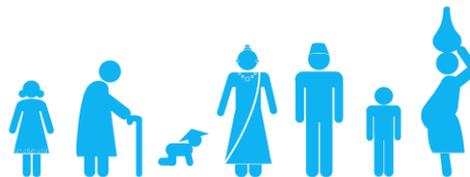


Minimum Standards on Gender



Why gender and age matter in emergency WASH interventions

According to assessments conducted by protection actors in 2016, internally displaced women and children are disproportionately vulnerable to sexual and gender based violence (SGBV). Unaccompanied girls and adolescent boys, single heads of households, child mothers, child spouses, and those living with disability are most at risk. This reality relates to myriad of factors including separation from families, limited access to support and economic opportunities, and overcrowding in IDP settlements which offer minimal privacy and security. Most women, girls and boys formerly abducted by Boko Haram face stigma and family rejection. The lack of adequate reintegration services and worsening economic situations of most internally displaced persons expose them to vulnerable environments making them susceptible to abuse, violence and exploitation. In order to address and mitigate protection challenges faced by the women, girls, boys and men, all humanitarian actors must ensure that their services are tailored to suit the specific needs of the different groups based on age, gender and diversity perspectives.

Gender, age and diversity demographics and dynamics relative to emergency WASH programming

The ongoing crisis in North East (NE), Nigeria has resulted in profound negative impact on women, girls, men and boys. Most IDPs are experiencing a range of protection risks and challenges. Their vulnerability is multidimensional including severe damage of social fabrics and safety nets, destruction of property and infrastructure in areas of origin.

- Women and children make up 79 per cent of the IDP population in NE, Nigeria with 55 percent of the IDP population being children under 18 years (30% F and 25% M¹.)
- An estimated 25 per cent of Households (HH) have children with protection needs including unaccompanied minors and separated children and 7% per cent of the IDPs are older persons with protections needs.
- 38 per cent of the HHs in Adamawa, Borno and Yobe States are headed by females without any male adult support².
- Overcrowding in IDP settlements, lack of privacy in shared accommodation and limited WASH facilities place women and girls at heightened risk of SGBV and denies them of their dignity.
- Due to culture, some families practice “tenet of *kulle*” which prevents women from leaving their homes thus, impeding their freedom of movement including access to their access to water, sanitation and hygiene services and facilities.
- Across the four states, an average of 40 per cent of women are pregnant and/or lactating. Nationally, 7.4 per cent of women aged 15 to 49 years have acute malnutrition while in Borno and Yobe, the figure is 15 per cent and 20 per cent respectively.
- Poor water and sanitation conditions at IDP sites and in crowded host communities have a large bearing on health as there is lack of adequate space and shelter in some IDP settlements.
- 44 per cent (i.e. 47 sites) have separated toilets for males and females and anecdotal reports suggest that the disaggregation is not always respected, leading many to continue to defecate in the open, hence increasing protection risk for women and young girls.
- 60 per cent (i.e. 64 sites) of the toilets are *not* fitted with locks for safety and privacy.
- 97 per cent of sites have handwashing stations but only 56 per cent have soap or water. At the majority of sites (74 per cent of sites), there was no evidence of handwashing practices.

¹ DTM Round XIII Dec 2016

² UNHCR Vulnerability Screening Round II, June 2016



- At 70 per cent of IDP sites, there was evidence of open field defecation.
- 61 per cent of households do not have access to improved water and 55 per cent of households do not have access to proper sanitation.
- Where latrines are available, with no lighting in the camps at night, IDPs often continue to defecate in the open at night as they feel unsafe to use the latrines in the dark.

The sources of all data and information are included in the OCHA Gender and SGBV Analysis (available from OCHA Maiduguri on request).



COMMUNITY ENGAGEMENT

- Share information on entitlements to distributions, services and facilities and free access to all humanitarian services.
- Monitor vulnerable women, children, older people and people with disabilities continuously to ensure receipt of entitlements without exploitation and abuse.
- Pass messages on GBV prevention and response and child protection during WASH activities
- Ensure that all humanitarian staff and volunteers sign a Code of Conduct and Child Protection Policy and receive training on child protection and the prevention of sexual exploitation and abuse (PSEA).
- Establish/support a complaints and feedback mechanism in each IDP location that includes feedback on the appropriateness of programme design and impact.

MINIMUM STANDARDS

- When conducting assessments, collect, analyze, use and report sex and age-disaggregated data on women, girls, men and boys, including vulnerabilities to inform programme design and enhancement. Pay special attention to older persons and persons with disabilities.
- Ensure that all humanitarian personnel are aware of the 'Standard Operating Procedures (SOPs) for Prevention of and Response to Gender-Based Violence (GBV and Child Protection), including a referral mechanisms for adults and children.
- Engage local community leaders, including Ballamas and the wives of Ballamas, and other groups to promote improved practices of sanitation and hygiene.
- Separate the male and female latrines and showers in informal and formal camp settings. For smaller camps, where men and women segregate themselves to opposite sides of the camp during daylight hours, ensure the latrines and showers are also on opposite sides of the camp and that a maximum distance of 50 metres is maintained between the shelters and the latrines and showers. Demarcate latrines and showers pictorially for each gender to avoid confusion for users. Install lock on the inside of the latrines and shower units to allow users privacy and security during use.
- Work with the CCCM partners in the same location to ensure that lighting/solar panels are installed around the latrines to ensure women and girls' safety. In camp settings, in the absence of lighting, provide flash torches to allow users to access latrines at night.
- Distribute soap for hand-washing and ensure the dissemination of messages on the need and techniques for proper hand-washing.
- Promote the participation of women and men on WASH Committees (WASHCOMS) and Hygiene and Sanitation Committees. Sanitation Committees that have responsibility for latrine maintenance should be comprised of women and men based on the ratio of male and female users, with responsibilities for cleaning assigned and designated by gender.
- The ratio of female and male hygiene promoters should be equivalent to the IDP population targeted for hygiene promotion.
- Menstrual hygiene management (MHM) issues should be determined in consultation with the female populations and must address their preferences and appropriateness of materials, disposal practices, protection risks for the method of distribution of MHM materials and practices for washing and drying of reusable materials. Consultations on MHM can also inform hygiene promotion messages for safe and dignified management of menstruation.