



Food Security interlinkages with GBV IASC GUIDELINES for Gender-based Violence Interventions in Humanitarian Settings

Centrality of Protection

“Protection of all persons affected and at risk must inform humanitarian decision-making and response...it must be central to our preparedness efforts, as part of immediate and life-saving activities....”

Principles of the Inter-Agency Standing Committee (IASC), December 2013,

Why Addressing GBV Is a Critical Concern of the Food Security and Agriculture Sector



- **The links between GBV and food insecurity are clear.**
- **For example, people who have been exposed to GBV may suffer psychosocial or physical harm, stigma and exclusion, and consequently be unable to generate income and care for their dependants.**
- **Food insecurity may exacerbate some forms of GBV. For example, women and girls who are traditionally tasked with finding fuel to prepare food, may need to venture to unsafe areas to collect firewood and be exposed to risk of assault.**
- **Within households, domestic violence can rise during periods of food scarcity, and may decline as assistance fills the food gap.**
- **Women heads of households may engage in transactional sex to be able to meet food needs, and parents may push for early marriage for their daughters in the hope they will have their food needs met elsewhere.**
- **Food or cash assistance in itself may also unintentionally contribute to GBV. A food distribution site that is located in an unsafe area, or is far from where people live, may expose women to sexual violence.**
- **Cash delivered to women without taking into consideration gender roles and responsibilities may unintentionally increase domestic violence in a society that is strictly opposed to women having control over economic resources**

Collection of firewood,
water, food / non food
items for cooking,
shelter put them at risk
of sexual assault

Pressurizing families to
marry daughters at young
age for lessening food
needs with in the family
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marry daughters at young
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needs with in the family

Commodity & cash
based interventions
Coercion to provide
sex in exchange for
food and agricultural
inputs

Unsafe locations of
distribution sites for
food and agricultural
inputs (long distances,
heavy weight of food
rations, poses risk for
sexual assault and
exploitation

Key GBV considerations FOR Assessments

Key point:

Purpose is not for FSA actors to undertake standalone GBV assessments, but rather to incorporate questions related to GBV risks into their ongoing FSA assessments

- ✓ **Promote active participation of women, girls and other at risk in FSA assessment process**
- ✓ **Collect sex-disaggregated data for planning and evaluation of food security and nutrition strategies.**
- ✓ **Assess physical security and safety risks associated with FSA activities**
- ✓ **Assess barriers faced by women and girls in accessing FSA activities**
- ✓ **Assess awareness of FSA staff on gender related issues**
- ✓ **Review existing/proposed community outreach materials on FSA to ensure inclusion of GBV risk reduction information**
- ✓ **Assessments should be inter-sectoral and interdisciplinary, with FSA actors working in partnership with other sectors as well as with GBV specialists.**

Key point:

Funding for FSA-related GBV prevention and risk mitigation activities must be included in project proposals from the outset of emergency response

- ✓ **Develop proposals for FSA programmes that reflect awareness of GBV risks and strategies for reducing those risks**
- ✓ **Prepare and provide trainings for the government, staff and community groups on safe design and implementation of FSA programmes**

IASC Gender with Age Marker

= Tool that codes (0-2 scale) whether or not a humanitarian project is designed well enough to ensure that women/girls, men/boys will benefit equally from it or that it will advance gender equality in another way

THE IASC GENDER with Age MARKER (GAM)

Both Gender marker and GBV mainstreaming **address issues of women and girls' empowerment and gender equality and include men and boys as partners in prevention.**

Some examples of GBV mainstreaming activities that can be included in proposals

- ✓ Ensuring land access for women and girls
- ✓ Designing safe distributions with equitable access for at risk groups (disabled persons, women and girls)
- ✓ Designing culturally relevant livestock programs that consider ownership, control, care and management
- ✓ Community mobilizers to create awareness on GBV risks in FSA activities
- ✓ CFM mechanisms to strengthen awareness and referral of identified GBV risks

Implementation/Programming

Key takeaway:

If effectively designed, FSA programmes can mitigate risks of GBV:

- ✓ **Design commodity and cash based interventions in ways that minimize risks of GBV**
- ✓ **Take steps to address food insecurity for women and girls eg facilitate ownership of livestock assets for women**
- ✓ **Give special attention to PREGNANT women and lactating mothers, addressing their increased nutritional needs**
- ✓ **For polygamous families, issue separate ration cards for each wife and dependents, target food aid to women- and child-headed households**
- ✓ **Participation of women and girls in FSA related committees and decision making processes**
- ✓ **Regularly provide information to inform women, girls, boys and men about entitlements, rights, targeting, distribution times and dates**
- ✓ **Incorporate safe access to cooking fuel and alternative energy into programmes**

- ✓ **Incorporate GBV prevention and mitigation strategies into policies, guidelines, SOPs of FSA programmes**
- ✓ **Advocate for the integration of GBV risk reduction activities into national and local policies and plans related to FSA, and allocate funding for sustainability**

- ✓ **Incorporate GBV prevention and mitigation messages for community outreach and awareness raising (including where to report risk and access care)**
- ✓ **Ensure FSA programmes share information about reports of GBV that abide by safety and ethical standards(shared info doesn't reveal the identity of survivors, families or broader community)**
- ✓ **Consult with GBV specialists to identify safe, confidential and appropriate systems of care (referral pathways) And ensure FSA staff have the basic skills to provide information and services required**

Coordination

- ✓ **Undertake coordination with other sectors to address GBV risks and ensure protection for women, girls and other at risk groups**
- ✓ **Seek out the GBV coordination mechanism for support and guidance and whenever possible, assign an FSA sector focal point to regularly participate in GBV coordination meetings**

- ✓ **Identify, collect and analyse core set of indicators – disaggregated by sex, age, disability and other relevant vulnerability factors – to monitor GBV risk reduction activities throughout the programme cycle**
- ✓ **Use the data to inform decision making**

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GBV POCKET GUIDE

**ANY
QUESTIONS?**