

Women's Major Group Intervention

Contributions to the Technical Workshop 1: Indicators, monitoring and review process for the post-2015 framework

November 17—18, 2014

The WMG welcomes the opportunity to elaborate some of the gender dimensions of indicators, monitoring and review for the post-2015 DRR and development agendas. While there is a high level of support for adopting gender inclusive practices and processes, understanding of the practical application of gender analysis is often lacking. The WMG is enthusiastic to support further understanding and development of gendered indicators

1. Reduce disaster mortality

Disasters do not impact all equally. In order to act effectively we need to know who is at risk, how and where. On the basis of limited quantitative data (see Neumayer and Pluemper 2007) we know that women are, in general, more likely to die in disasters and at an earlier age. However, gender disaggregated data is still not routinely collected or disseminated and thus, many times, States do not know how disasters differentially affect their citizens. To know how best to plan and respond to disasters, and reduce risk requires disaggregated data across socioeconomic and cultural groupings.

Data collection and reporting should - as standard - disaggregate by gender. And also, in line with SDG proposals, not just by gender but also by age, race, ethnicity, income, migratory status, dis/ability, geographic location and other characteristics relevant in national contexts. There is already growing support for the collection of gender and age disaggregated data but we would like to reinforce and extend earlier interventions on this.

TARGET

The WMG would like to see a reduction of disaster mortality of men and women by (a given percentage in function of number of hazardous events), disaggregated by age, race, ethnicity, income,

migratory status, dis/ability, geographic location and other characteristics relevant in national contexts.

Sub-target: Establish at the national and subnational levels baseline database systems for the recording and monitoring of disaster mortality across all social groups. This will require improvement in systematic and coordinated collection, analysis, dissemination and use of gender statistics and data disaggregated by age, race, ethnicity, income, migratory status, dis/ability, geographic location and other characteristics relevant in national contexts.

It will also require strengthening institutional arrangements for monitoring the implementation of the HFA2, ensuring transparency in this regard by making available relevant information and supporting women's full and effective participation and leadership in monitoring, supporting this with adequate resourcing.

INDICATORS

National and sub-national baseline database systems for the capture and monitoring of disaggregated disaster mortality data should be established by 20[xx]. This should, from the outset, and at a minimum, record gender and age disaggregated data but aim to disaggregate by gender, age, race, ethnicity, income, migratory status, dis/ability, geographic location and other characteristics relevant in national contexts.

2. Reduce the number of affected people

Women are affected by hazards and disasters in specific and context-dependent ways based on traditional gender norms and relations. For example, women's health may be impacted by an event not only in terms of physical injury but also their reproductive health may be affected.

Moreover, the physical affect on women may not be felt directly from the event, but may come after the event through a rise in violence against women and girls (VAWG), in both private and public spaces, at the hands of known and unknown persons. The actual affect on women needs to be evaluated and monitored if adequate services

are to be provided and must then be recognised specifically in policies and in the language used throughout the document.

GOAL

Reduce the number of affected men and, especially, affected women (by a given percentage in function of number of hazardous events], disaggregated by age, race, ethnicity, income, migratory status, dis/ability, geographic location and other characteristics relevant in national contexts by 20[xx]

TARGET

We would expect, as a target, that by 20[xx], women are **not over-represented** in numbers of those affected by disasters

By 20[xx] national and sub-national baseline database systems will allow identification of changes in well being - including sexual and reproductive health and violence - of women, in all their diversity (age, race, ethnicity, income, migratory status, dis/ability, geographic location and other characteristics relevant in national contexts).

INDICATOR

Reduction in rates of VAWG from a baseline established at the earliest stage possible.

Reduction in unsatisfied demand for sexual and reproductive health services, including Family Planning

3. Reduce disaster economic loss

Disaster economic losses rarely identify women's economic losses specifically. In order to do so, recognition and measurement of both direct and indirect economic losses are necessary as women are systematically excluded from the formal economic sphere and / or their productive activities are an extension of domestic tasks and not recorded as income generating and thus remain unrecorded and uncompensated.

TARGETS

Reduce disaster economic losses of men and of women (by a given

percentage in function of number of hazardous events), disaggregated by gender, age, race, ethnicity, income, migratory status, dis/ability, geographic location and other characteristics relevant in national contexts.

INDICATORS

By 20[xx], analysis and reporting on economic loss will record losses in the informal and home-based sectors

4. Reduce disaster damage to health and educational facilities

It is vital that health facilities adopt a more holistic definition and focus on health care systems and the full range of health needs, this must include sexual and reproductive health which is still often absent from general health statements and resources. Similarly, health systems must have surge capacity to respond to VAWG during and after an event.

Women also have a dominant role, globally, in caring for the health of others. This makes it imperative that they have, not just a presence, but a leadership role in health facility design and decision making.

In terms of education infrastructure, girls' school and college attendance must be protected and ensured during and after disasters and this, again, means more than building back better schools, but also ensuring girls can access and benefit from those schools with full consideration of location, transport and sanitation facilities.

The decision on whether to keep girls in schools is affected, more than it is with boys, by economic context and post-event lack of income. This may mean a higher number of girls will be forced to leave school; they may also be needed to take on the roles of adult women who have died, been injured, or who are more involved in reconstruction and income generation.

TARGETS

By 20[xx], statistics on the minimum set of gender indicators and the core set of violence against women indicators adopted by the Statistical Commission in 2013 will be collected regularly and

disseminated in order to assist in women's health needs analysis as it affects health infrastructure decision making.

5. Increase number of countries with national and local strategies by [a given percentage] by 20[xx]

The discussion around this target states that it is important that countries do have national and local disaster risk reduction strategies as well as integrated multi-hazard risk assessment and assessment of their capabilities to manage the identified risks.

The new framework proposes re-emphasizing the role governments need to play in ensuring social change for the wellbeing of its citizens; as well as the role of government in facilitating a shift to new development pathways that embed DRR & resilience building.

In this context, it is imperative that the strategies are inclusive and target differential needs and concerns of groups across socioeconomic and cultural groupings in order to know how best to plan and respond to disasters, and reduce risk requires. Thus we suggest adding the 'inclusive' to disaster risk reduction strategies in this target.

Governments' policy commitments to inclusiveness can be translated to practice by using strategic linkages between political aspirations and the budget preparation. Resourcing, financing and budgeting are essential for policy planning and practice, including practice of women's empowerment programs. The use of appropriate gender-based tools to analyse gender in the national and sectorial budget with the use of disaggregated data can deliver results on overall risk reduction.

Two specific measures we suggest are the mandatory use of gender responsive budgeting - budgeting that contributes to the advancement of gender equality and the fulfillment of women's rights - for assessments of all kinds (including but not limited to: risk, vulnerability, hazard, needs, damage and loss assessments), planning, implementation, and Monitoring and Evaluation (M&E) of development and DRR/DRM programmes.

Secondly, it is important to ensure participatory mechanisms for the

monitoring processes. Women's groups are well placed to take the lead in providing independent monitoring of the implementation of plans and response, as witnessed in post-conflict situations (eg Senegal). However, once again this demands adequate resourcing for them to be able to fulfill this role.

TARGETS

By 20xx xxx, at the national and subnational levels, strategies will be designed by participatory means with full and active engagement of, and leadership by, women and women's groups

INDICATOR

National planning commissions/departments, finance ministries and treasuries, and local governments to adopt gender responsive budgeting, and invest in resource allocation and gendered M&E.

6. International cooperation and global partnerships

Governments, as the body that has the power to make and enforce laws for the respective States, have the power to endorse, accept and implement international treaties, policies, and frameworks and is the sole power in making laws and legislative Acts at national level. It also is the government that has the capacity and power to mobilise all public resources towards social change and wellbeing of its citizens, taking into account their differential needs.

Progress on the framework at international level too, will be mainly captured through international and national statistics derived from formally accepted national/international databases which currently are not geared to provide satisfactory reporting on gender accountability. Priority attention should be given to make sure these databases are adequately gender sensitive and generate global gender reflective baseline data to assess progress. Local and community based institutions including women's institutions with adequate capacity can play a critical role in this.

The actions proposed in the post-2015 DRR framework should be complementary with other relevant international conventions including, but not limited to: SDG, CC framework, CEDAW, the

International Convention on Human Rights, the ILO gender equality conventions, etc.

7. Risk information and early warning

In recent decades there have been a number of advances in the effective sharing of risk information and design of early warning systems. There are some historic examples of inequality of access leading to a significantly higher proportion of women dying in extreme events which were important in stimulating changes, for example in Bangladesh, in more gender responsive design and management (eg women-to-women warning delivery, women's inclusion on cyclone shelter management committees, separate latrines). Women and men have different vulnerabilities, different capacities and different notions of risk. Research suggests when early warning is in the hands of women and the community recognizes them as responders, they are more likely to respond and save lives. However, early warning and response cannot just be added onto women's existing role, making them even more time poor, but needs to be valued and supported, including via resources.

TARGET

To increase the number of men and women, made vulnerable by norms and inequalities of gender, age, race, ethnicity, income, migratory status, disability, geographic location and other characteristics relevant in national contexts, with full access to early warning and risk information and the means to make effective of them, by [a given percentage] by 20[xx].