THE 2012 FIJI FLOODS

GENDER SENSITIVITY IN DISASTER MANAGEMENT



A QUALITATIVE REVIEW OF GENDER AND PROTECTION ISSUES IN DISASTER RESPONSE













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Acknowledgement

UN Women acknowledges the work of independent consultant, Ana Laqeretabua and IASC GenCap Advisor, Anu Pillay, for going out to the affected sites in the Western Division of Fiji and collecting information and stories on gender and gender-based violence in emergencies THE 2012 FIJI FLOODS

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ACRONYMS

СоР	Community of Practice
CSO	Civil Society Organizations
DEOC	Divisional Emergency Operations Centre
DO	District Officer
DSW	Department of Social Welfare
EOC	Emergency Operations Centre
FBO	Faith Based Organizations
FRC	Fiji Red Cross
FWCC	Fiji Women's Crisis Centre
GBV	Gender-Based Violence
GE	Gender Equality
GenCap	Gender Capacity Adviser
IASC	Inter-Agency Standing Committee
MWSWPA	Ministry of Women, Social Welfare, Poverty Alleviation
MoA	Memorandum of Agreement
MoU	Memorandum of Understanding
NDMO	National Disaster Management Office
NEOC	National Emergency Operation Centre
NGO	Non-Governmental Organization
PCSS	Pacific Counseling & Social Services
PHT	Pacific Humanitarian Team
PHPC	Pacific Humanitarian Team Protection Cluster
PLWD	People Living with Disabilities
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
UNOHCR	United Nations Office of the High Commissioner for Human Rights
UN Women	United Nations Entity for Gender Equality and the Empowerment
	of Women
VAW	Violence Against Women
WASH	Water & Sanitation Hygiene
WID	Women in Development

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FOREWORD

Understanding gender discrimination, gender analysis and gender-sensitive programming in disaster situations is critical to protecting human rights. Equally, understanding risk factors that contribute to gender-based violence (GBV) during and after disasters, and implementing appropriate prevention and response measures, is an important, specialized area of protection in emergency settings. In the Pacific Island context, the Pacific Humanitarian Team (PHT) through the UN Gender Group, realized that there is limited understanding and practice – among government, non-government and community actors – of mainstreaming gender and GBV prevention/response into emergency preparedness, response and recovery activities across sectors.

The severity of the two floods in Fiji took the country by surprise and highlighted the gender and protection, preparedness and response gaps (amongst others) at different levels. Evidence emerged from brief field visits by UN agencies that gender and protection concerns had not been adequately addressed, nor was there enough awareness on prevention and response measures for GBV. The UN Gender Group took the opportunity to gather data to support advocacy and training for more effective preparedness and response activities from a gender and protection perspective.

Thus, UN Women and UNFPA¹ collaborated with UN OCHA, the principle agency dealing with coordination in emergencies, to conduct a post-flood review and analysis of gender and GBV issues from the perspective of flood-prone and flood-affected communities.

The findings from this initiative have already sparked two Gender in Emergencies trainings in the Pacific. It has seen the formation of two country-based communities of practice in Fiji and Vanuatu in support of the humanitarian teams present in those countries and in the region to deal with gender and GBV issues in emergencies. The Pacific Humanitarian Team Annual Meeting consolidated this movement by strengthening a regional network of gender focal points established previously which comprised of two female representatives from five disaster-prone countries (Samoa, Fiji, Tonga, Solomon Islands and Vanuatu) with ten male volunteers from the PHT in the region. The UN Gender Group will maintain this network and build their capacity for more effective preparedness, response and recovery.

¹ UN Women and UNFPA are co-leads of the Gender Surge under the Pacific Humanitarian Team, as well as the Gender-Based Violence (GBV) thematic area of responsibility under the Pacific Humanitarian Protection Cluster led by UN OHCHR. We particularly commend the Fiji Ministry of Women for leading the Fiji Community of Practice (CoP) on gender and gender-based violence and note the openness of the Fiji National Disaster Management Office to engage in analysis and dialogue. They have set a positive example, which has already been emulated in Vanuatu. Actions like these will change systems and approaches towards collective responsibility for more resilient and empowered women, men, girls and boys in communities. We hope to see more such initiatives spreading throughout the Pacific.

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1. INTRODUCTION

There is increasing evidence that more women than men are killed in natural disasters. ²The deficit in women's participation in both preparedness and response often signals the marginalization of others, including the elderly, people with disabilities and minority groups. Women and men are often equally active in local preparedness and efforts to build disaster-resilient communities; ³both have crucial roles at the household and community level. However, women's roles in mitigating and preparing for disasters and in managing emergencies frequently go unrecognized in formal disaster-management circles in the Pacific,⁴ and they tend to be excluded from planning and relief distribution. The presence of women and attention to gender differences evaporates at progressively senior levels, until it is virtually non-existent in national and regional level discussions.

Women, girls, boys and men play different roles within the family and community, and have different levels of access to power and resources. Therefore, each of these groups is differently affected by, and finds different ways of coping with an emergency. Humanitarian actors must design programmes to meet the needs of young, old, disabled, male and female, and ensure that all have safe and equal access to humanitarian assistance. To achieve this, all groups must be consulted and actively participate in needs assessments and decision-making processes throughout the cycle of preparedness, response and recovery.

Gender equality in humanitarian action is thus about good programming and effectively reaching all segments of the affected population. Understanding gender differences, inequalities and capacities, and responding to them, improves the effectiveness of humanitarian actions. It is clear from past responses to natural disasters that when disaster plans and arrangements are not developed collaboratively, agreed to and understood by everyone, there are unnecessary casualties and suffering. Taking into account the different needs and opinions of women, girls, boys and men ensures a more effective humanitarian response.

Gender inequality is a pervasive factor that informs most facets of vulnerabilities to natural disasters. Studies show that natural disasters have a disproportionate impact on populations with limited access to resources and services. In addition, already existing risks faced by women due to ingrained discrimination can be exacerbated in a emergencies and humanitarian crises, leaving women and young people especially vulnerable to sexual violence and coercion. Disasters trigger heightened social vulnerabilities. In certain contexts, social networks break down during emergencies, leaving individuals and groups more vulnerable to abuse and less likely to access help. Within this context, the gender-based inequalities and discrimination that cause and perpetuate GBV in "normal" times persist and even escalate in times of crisis. Yet, while it is commonly acknowledged that women suffer increased vulnerability to the effects of natural disasters, their particular vulnerability to GBV is less recognized and remains a largely

²4^{Multiple sources including: Research Article: Who Died as a Result of the Tsunami? Risk Factors of Mortality Among IDPs in Sri LankaA Retrospective Cohort Analysis 2006 – PMC Public Health, Vol 6; Oxfam Briefing Note on 12-country 2004 Asian tsunami – The Tsunami's Impact on Women; and The Gendered Nature of Natural Disasters: The Impact of Catastrophic Events on the Gender Gap of Life Expectancy 1981-2002 E Neumayer/T Plumper (London School of Economics/University of Essex)}

³GenCap fieldwork and observations with humanitarian responders in Vanuatu, Samoa and Fiji (2011).

⁴United Nations. (2011). Revealing Risk, Redefining Development - Global Assessment Report on Disaster Risk Reduction and Pacific Humanitarian Team. (2011).Improving the Quality of National and Regional Disaster Risk Management in the Pacific – Proposal for Capacity Building.

neglected area within the field of disaster management. Hence the need for a more systematic identification and integration of information on GBV in disaster research and practice. As in Fiji, an assessment carried out by UNFPA⁵ in Latin America, shows that there are only a small number of programmes implemented to address GBV in disaster response and recovery, thus signaling gap areas in terms of disaster preparedness, response and recovery, while also defining hindering factors which could be addressed. The magnitude of GBV is difficult to determine even in normal situations, and all the more difficult in disaster situations where barriers to reporting – fear of retribution, powerlessness, lack of support, inaccessibility of public services, and the dispersion of families and communities – are greater. While more research is needed, available evidence suggests that the stress and disruption of natural disasters may lead to a rise in GBV, particularly sexual violence. Owing to this, first responders and other field workers are generally advised to assume that sexual violence may be a problem unless they have conclusive proof to the contrary.

2. DESK REVIEW OF GENDER AND GENDER-BASED VIOLENCE IN EMERGENCIES

Observations of emergencies in the Pacific pointed to the fact that pre-existing conditions of domestic violence, rape and prostitution will occur or be further exacerbated during a disaster. ⁶The literature states this to also be true in other cases around the world. In Southern Benin, an assessment of violence against women and girls was undertaken to better understand the gender-based risks and vulnerabilities faced by women and girls since the excessive flooding of 2010. ⁷The assessment found that common types of GBV mentioned by their respondents were intimate partner violence i.e. wife beating, economic and psychological violence, forced marriage, marital rape and partner sexual harassment. Other forms of violence included trafficking of girls, prostitution of minors and kidnapping. Perpetrators ranged from those they know (husbands, boys, men, traditional healers, and teachers) to humanitarian workers. ⁸Sources of vulnerability to GBV include 'loss of resources and livelihoods, risky sexual practices, social stigma of survivors of sexual violence, forced marriage and so forth'.

"Overall, by destroying resources, livelihoods and infrastructure, the flooding seems to have exacerbated existing types of violence that are fueled by financial hardship – namely intimate partner violence, and possibly trafficking and forced marriage as economic coping strategies." ⁹

In the Solomon Islands in 2007, an earthquake triggered a tsunami and displaced around 10 000 people, who had to be temporarily relocated to campsites. Cases of GBV in the form of safety and security to access water sources emerged. Women and girls felt that the distance to walk to take a bath was too far from the campsite where they were temporarily relocated. Men had begun to loiter around these sources whenever they were having a bath. A case of child sexual abuse was reported but other incidences of violence were unreported due to fear of being reprised by the perpetrator.¹⁰ In other emergencies, women's roles as mothers and nurturers inadvertently

⁵Available at *http://lac.unfpa.org/webdav/site/lac/shared/DOCUMENTS/2012* (Accessed on 18 November 2012).

⁶ Observations of the Gender Capacity Advisers within UNOCHA for the period 2009 – 2012.

Care Benin, (2011). An assessment of Gender Based Violence in Emergencies in Southern Benin. Emergency ⁷Programme Care Benin: p iv.

⁸ Ibid.

⁹ Ibid.

¹⁰ Tara, R. (2007). Case Study – Gender and Disaster Risk Management. Western Earthquake/Tsunami on April 2nd, 2007. National Disaster Management Office, Solomon Islands.

made them vulnerable, as their immediate response was to save their children first; regardless of the high exposure to risk.¹¹ In other global examples, sexual violence has consistently been a result of conflict situations and forced migration including natural disasters, and continues to be so today. In the Republic of Congo, women and children are ongoing targets of the militia's civilian rampage even in peacetime. "Widespread sexual violence against women and children along three waves of conflict illustrate long-standing cultural traditions supporting the In Afghanistan, GBV towards women by virtue of the Taliban exploitation of women."¹² edict is widespread. Other forms of GBV including child abuse, trafficking for prostitution and domestic violence, are perpetrated. In Pakistan, a rise in GBV among the refugee population has been reported and the apparent lack of assistance and protections offered by the government of Pakistan have exacerbated harmful practices and, in fact, introduced new forms of violence.¹³ These forms of violence are situational and economically driven: early marriages, domestic disputes associated with precarious status of refugees and high rates of unemployment.¹⁴ GBV in Burma and Thailand have been reported by survivors to be more brutal. Forms of violence in conflict include gang rape, forced genital penetration by knives and other objects, mutilation of breasts and genitals, and more.15

3. THE FIJI POST FLOOD REVIEW

Against this background the Pacific UN Gender Group commissioned a review of the response to the floods in Fiji, which struck the Western Division of Fiji twice in one year; January and March of 2012. The review was also prompted by continuous concerns raised about protection gaps that have been identified by the Protection Cluster, and various reports from Fiji NGOs that the number of women affected by GBV is very high. In one survey conducted amongst female respondents, 80 percentof females interviewed reported having witnessed violence in the home, and 66 percent of females reported that their partners abused them. Nearly half of these women reported that they had been repeatedly abused and 44 percent of those reported that this happened while they were pregnant. An interesting statistic from this research (Empower Pacific, 2012) is that over 72 percent of the women who reported some form of domestic abuse were still in the relationship. ¹⁶ It was thus viewed as critical to get an overview of how these human rights issues manifested during emergencies in Fiji and what could be done in terms of preparedness, response and recovery planning to address them.

In addition, the PHT observed evidence of ethnic marginalization, discriminatory relief assistance, lack of standardized guidelines and processes for safety, security and management of evacuation centres, throughout the emergency responses,¹⁷ prompting members of the protection cluster to join a UNICEF – led post-flood assessment to further observe and verify some of the protection issues with affected people. The UN Gender Group participated in this mission to contribute insights on gender mainstreaming concerns. This review report is also informed by overall

¹⁷Pacific Humanitarian Team. (2012). Revised Humanitarian Action Plan for the Fiji Floods (TD17F). Suva, Fiji.

¹¹ Rove, J and Maka, J. (2009). Case Study on Gender and Risk Management: Guadalcanal Flash Floods.

¹²Ward, J. (2002). If Not Now, When? Addressing Gender-based Violence in Refugee, Internally Displace and Post-conflict Settings. A Global Overview. New York, NY.

¹³Ibid. p 45

¹⁴Ibid.

¹⁵Ibid p. 53

¹⁶Reports from Empower Pacific and Fiji Women's Crisis Centre, Fiji-based NGOs. Available at http://www.unicef.org/pacificislands/resources_10056.html (Accessed on 18 November 2012).

See also Chung, M., & Howick-Smith, T. (2007). Fiji. A Situation Analysis of Children, Youth and Women. Suva, Fiji: Government of Fiji with the assistance of UNICEF. Available at http://empowerpacific.com/news/2012/8/22/gender-based-violence (accessed on 18 November 2012).

gender and GBV considerations and findings from the PHPC and the field visit to provide a

more comprehensive picture of the impact of the Fiji floods on the communities in the Western Division from a protection and gender perspective (see Annex 1 for terms of reference of the review and Annex 4 for guiding questions for exploring protection issues).

4. METHODOLOGY

Statistics from the National Disaster Management Office (NDMO) records the total population in evacuation centers following the January floods as 4561 with the total population in evacuation centers following the March floods recorded at 14 729 in the Western Division.¹⁸ The Fiji Red Cross (FRC) pegged the numbers of affected people at 150 000, based on their assessments immediately after the floods.¹⁹ The NDMO office in the Western Division revealed that no reports of GBV had been documented through the NDMO data collection mechanisms. "When the boat arrived. There were 5 men in it, so we had to send the nurse (birth attendant) back in the taxi and I accompanied my niece to the hospital as she did not want to go without me and we could not all fit on the boat. I kept asking her to be strong and to try and hold on till we got to the hospital. We started our journey at 9am and finally arrived at the hospital at 3pm. She delivered the baby at 3.30pm. If we had been any later the baby would have been born on the way, without the nurse"

It was therefore decided that the focus of this review should be on gathering qualitative information from informants to build on the PHPC observations and to use that information as the basis for a gender analysis of the response to the floods to guide preparedness, response and recovery plans in Fiji. This was also a lessons learnt exercise for Fiji and the Pacific in terms of gender-sensitive programming. See Annex 2 for a full list of organizations and individuals interviewed using semi-structured interviews and guided focus group discussions.

As noted in the introduction, gender and GBV issues are difficult to determine in any situation and especially in male-dominated, culturally conservative societies such as Fiji. It was anticipated therefore that formal discussions would elicit inadequate information without the extensive trust building that takes time to establish. The interviews and discussion sessions were extended into informal "chats" which yielded more detailed information once informants relaxed and felt less pressure to say the 'right' thing.

Since the review had a finite time period and there were considerable distances to travel between the affected communities and districts, the number of informants was limited and not as many were reached as had been initially planned for. However, a cross section of areas provided a significant overview of the gender and GBV issues that had emerged during the floods. The reviewers fortunately began the process with the office of the Commissioner Western, who provided entry to otherwise difficult to reach villages, and introductions to village headmen in the Districts of Ba, Tavua, Rakiraki and Sigatoka. Entry to other settlements was ensured through the assistance of Femlink members, an informal community facilitator's network and the Women's Division of the TISI Sangam. The information gathered is from both indigenous Fijian and Indo-Fijian communities of the Western Division. It is important to note that the formal village system with the village headman present at all times prevented the women from speaking openly about any issues of gender discrimination or violence. From the responses to questions one had to "read between the lines" to gain an understanding of the deeper issues that would not be articulated in that space. These insights were later corroborated with social workers and teachers in the area.

5. GENDER ANALYSIS OF THE REVIEW

As stated above, in Fiji large scale gender inequality exists in the social, economic and political spheres. This was clearly evidenced by the differing impacts of the flood event on women, men, boys and girls. These differences were in:

a)Emergency communication. Women in Nadi reported the advancing waters long before the men realized that the waters had risen since the women were up fixing food very early. Messaging on transporting a pregnant woman was not clearly communicated or understoodwhich resulted in having to leave behind the pregnant woman's attending nurse, since she chose to have her family member accompany her and as the boat transportation dispatched to evacuate her was full of men coming to the rescue.

b)Household decisions about use of relief assets. Although most communities reported that relief items were shared, instances of violence and community conflicts surrounding the distribution were talked about in and shared in Ba and Rakirakibut not reported; neither was the fact that the women waited for the men to make the decisions with regards to its distribution.

c) Voluntary relief and recovery work. Women played a big role in removing the waist-high levels of silt left behind and were left feeling more despairing and depressed at the loss of their goods than the men, particularly for those that live within the town centre of Nadi.

d) Access to evacuation shelter and relief goods. Some communities did not access the evacuation centres at times due to tensions between communities and/or ethnic groups. Some women reported that even if they did want to go, the men would not allow it.

e) Employment in disaster planning, relief and recovery programs. Women were targeted as beneficiaries by one pilot cash-for-work programme in Rakiraki. Lessons learned from this project revealed that although the programme benefited single mothers, the men preferred more balanced selection of men and women. Some arguments arose between the participants (husbands and wives) over working hours and wages.²⁰

Women are most often portrayed as the victims of disaster, and their central role in response to disaster is often overlooked. This review found that women's pre-disaster familial responsibilities were magnified and expanded by the onset of the floods and even with significantly less support and resources than normal, they coped and were able to support and encourage their families and others to cope. They played a central role within the families, transporting the children to safety on the rooftops and working together with the men to secure relief from emergency authorities, to meet the immediate survival needs of family members and managing temporary relocation.

²⁰Challenges faced in the Rakiraki programme were addressed with the extension of the programme to Nadi. Community leaders, both men and women, were engaged throughout the process to involve women. This led to positive impacts on husband-wife relations as well as for the community as a whole. UNDP (2012) *Review of Cash for Work Programme in Rakiraki, UNDP (2012) Draft Review of Cash for Work Programme in Nadi.* UNDP Fiji Multi-Country Office. Suva.

In general incorporating gender issues into disaster management requires:

Generating sex and age disaggregated data for community vulnerability and capacity assessments (Using tools on mapping genderbased vulnerabilities). In most cases during the Fiji floods, this was not done adequately and where it was done, there was little understanding by either evacuation-center managers or damage assessors of what to do with the information. Officials collecting data at evacuation centers and emergency operations centers aggregated the numbers collected into "adults, children and infants" and

"We found out that the mother had apparently left the family and the father was not at home and when we visited the house we found out that the girl goes out at night and brings in money to buy food for the family." Nadi Teacher

did not understand that disaggregated data would improve response at the time. However officials have since realized this and are reviewing intake forms. Still, further training is needed to embed and expand the understanding of what sex and age disaggregated datais and how to use it to do a gender analysis. At the time of writing, UNOCHA, UN Women and UNFPA to accommodate this need were planning a workshop.

- Identifying those who are marginalized and particularly at risk. This includes women who are:
 - economically destitute
 - belonging to racial and ethnic minorities
 - with chronic disabilities or health problems
 - exposed to GBV including slapping and beating
 - with insufficient security and privacy in shelters

A story which illustrated a particular vulnerability not previously considered was of women who were recently married into Indo-Fijian families and therefore new to the husband's community. These women were marginalized and not offered assistance from their husband's family members. The reviewers also found that Indo-Fijian families had not accessed the evacuation centers, preferring to receive help from family and friends. Some said this was due to unfamiliarity with mixing across ethnic lines at such an intimate level. There were, however, also stories of people

"The women were really badly affected, there was no water, electricity, women no and were carrying clothes all the way into town to a culvert/ borehole where they tried to wash their dirty clothes. My wife did that for 4/5 days after floods," Church Pastor the Ba.

helping each other across ethnic boundaries. Those families who chose not to go to the center and who were outside the range of the distribution network, particularly women and children, who were not mobile, did not get any assistance at all. In addition, the teams understood from interviewees that many elderly or disabled people were left behind when other family members went to the evacuation centers, either because they had no way of getting there physically, or did not have a wheelchair or the center was inaccessible to a wheelchair. Although there were no official reports of GBV from the evacuation centers, NGO's such as the Fiji Women's Crisis Center

(FWCC) heard many stories from women reporting that their husbands were violently forcing them to have sex while in the center, despite the lack of privacy in the

living arrangements. Further, lessons learnt from the Cash-for-Work programme revealed that there was a relatively small number of Indo-Fijian women in the programme in both Rakiraki and Nadi and aqual representation of both

and Nadi and equal representation of both ethnic groups remained a challenge.

Ô. Engaging women as full and equal partners in community-based disaster mitigation and planning, and integrating women at the highest levels of planning and decision making in shelter/ camp/ evacuation center environments (particularly with respect to the reproductive and other women's health needs) and employing women as primary distributors of emergency rations and medical supplies - women were very involved



woman engaged in daily subsistence fishing

in the actual response and ground work following the disaster. Communities reported that women were actually extremely resilient and quickly able to think of how to save their goods, work together to get their families to safety. They were also involved in the distribution of food and non-food items. However, having women in the distribution work meant that they

"One woman we came across had lost all her clothes and all of her household ware and all her kitchen utensils, and when we arrived at her home, she was digging through the mud trying to dig out her pot which she was able to identify in the mud" *Church Pastor, Ba* were exposed to conflict and threats of violence due to discontent about the way rations were distributed. Women distributors reported feeling very threatened and unsafe and requested that next time they go out in gender balanced teams.

Although NGO's like the Fiji Red Cross and many faith-based organizations did hand out food and nonfood items, a critical need that mainly affected women and girls was overlooked. While the men and boys could easily strip off their wet clothes the women and girls were forced to stay in the discomfort of the clothes

they had on until relief assistance was received, since the waters had risen. Due to the acute water shortage in the immediate aftermath, they were exposed to health risks drinking from unsafe water sources, and other dangers from walking long distances

6. TRAUMA AND PSYCHOSOCIAL NEEDS

Even though this review was being conducted some months after the last flood, many of the men and women interviewed were still dealing with the trauma and devastation of losing years of savings in the form of household goods, within a few hours. In some cases, whole kitchens were completely destroyed as village kitchens are often built on a lower level, away from the main living area. Although women and men both spoke of their losses, it was the women whostill felt the loss of their vegetable gardens and their main source of income from the sea and river (crabs and fresh water mussels) most keenly.

Psychosocial support, although provided by a few NGO's was inadequate and mostly ad-hoc. Organizations who specialized in offering this service were overwhelmed while others did what

they could with the limited human and financial resources they had. Most people reported that the support they did receive came from other each other and occasionally from the faith-based organizations and CSO representatives. Communities seemed heavily traumatized not only from the losses but from the thought of possibly having to relocate. People living in areas that frequently flood chose to live in those areas for easy access to employment and education opportunities and also for easy access to town centers. Some villages are located next to rivers and streams as the rivers provide food and a source of income for the villagers and to relocate would mean moving away from this livelihood source.

It was starkly evident from the accounts from men and women, of how differently the flood had impacted on the men, women, youth and boys and girls. Men talked more of the financial stresses the flood had created in terms of increased costs of repair to their homes as well as the inability to pay the rent as consequences of the lost income from livelihood activities. They said that in the first flood, the landlord had waived the rent for a short period and repaired the house at his cost. This time he was refusing their calls and they could not afford to move.

7. SEXUAL EXPLOITATION AND ABUSE (SEA) AND GENDER-BASED VIOLENCE (GBV)



Group of community women interviewees in Nadi Area

Areas of concern during times of humanitarian emergencies are the protection of women, girls, boys and men from exploitation sexual and abuse including from service providers and aid workers and from all forms of GBV, including domestic violence. report published А by AusAID in 2008 on Violence Against Women in Melanesia and East Timor, said that the most common forms of violence in Fiji were physical, sexual and emotional violence by an intimate partner and assault including sexual child sexual abuse.²¹ The Fiji

Women's Crisis Center (FWCC) carried out a survey in 1999 stating that 66 percent of women experienced physical violence from an intimate partner. While gender inequality and gender discrimination are the root causes of GBV, various other factors determine the type and extent of violence in each setting. In emergencies, norms regulating social behaviour are weakened and traditional social systems often break down. Existing vulnerabilities are further exacerbated. Women and children may be separated from family and community supports, making them more vulnerable to abuse and exploitation due to their gender, age and dependence on others for help and safe passage. ²² As stated earlier there were no official reports of this nature from the NDMO in the Western Division of Fiji during the floods.

²¹AUSAID. (2008). Violence Against Women in Melanesia and East Timor. Australian Government: AusAID. ²²IASC. (2006). Women, Girls, Boys and Men Different Needs – Equal Opportunities. IASC Gender Handbook in Humanitarian Action. However the reviewers heard stories of young men looting bottle stores and of drinking and disruptive behavior in the Evacuation Centers. Although the police were involved, there were no GBV reports being collected or messages disseminated to raise awareness of GBV in emergencies. It is likely that any issues arising from this disorderly behavior went unreported.

Results from sector studies and a workshop on poverty impact assessment (Suva, April 2010) point to widespread poverty with an agreed estimate of 45 percent of the population living below the poverty line.²³ The increased financial stress in the aftermath of the flood has led to some incidence of commercial sexual exploitation of children observed by informants, which were recounted during the review. Teachers noticed unusual school-dropout rates, and on investigation they found that either children were being kept at home to take care of younger children or were being sent out at night to solicit extra cash through sex work. The teachers also came across a case of a wife engaging in paid sex work with the knowledge of her husband. Other cases were of children kept out of school to sell on the street. During the focus-group discussions, it was evident that domestic violence had been an issue prior to, during and in the aftermath of the flood. However, the women would not speak openly about it while the headmen or priests were in the groups and made indirect or oblique references indicating that the problem existed. In response to the question asked if any violence had occurred, the women responded that while there may have been problems, as good Christians they knew that they had to turn to the Lord with their problems and all would be well. In another interview with a couple, the wife showed signs of abuse by her fearful behavior and constant approval seeking from the husband. He, in turn, admitted to excessive drinking of alcohol as a stress reliever. The social worker that accompanied the reviewers confirmed that this family suffered high levels of domestic violence but it was considered normal in those parts.

While it was difficult to assume that the floods were a cause of the domestic violence, the added stress of a disaster is known to exacerbate pre-existing situations. This was highlighted to the reviewers when a community worker who had been liaising with the review had to withdraw from the assignment due to injuries she suffered as a result of domestic violence the night before the meeting. One of the health workers interviewed reported that two of her colleagues had been the victims of domestic violence during the week of the assessment. Under the mandate of the Domestic Violence Decree in Fiji, the police were called in but no counseling was offered to the survivor. The acceptance of intimate partner/domestic violence in Fiji became even more apparent when a village community member in Rakiraki laughed off the question about such violence stating "women in this village like being slapped around because it is good for them." The women in this community confirmed that they were beaten and acknowledged that this happened during the floods when tensions were high. The acceptance of violence as a daily occurrence appeared to be more common amongst the poorer families, especially in families living as tenants. This increased the vulnerability of the women who chose to remain in the violent relationship out of fear of being homeless and for the welfare of the children.

8. DISASTER PREPAREDNESS, RESPONSE AND RECOVERY

The Fiji Government Emergency response is activated through the National Disaster Management Office (NDMO) in Suva, which operationalizes the National Emergency Operation Centre (NEOC) in Suva and the Western Division Emergency Operation Centre (DEOC) based at the office of the Commissioner Western in Lautoka. During the floods, the District Emergency

Operations Centers were set up in various districts affected by the floods with various sectors also setting up Emergency Operations teams to provide support to Divisional and District EOC. The Search and Rescue Operations were assigned to the National Fire Authority and the Fiji Police Force, with support from the Fiji Military Forces who were also directly involved in supporting District Emergency Operations Centers and running Evacuation Centers. Immediately after the floods, the Divisional EOC through the District EOCs assigned assessment teams to visit flood affected areas to identify families and individuals in need of assistance as well as the level of assistance required.

While the government team conducted assessments, NGOs, CSOs and FBOs were already responding to the community through the provision of cooked food as well as food rations and clothes. Those who were able to make it to evacuation centers received direct assistance from government at the EC, where they were also monitored by government's inter-agency team.

Fiji Red Cross, revised their approach from lessons learnt during the January floods and responded to the specific needs of women, girls and infants through the provision of dignity packs:more packages of sanitary pads as there were more than one female in some families, addition of continence pads for elderly and disabled who were part of the evacuation, and diapers for babies and young children. The monitoring of the use of the dignity packs was done and it showed that the packs did reach the affected women. One interviewee mentioned that in her area, the packs had only been given to pregnant women due to some confusion. This was not mentioned elsewhere.

Responding to questions on Disaster Preparedness, both the Director of NDMO and the Operations Officer at the Commissioner Western's office highlighted training that had been conducted with various communities, in the effort to get communities to prepare their own Community Disaster Plans. The training included key people in the community such as the village headman, the leader of the women's group and a youth representative and often included simulation exercises, so those trained could act out responses during times of emergencies. It was noted, however, that funding limitations had not allowed the training to spread as widely as it should and the focus of the initial training had been on Cyclone Preparedness.

Members of the community expressed a desire to be involved in disaster preparedness through community representation on committees and task forces. Representatives from faith-based organizations and the private sector stressed the importance of government partnering with them at all levels of disaster response as they had extensive networks regionally and in the community and could use the networks to access hard to reach communities. Most of the women's groups requested closer evacuation centers with water tanks, so they could get to the centers quickly during times of disaster and be able to access clean water.

9. CURRENT COMMITMENT, CAPACITY AND RESOURCES

In terms of ongoing work on gender mainstreaming in humanitarian action, the review identified a number of key opportunities that could be used as entry points for further work in this area, which also reflect the commitment to pay specific attention to the different needs of women, girls, boys and men during disasters. These include:

• Recognising the contribution of women to preparing Community Disaster Plans and including women's representatives during the community training activities conducted by NDMO.

- The NDMO report from the January floods highlighting the need to pay specific attention to the protection of women and children, as a result of recommendations by the Ministry of Education but captured under the title of child protection.
- Training FRC staff and volunteers on GBV in emergencies by the FWCC Coordinator, the first of which happened in November 2011.
- Submissions made to the office of the Commissioner Western by women's NGO FemLink Pacific on the importance including women at all stages of disaster response, recovery and preparedness processes with regular updates on Weather Watch at www. Femlinkpacific.org.fj.
- Including dignity packs in the non-food Items distribution processes and monitoring its usefulness.
- Training welfare officers and other NDMO officials on child protection in emergencies, which reflects an existing awareness of protection principles amongst government officials. Recommendations have also been made by the Pacific Humanitarian Protection Cluster (PHPC) for the Pacific region, including those which emerged from its field visit after the Fiji Floods. These recommendations cover the areas of protection preparedness, protection response and protection recovery with a focus on:
- Building awareness and understanding of core protection principles, responsibilities and risks in disasters among government and non-government actors engaged in humanitarian response.
- Developing practical capacity among government and non-government actors engaged in humanitarian response to identify, monitor, prevent and respond to the protection needs of the most vulnerable.
- Promoting and supporting government and non-government processes for monitoring and follow-up of:
- (i) identified vulnerable individuals/groups;
- (ii) protection issues or risks arising from the emergency; or as disaster-affected communities face the challenges of rebuilding and recovery;
- (iii) protection concerns that may arise as a consequence of the emergency or early recovery interventions of humanitarian and development agencies.

In terms of existing resources and capacity around GBV prevention, monitoring and response through service provision in disaster situations, the capacity directly working in the area of GBV/VAW and based in the community are the Fiji Women's Crisis Centre who have offices and counselors in Nadi, Ba and Rakiraki and the Pacific Counseling Social Services (now known as Empower Pacific), an NGO based in Lautoka have also been involved in post-flood counseling activities.

Empower Pacific (PCSS) have an existing agreement with the Department of Social Welfare and the Ministry of Health to provide counseling services to their clients. They recently received funding from New Zealand Aid (NZAID) to review the World Health Organization (WHO) Mental Health Psychological First Aid in Emergencies Model, to adapt it to the Pacific context.

Responders requested that additional resources be produced to strengthen the work in this area and to better equip those working directly in Disaster Management. ²⁴ The wealth of generic materials that exist could be tailored to the Fiji context and distributed at all levels of the preparedness and response chain. It could also be used to inform specific sectoral training on gender and GBV in humanitarian response.

10. GAP ANALYSIS AND RECOMMENDATIONS

While the review highlighted opportunities and entry points for further development of the work of gender in humanitarian action in Fiji, it also highlighted certain gaps in capacity at government level. For example, the Ministry of Women has Women's Interest Officers in each district who are involved in the disaster response and who are also strategically connected to women at the community level. However these officers do not have sufficient capacity to provide strategic guidance to the disaster response and recovery process. These officers were involved in the disaster response and recovery process. These officers were involved in the disaster response and administrative support positions, and also did now know what they could do to help.

The National Women's Machinery is another critical mechanism to provide strategic guidance and substantive input at all stages of disaster response and recovery and they can also drive the gender mainstreaming response through working alongside disaster management officials at national, divisional and district levels.

The contributions of NGOs such as the Fiji Women's Crisis Centre, Empower Pacific and FemLink Pacific are crucial to gender mainstreaming in disaster response and recovery given the substantive work that is being conducted at the community level in areas of GBV/VAW and also in monitoring weather patterns and advocacy and awareness of disaster preparedness.

An important gap identified is that while there is interest and will to collect sexand age disaggregated data, there is little capacity at present to use the data for gender analysis and program design. This is a clear training need at all levels of operation in the NDMO and for other frontline planners and responders to take on board.

This information as well as some of the key findings from this review can be used to produce communication and advocacy material, using the IASC booklets as a guide, and tailoring it to the specific country context.

²⁴ UNDP recently published "Integrating Gender in Disaster Management in Small Island Developing States: A Guide" which is a tool kit to help to identify and integrate gender into decision-making and actions in every phase of disaster risk management and contains checklists during pre-and post disaster.

10.1 SPECIFIC RECOMMENDATIONS

- Coordinated approach to gender in humanitarian action through the strengthening of the National Women's Machinery to work strategically with NGO, FBO, CSO representatives at national, divisional and district level.
- Gender in humanitarian-action training and capacity building to be conducted for all:
 - o NWM representatives at national, divisional and district levels
 - o Integrated into NDMO Response mechanisms at national, divisional, district levels for the creation of enabling environment
 - o FBO and CSO representatives identified at national, divisional and district level.
- Disaster Response to ensure:
 - o Gathering of sex and age disaggregated data including data on PLWD, elderly and single parent households
 - o Strategic engagement with gender advocates at national, divisional and district level (through a coordinated approach led by NWM above).
- Sectoral Response to ensure:
 - Key issues of women, girls and boys and men are identified through working alongside gender advocates at national, district and divisional level
 - o Strengthened gender analysis through training at sector level using IASC material tailored to the Fiji context.
- Disaster Recovery to ensure:
 - o Assessment of gender-specific needs and vulnerabilities, and acknowledgement of gender-differentiated capacities and skills
 - o Putting preventive measures for GBV and other protection issues and response mechanism in place
 - o Creating an enabling environment for both men and women to engage in the process together, thus bringing positive impacts on their relations and empowering women.

11. CONCLUSION

This review has confirmed that taking the distinct experiences, needs, rights, capacities and vulnerabilities of women, girls, boys and men makes humanitarian response more effective, sustainable and equitable and saves lives. Effective assistance and protection requires equitable participation and robust gender analysis based on sex and age disaggregated data. Responses are effective when they reflect the different experiences such as access to and control over food, health, shelter, clean water and sanitation and productive resources amongst others. Failing to address differences can increase disparities, further marginalize the more vulnerable groups and severely compromise impact, even leading to compounded harm.

It is thus not an option to consider integrating gender and GBV into emergency responses, it must be done. Governments, non-government actors and civil society engaged in preparedness, response and recovery in disaster management have a critical role in ensuring that gender is integrated into their planning and response activities. Partnerships are essential for an effective, coordinated plan of action in disasters to avoid duplication and to improve service delivery.

"Identifying and addressing these distinct needs enhances humanitarian programming and puts center stage the participation of everyone in the affected population, and accountability by humanitarian [agencies] for their actions to women, girls, boys and men affected by crisis," comments Valerie Amos, Under-Secretary-General for Humanitarian Affairs & Emergency Relief Coordinator.

ANNEX 1: TERMS OF REFERENCE

GENDER & GENDER-BASED VIOLENCE (GBV) POST-FLOOD REVIEW & ANALYSIS TERMS OF REFERENCE FOR A CONSULTANCY, UP TO 1 MONTH, IN COORDINATION WITH THE UN GENDER CAPACITY ADVISOR

Purpose:

- 1. To gain an understanding of gender and GBV issues arising from the impact of the flood disaster
- 2. To gain insight on potential gender issues and GBV prevention and response strategies in light of the humanitarian response
- 3. To outline capacities among existing organizations to strengthen GBV prevention and response through emergency preparedness.

Specific objectives of this review include:

- 4. To document stories and information from affected communities on how the floods impacted differently on men, women, boys and girls
- 5. To document stories and information from affected communities on how the humanitarian response impacted differently on men, women, boys and girls, across different sectors
- 6. To explore community-level attitudes and practices regarding the engagement of men, women, boys and girls in disaster preparedness, response and recovery activities
- 7. To explore community-level attitudes and practices regarding the engagement of men, women, boys and girls in prevention and response to gender based violence
- 8. To identify forms of GBV before, during and after disasters
- 9. To explore existing resources and capacity around GBV prevention, monitoring and response through service provision in disaster situations
- 10. To identify local actors working in the areas of gender discrimination and/or GBV prevention/response with the interest and capacity to engage in humanitarian action (whether in the form of advocacy, information-dissemination, technical assistance and capacity-building, service-provision, material assistance etc.) preparedness, response or recovery activities)

It is anticipated that the findings of this review will:

- Inform the development of training and capacity-building initiatives with key stakeholders to increase understanding of the concept and means of mainstreaming gender and GBV into emergency activities
- Provide content (e.g. real-life illustrations/stories) for the development of contextualized training resources and modules on gender and GBV in emergencies

- Inform the development of a clear framework/strategy for UN Women and UNFPA to provide gender and GBV guidance and support to key government and non-government responders in emergencies, through the Gender Surge and GBV AoR mechanisms
- Inform the development of key advocacy messages on gender and GBV, targeted to government, non-government and community actors to enhance gender and GBV mainstreaming into disaster preparedness, response and recovery activities
- Inform UN Women and UNFPA current and future programming with its humanitarian and development partners
- Provide insights for PHT and cluster leads on how better to mainstream gender and GBV.
- Inform the revision of the Gender Mainstreaming checklists to better reflect the local context
- Feed into broader protection awareness-raising and capacity-building efforts, including ongoing resource-development and relationship-building activities of the Pacific Humanitarian Protection Cluster

The work will be implemented through joint review and analysis by a national consultant working closely with the UN GenCap Advisor.

METHODOLOGY FOR GENDER AND GBV POST-FLOODS REVIEW & ANALYSIS

This review is focused primarily on qualitative information gathering and analysis through:

- Site visits
- Interviews with key informants and FGDs
- Direct observation
- Meetings with NGO/CSO staff, volunteers, community members and other stakeholders
- Semi-structured or guided interviews with NGO/CSO staff, volunteers, community members and other stakeholders
- Focus groups with men, women, boys and girls in flood-affected communities
- Update of NGO mapping

SCOPE OF WORKS FOR GENDER AND GBV POST-FLOODS REVIEW & ANALYSIS:

All activities below are to be carried out in close consultation with the GenCap

- 1. Prepare a briefing note outlining the aims and parameters of the review, for sharing with potential participants
- 2. Identify local NGO/CSOs and other key informants in the Western Division for preliminary discussions/scoping (refer to UN Women's NGO/CSO contact list; FemLINK Pacific's rural women's network members, FWCC branches etc.)
- 3. Work with local NGOs/CSOs to identify target sites, community members and community groups for participation in focus group discussions on gender and GBV issues
- 4. Develop a schedule for site visits, key informant interviews and focus group discussions
- 5. Design a semi-structured guiding questionnaire for exploring gender and GBV issues with:
 - a. Key informants (e.g. NGO/CSO representatives, community leaders, women's groups, provincial/district authorities etc.)
 - b. Focus group discussions with diverse groups within flood-affected communities
- 6. Conduct Focus Group Discussions (FGD) and Key Informant Interviews (KIIs) with identified NGOs/CSOs and community members
- 7. Clearly document discussions and qualitative information shared by interviewees and FGD participants (raw data to be provided to UN Women for their information/records)
- 8. Analyze findings and prepare a report

DELIVERABLES:

- 1. A report on the findings
- 2. Input to the post floods workshop agenda with NDMO and other relevant stakeholders
- 3. Presentation to PHT
- 4. Presentation during the post floods workshop

ANNEX 2: QUESTIONS TO GUIDE FOCUS GROUP DISCUSSIONS AND INTERVIEWS

INTERVIEW AT NATIONAL LEVEL BACKGROUND

- 1. Obtain copies of reports of last two floods and the extent of damage in Western Division, people affected, displaced, emergency evacuation centers, how long were they open for etc.
- 2. What is process followed when there is an emergency?
- 3. How does evacuation take place?
- 4. Are there Standard Operating Procedures?
- 5. Are special considerations given to women and children during times of emergency?
- 6. When Evacuation Centers are set up, who manages them?
- 7. More information on Divisional and District Emergency Operations Centers?
- 8. Who are key stakeholders in times of Emergency?
- 9. How are incidents supposed to be handled during emergencies?
- 10. Are there any specific processes for protection of women and children?
- 11. Is there a Code of Conduct for Evacuation Centers

CAPACITY FOR GENDER SENSITIVE CONSIDERATIONS

- 12. What training is given to those who are required to manage evacuation centers?
- 13. Any special capacity building training?
- 14. What type of support is provided for those who display stress during times of emergencies? E.g. Family stresses as a result of loosing everything, moving away from home?
- 15. How are incidents handled during emergencies?
- 16. Who are cases referred to?

RESPONSE

- 17. In terms of Emergency Response, how is the response determined? Who is consulted to determine who needs assistance? Probe...usual community leaders? Are any Women's Groups consulted when determining response?
- 18. Are there considerations given for single parent households etc.?
- 19. Who are the local groups involved in community response?
- 20. What are the specific focus areas of these local groups?

COMMUNITY LEVEL QUESTIONS BASED ON SPECIFIC ASSIGNMENT OBJECTIVES

- 1. How did the floods impact you as women in this community? Tell us your stories
- 2. How did the floods affect you as men in this community? Tell us your stories
- 3. What type of assistance did you receive during the emergency?
- 4. How did the assistance come? Through church group, DO's office etc.?
- 5. Did the assistance meet your specific needs as women during the emergency?
- 6. Did the assistance meet your specific needs as men during the emergency?
- 7. Have you been involved in any training or discussions to prepare your communities for disasters?
 - a. If yes, please explain when, who was it run by etc.
 - b. If no, are you aware of any such training conducted in other communities
- 8. Do you think you need to be involved in these trainings? What recommendations would you make?
- 9. Are you aware of any incidents that took place during the floods? Please share.
- 10. Are you aware of family disputes that happened during or after the floods?
 - a. If yes, what do you think contributed to these disputes?
 - b. Are you aware of an increase in violence in your communities since the floods?
 - c. Are you aware of cases of domestic violence during this time?
 - d. If yes, is this an ongoing thing, or is it just happening now?
- Are you aware of any incidents of Violence Against Women during this time?
 a. If yes, please share
- 12. Do you think there is a role for the community in responding to cases of GBV during emergencies?
 - a. If yes, what would that role be?
 - b. If no, why not?

ANNEX 3: SCHEDULE OF INTERVIEWS

SCHEDULE OF INTERVIEWS – GENDER & GENDER BASED VIOLENCE POST FLOOD REVIEW AND ANALYSIS

	Position	Organization	Interview	Accommodation
			Date and	
National			Time	
	Head	National	3pm –	Home based
		Disaster	21/06/12	
		Management		
		Office		
			22/06/12	Home based
	Assistant	Social	22/06/12	Home based
	Director	Welfare		
	Child Services			
Divisional	Commissioner	Provincial	26/06/12	Lautoka
	Western/	Development		
	Operations			
	Manager			
	Community	Matawalu	27/06/12	Lautoka
	Facilitator	village		
	Provincial	Ministry of	27/06/12	Lautoka
	Administrator	Provincial		
	Ва	Development		
	Senior	Ministry of	27/06/12	Lautoka
	Women's	Women,		
	Interest	Social		
	Officer	Welfare &		
		Poverty		
		Alleviation		
	Advisory	Nadi	27/06/12	Nadi
	Councillor	Advisory		
		Council		
	National	TISI Sangam	27/06/12	Nadi
	President			
	(Women's			
	Wing)			
	Exec	NCWF &	27/06/12	Nadi
	Committee	SVM		
	Member			
	Womens	Nadi	27/06/12	Nadi
	Interest	Provincial		
	Officer	Officeq		
	Executive	Sigma	27/06/12	Nadi
	Director	Security		
		Services		
		Crime		
		Stoppers		

		Community	26/06/12	Nadi
		Worker		
	Focus Group	FemLink	26/06/12	Nadi
	Session (Peri-	Network		
	Urban)			
	School		29/06/12	Nadi
	Teacher -			
	Project	PCSS	29/06/12	
	Manager			
	CEO	PCSS	29/06/12	
	Matawalu		29/06/12	
	Interviews	Community	27/06/12	Nadi
	(Nadi rural)	Worker		
District	DO Ba	Provincial	28/06/12	Nadi
		Office		
	Church Pastor	Yalalevu	02/07/12	Lautoka
		Community		
		Flats		
	Widows	Vatulaulau	02/07/12)	Lautoka
		Community		
	DOTavua		03/07/12	Rakiraki
	Tavua	Tavua	03/07/12	Rakiraki
	Community	Community		
	DO Rakiraki	Rakiraki	04/07/12	Rakiraki
		Community		
	Health	Ra rural	04/07/12	
	Services			
	Vunitogoloa	Ra peri urban	04/07/12	
	villahe			
	DO Sigatoka	Sigatoka	05/07/12	Sigatoka
	(pm)			
	Nadroga	Peri-urban	06/07/12	Sigatoka
	Navosa	Semo	07/07/12	Sigatoka
	Travel to Suva	Sunday	08/07/12	

SCHEDULE OVERVIEW:

- Monday 25/06/12 Depart Suva for Nadi
- 25/06/12 02/06/12 Nadi Accommodation (Nadi/Lautoka/Ba consultations)
- July 3rd Drive to Tavua
- Tues 03/07/12 Depart Nadi for Tavua
- 03/07/12 05/07/12 Tavua Accommodation (Tavua/ Rakiraki)
- 01/07/12 04/07/12 Rakiraki Accomodation (Tavua/Rakiraki consultations)
- July 5th Drive to Sigatoka
- 05/07/12 09/07/12 Sigatoka Accommodation (Nadroga/Navosa/Coral Coast)
- 10/07/12 Drive to Suva

ANNEX 4: GUIDING QUESTIONS FOR EXPLORING PROTECTION ISSUES

The Pacific Humanitarian Protection Cluster (PHPC) compiled the following list of protection issues – identified through information and updates received from government and non-government first-responders - for possible exploration and observation with key informants after an emergency.

DISCRIMINATION

- o Eg. in access to evacuation centres (eg nearest evacuation centre available to all, regardless of the community or religious/ethnic groups that you are from)
- o Eg. in delivery of assistance/relief

IDENTIFYING THE MOST VULNERABLE

- o Identification and follow-up of vulnerable individuals/groups (including injured, sick people with disabilities, minority groups, older people, unaccompanied children etc)
- o Linking identified vulnerable individuals with appropriate care and support services (through information-sharing and referral with relevant actors)
- o Availability of information on services available to support vulnerable individuals/groups

COORDINATION AND DELIVERY OF RELIEF ASSISTANCE

- o Awareness of relief assistance
- o Able to access assistance safely
- o Community participation in relief activities
- o Information on what is happening; how to access assistance and support

SAFETY & SECURITY:

- o Main threats to safety when evacuees were in evacuation centres (nature of threats)
- o Main concerns when evacuees were in evacuation centres (nature of concerns)
- □ What could have been done to make you feel safer / to address your concerns
- o Main threats to safety when evacuees were in evacuation centres (nature of threats)

- o Main concerns/fears in areas of return/current residence (nature of concerns)
- What could have been done to make you feel safer/ to address your concerns

PSYCHOSOCIAL SUPPORT

- o Need for psychological first aid and psychosocial support for disaster-affected children/parents/families/teachers etc
- Are people feeling sad, worried or scared? How are they dealing with these feelings?
- How are people experiencing the emergency what is their perception of events and causes? How are people thinking about the future?
- o Who are people turning to for support?
- Are there signs of psychological and social distress in the family and community (eg. behavioural and emotional problems, aggression, social withdrawal)?
- o Are there signs of negative coping strategies (eg increased family or community violence, increased levels of crime, substance misuse, exploitation or abuse etc)
- o Are there signs of tensions between groups within the population
- o Are there indications of increased tensions or violence in the home

CHILD PROTECTION

- o Are children experiencing distress following the disaster?
- Who are children turning to for support if they are feeling worried, scared, or are experiencing violence/abuse?
- With the re-opening of schools, particularly schools that were used as evacuation centres, are there any concerns regarding safety and wellbeing for school-children (eg lack of access to water and adequate sanitation at school? Exposure to hazardous waste, unsafe buildings etc)
- o Do children have access to adequate food
- Are children experiencing any increase in exposure to violence in the home and/ or at school
- Were your children attending school prior to the floods? Have they returned to school? If no, why not?

o How are children at boarding schools being accommodated where dormitories have been damaged and will take several months to repair

REFERRAL OF PROTECTION CONCERNS

- Awareness of key government and non-government local referral agencies for a range of protection concerns including:
- Mental health & psychosocial support for distressed disaster-affected individuals/families
- □ Safe shelter, medical and psychosocial support for survivors of violence and abuse
- Access to assistive devices and support for disaster-affected people with disabilities
- Child protection
- Capacity of identified referral agencies to engage in activities targeting the disaster-affected population
- o Availability of information on referral options to first responders and to disaster-affected people

INFORMATION DISSEMINATION:

o Is information on the disaster situation, and relief/recovery activities reaching affected people in a form and language that they can understand (eg print, radio etc)

RETURN TO AREAS OF NORMAL RESIDENCE:

- Was clear information provided to evacuees on conditions in their areas of normal residence, before the evacuation centre was closed
- o Do those who have returned feel safe with adequate shelter, access to potable water and other basic services
- What systems are in place for monitoring conditions for disaster-affected population in areas of relocation/return following closure of evacuation centres

CONTINUING DISPLACEMENT

- o For people whose homes were completely destroyed or severely damaged, where are they staying now?
- Are some being hosted by other families? What are the conditions in which they are currently living?
- o Are some being accommodated in tents? In which locations? Do they have access to basic services? What are the conditions in which they are currently living? For how long will they be accommodated in tents in their current location?
- o For those who cannot safely return to their place of previous residence, what is planned for transitional and permanent shelter? (For rural families? For urban families? For squatters)
- What options exist for land allocation where displaced families are not able to safely return to their places of previous residence

FOOD SECURITY, LIVELIHOODS & INCOME-GENERATION

- o Are there any new patterns of income-generation/livelihoods post-disaster?
- What coping strategies are currently being used by or impacting on different groups in the affected community including, men, women, boys, girls, elderly, people with disabilities (eg preferential feeding, keeping boys & girls out of school, men leaving their families and travelling away to search for work)?
- o How are the most vulnerable (eg female-headed HHs; single parents etc) coping with the loss of livelihoods/economic insecurity?
- o Can people safely access production and market sites?
- o How are people sourcing food for their families? What sources of food are they relying on?
- Are cash-for-work or food-for-work programs being implemented in affected areas?
 Who are they targeting? What is their impact on participants/non-participants/the broader community?

PROTECTION MAINSTREAMING INQUIRIES REGARDING HEALTH FACILITIES:

- Are disaster-affected women, men, girls and boys able to access the health facility safely?
- Can vulnerable individuals/groups (eg disaster-affected elderly/people with disabilities etc) access the health facility safely

- Are you aware of any group in need of health services who is not able to access them?
- Have disaster-affected people come to the health facility seeking psychosocial support and mental health services?
- Is there a need for nutrition programs targeting specific vulnerable groups (eg pregnant/lactating women; children under 5 years, elderly) among the disaster-affected population
- What are the main health issues and concerns being seen by community health workers in their outreach to disaster-affected communities
- Are some disaster-affected groups affected more than others with health problems requiring medical treatment? Which groups?
- Are your health workers engaging in outreach to disaster-affected communities? If yes, what information and services are you providing as part of this outreach?
- Are the health services gender-sensitive? (eg. does the health facility have both male and female staff?

PROTECTION MAINSTREAMING INQUIRIES REGARDING WASH

- Do you have access to sufficient clean water for household use (ie to meet your daily water and sanitation needs)?
- Are you able to safely access water and sanitation facilities in your home or near your home? Do you face any danger or risk of harm in meeting your daily water and sanitation needs?
- What water source are you using and how far away is it?
- Do you have access to a functioning latrine?
- What are your main concerns regarding water and sanitation?





