.
Separated and unaccompanied children.
Women and children begging on the streets for food.
Disruption of government-run services and coordination mechanisms.
Seriously damaged or destroyed health facilities.
Limited number of female police officers, particularly in hard-hit Region VIII.
Large influx of police, military and aid workers, some of whom may not uphold their institutional codes of conduct on sexual exploitation and abuse.
Population flows of newly displaced persons to Manila and other unaffected areas that may not be equipped to meet a surge in demand for services; vulnerability of women and girls to sexual exploitation in these areas.

Actions Required to Address GBV and Reduce Risk in the Relief and Early Recovery Phase

To Humanitarian Agencies:
- Ensure the active participation of women and girls as well as boys and men in assessments and in all program design, implementation and monitoring. Advocate for and support the meaningful participation of women and girls in decision-making processes at all levels—not just their numerical representation.
- Design and implement assistance programs in accordance with the IASC Guidelines on GBV Interventions in Humanitarian Settings. Simple actions are available here for each sector. See below for the link to the sheets. The action sheets lay out the basic steps that must be taken to mitigate the risks of GBV in food assistance, shelter, camp coordination and management, water and sanitation programs, health and livelihoods.
- Include sex-disaggregated data in all processes
- Prioritize GBV and protection programming, including deployment of GBV specialists on emergency response teams and the establishment of case management, psychological first aid, clinical care and provision of dignity kits.
- Take immediate steps to address economic vulnerability, giving attention to programs that are appropriate for and accessible to women as well as men. Make targeted efforts to reach female-headed households, families with pregnant and lactating women, persons with disabilities and families with multiple vulnerabilities as defined by the Department of Social Welfare and Development (DSWD) displacement form.
- Ensure that cash assistance and cash for work initiatives are effectively informed by and designed to prevent and mitigate protection risks involved, including risks of reinforcing gender norms that disadvantage women.
- Work with community members, including women and girls, to strengthen community-based protection efforts.

To Donors:
- Recognize GBV programming as life-saving interventions and provide adequate funding for this work from the earliest stages of the response.
- Ensure that the humanitarian programs donors fund across other sectors are designed and implemented in accordance with the IASC GBV Guidelines.¹