



Gender Considerations in Disaster Assessment (January 2005)

Key Questions:

- How are women, men, girls and boys differently affected by the disaster?
- What are the implications for the relief, rehabilitation and reconstruction effort (in terms of needs, access to assistance and contribution to community efforts)?
- Are there particular vulnerabilities/difficulties that result from the disaster for women, for children, for men?
- How do gender norms of the community affect aid seeking behavior and/or access to aid?
- Are women predisposed to have less access to aid/ information due to cultural norms affecting mobility in public, illiteracy?
- Are local women and their associations being actively included in planning and implementation?
- Are there women and men involved in decision-making and employed as aid workers at all levels?

Specific needs of women in tsunami aftermath

- Sanitary supplies (tampons/ sanitary napkins/cloth) and privacy to ensure that these can be used correctly. The need for other supplies related to women's reproductive health (including contraceptives) must be assessed.
- There are reports that women have lost their clothing in the tsunami and are unable to go out in public because of this. This affects their access to assistance and information, increases their reliance on others and the potential for abuse. Additionally, this prevents these women from actively participating in clean-up, recovery and rebuilding efforts. Therefore, there is a need for culturally appropriate clothing for women and girls (including underwear and, where appropriate, head covering).

Women as carers

- Women are often primary carers for children, the elderly (and sick/injured family members). For women who now head households, do their child and other care responsibilities prevent them from accessing aid? Do their attempts to access aid place their children at increased risk (if they are left unattended or taken to a crowded distribution site)? Is the ability of women to care for their children affected by the effects of the earthquake/tsunami on their physical and mental health? How does burden of care affect women's physical and mental health?
- If women are the ones who take care of the sick in the household, they must be provided with information about health resources, recognizing infectious diseases and other medical conditions which require immediate attention, and how to respond to diarrhea with ORT.

Access to Aid

- Does the location of water-points, latrines put women at risk? Does distance/procedure place an increased burden on them if they are primarily responsible for fetching water?
- Are services addressing the needs of and reaching women? What about pregnant and nursing women?
- Does targeting of aid distribution have the potential to exclude certain groups or increase opportunities for exploitation?

Vulnerability to exploitation/abuse

- During displacement, including in shelters and sites for the internally displaced, the issues of exploitation and abuse of women and girls including domestic violence must be recognized. Children may be at risk of trafficking and girls also of early/forced marriage.

Principles of good practice:

- ✓ Involve women in **all** stages of decision-making. Make sure that information about the needs of the family/community is obtained from men *and* women.
- ✓ Collect data disaggregated by sex and use this data for program planning and for documentation of short- and long-term effects.
- ✓ Identify and provide for sex-specific needs.
- ✓ Consider and assess the impact of all response activities on women and men.
- ✓ Pay special attention to those who may experience some social exclusion (widows, female heads of household, disabled women).
- ✓ Ensure that distribution of assistance allows women access to supplies without placing them at increased risk for injury or abuse by including women as distributors.