

AN OVERVIEW OF

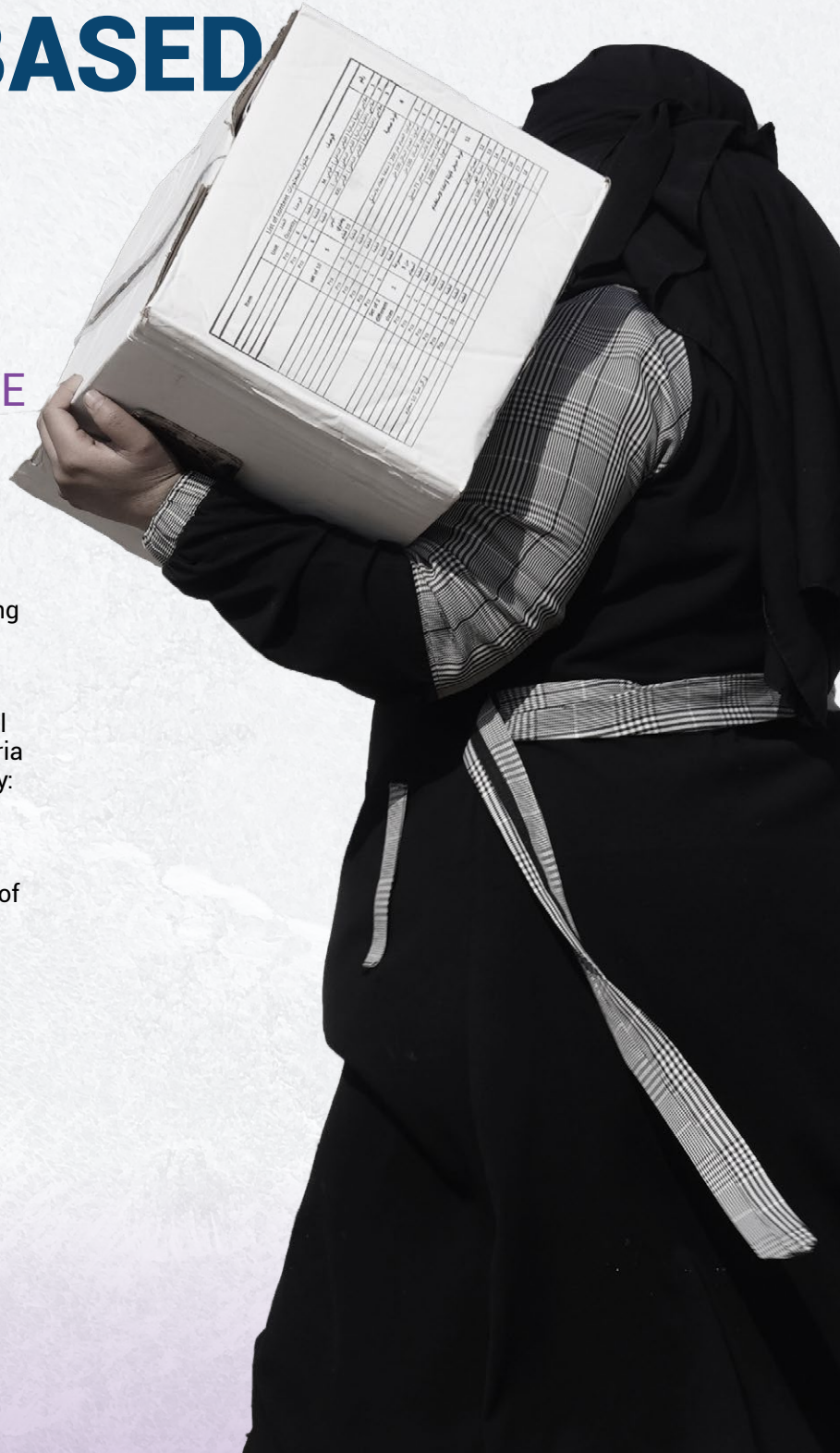
GENDER-BASED VIOLENCE RISKS

IN THE 2023 SYRIA
EARTHQUAKE RESPONSE

ADVOCACY BRIEF / March 2023

This document provides an overview of the initial GBV risk mitigation issues that are being identified through assessments, monitoring, and direct observation of the earthquake response. It also serves as a basis for some of the IASC system-wide scale up operational benchmarks agreed upon by the Whole of Syria (WoS) Strategic Steering Group (SSG), namely:

- 1) that all assessments are gender-sensitive and include sex and age disaggregated data, and assessments teams include a minimum of 30 percent female staff;
- 2) that the centrality of protection, including GBV and PSEA risk reduction actions, is tracked across all operational sectors (reflecting GBV services and PSEA mechanisms); and
- 3) that PSEA and GBV services (helplines/hotlines, safe spaces, referral pathway, complaint mechanisms, etc.) are available to people in need. Finally, this document will highlight recommendations for relevant sectors on GBV risk mitigation actions.



“My family and I spent two days outdoors before finding a tent in one of the sites they set up to accommodate people displaced by the earthquake. — A WOMAN FROM AS-SWEIDA



BACKGROUND

IN THE AFTERMATH

In the aftermath of the devastating earthquake that struck Syria on February 6, 2023, thousands of people have moved to collective shelters to seek temporary refuge. To date, according to local and government sources, about 6,000 people have been killed and more than 12,000 injured across Syria. According to a REACH rapid assessment, some 55,000 households are estimated to be displaced, either within or between assessed communities in north-west Syria, based on a sample of some 600 communities out of a total 1,044.

Moreover, 50,000 families are estimated to be displaced in Aleppo, Hama, Homs, and Lattakia, both in collective shelters and with host families, with Aleppo and Lattakia being the worst affected. Many are staying with host communities or going back to their inhabitable homes, making it very difficult to estimate the total number of the displaced and of those currently hosted in collective shelters. Estimates by OCHA and UNDAC place over 36,200 people in Aleppo hosted in such shelters, including some 6,400 men (18 percent), 11,200 women (29 percent), 11,200 boys (31 percent) and 7,900 girls (22 percent).

Based on the available data and initial assessments and observations, most crisis-affected people in collective shelters are women and children. These shelters lack basic facilities, including gender-segregated latrines and women and men are often sheltered in the same room, without partitions. These living conditions significantly increase the risk of gender-based violence (GBV) incidents. The protection needs assessment conducted also highlights how women and girls, in addition to older people and people with disabilities, are particularly in need of specialised services and face unique protection risks.

“After the earthquake, every sound terrifies me. I will never forget that day – ever.

– A WOMAN FROM NORTH-WEST SYRIA

CONCERNING FINDINGS & INCREASED RISKS

	FINDINGS	INCREASED GBV RISKS
SHELTER / WASH FACILITIES	<ul style="list-style-type: none"> • Overcrowding is a common issue in collective shelters (as reported by 69 percent of those interviewed during the protection risk assessment). Findings show that in many shelters, several families are staying in the same space without the necessary arrangements to guarantee sufficient levels of privacy and safety. • Challenges include inadequate shelter arrangements for older people and people with disabilities, lack of services for people with specific needs, overcrowding, lack of gender segregation, and the absence of lighting in shelters and bathrooms. • Partitions, locks and gender-segregated WASH facilities are also missing. • In both collective shelters and WASH facilities, women and girls currently do not have access to private spaces. • IDPs living in temporary shelters have had their movements restricted by shelter management. The affected population reportedly accepted these measures. Protection partners have confirmed the lack of freedom of movement in several community centres, especially in the coastal areas. The main reason provided for this measure is to prevent non-affected people from taking refuge in the centres and benefit from humanitarian assistance. 	<ul style="list-style-type: none"> • Lack of gender segregation in collective shelters is particularly risky for single, widowed, and divorced women and adolescent girls who are increasingly exposed to harassment and sexual violence. • Lack of lighting in collective shelters also increases the exposure to GBV, especially sexual violence. • Child marriage is likely to increase in overcrowded shelters, where privacy is lacking. The assessments conducted in the framework of the 2023 HNO highlighted that child marriage has been used as a measure to formalise an imposed overcrowded living arrangement. • Lack of privacy for women and girls can be particularly challenging, especially for pregnant and breastfeeding women and girls or during the menstrual period, and may result in disruption of menstrual hygiene management and maternal responsibilities. • In collective shelters where GBV takes place, limitation of the freedom of movement exacerbates the GBV risks faced by women and girls, who may be forced to settle for unsafe shelter in absence of other options. Movement restrictions can also increase the challenges in disclosing GBV incidents and accessing specialised services through referrals, especially when these are not directly provided in the shelter. • Lack of gender segregated, lockable, and properly lit toilets exposes women and girls to risks of GBV, including sexual violence and harassment. Security concerns also relate to the way to and from WASH facilities.
FOOD, NFIS, & HYGIENE ITEMS	<ul style="list-style-type: none"> • To meet their basic needs for food, most people in collective shelters rely on humanitarian aid. Food portions have been reported to be insufficient, especially for older women and children. • Distribution is often made by committees of volunteers that are not properly trained on SEA and mitigating GBV risks 	<ul style="list-style-type: none"> • Distributions, if not properly planned, including through direct engagement of women and girls to assess their preferred distribution modality, may expose women and girls to sexual violence, harassment and sexual exploitation and abuse (SEA). • Employing not trained volunteers in distributions increases the risk of violence and SEA against women and girls. • Food insecurity during emergency is also likely to increase negative coping strategies, like child marriage or exchanging sex for food.
OTHERS	<ul style="list-style-type: none"> • In several collective shelters, there is no access to information about available services, including where to access GBV specialised services. • Part of the affected population does not know where to file a complaint while others do not trust the available complaint mechanisms. 	<ul style="list-style-type: none"> • Lack of access to information on GBV services reduces the opportunity for GBV survivors and women and girls at risk to access life-saving GBV support. • Access to complaint mechanisms should be clear and safe to everyone to ensure immediate support and prevent further abuse.

RECOMMENDATIONS

All humanitarian sectors involved in the earthquake response should abide by the Do No Harm principle and:

1. **Incorporate gender disaggregation and GBV risk related questions into the sector and inter-sectoral assessments**, with support of GBV specialists.
2. **Identify risks of GBV before establishing WASH/ Shelter facilities** and prior to any type of distribution, by using the WoS GBV AOR endorsed tools.
3. **Ensure humanitarian actors are able to provide psychosocial first aid (PFA)** in case they receive disclosure of GBV by a survivor and are able to safely refer the person to GBV specialised services.
4. **Use the GBV community messages developed by the WoS GBV AOR** to provide life-saving information on risk mitigation and access to services.
5. **Integrate GBV risk mitigation measures into all humanitarian programming** as explained in the [IASC Guidelines](#) for integrating GBV interventions into humanitarian action.

SHELTER/NFIs

1. **Integrate measures to reduce GBV risks into hub-level technical guidance** for shelter and NFI interventions.
2. **Keep shelter/NFI staff at hub level updated on the latest GBV referral pathways** and train them on how to refer GBV survivors safely.
3. **Conduct GBV risk analysis and provide guidelines for assistance** in unmanaged and overcrowded collective shelters and informal IDP sites, including clear information for partners on referral pathways.
4. **Promote the meaningful participation of women in the shelter management committees** (where they exist) and in interventions for repairing damaged shelters.
5. **Train shelter management actors on humanitarian principles, PSEA, and GBV mitigation** and develop policies and/or code of conduct for them to follow.
6. **Advocate for and work with partners to increase the representation of female staff** in shelter and NFI programming.
7. **Coordinate with WASH sectors to ensure lighting and other measures to reduce GBV risks** are in place in collective shelters and related WASH facilities.

WASH

1. **Address the lack of door locks, lights, gender segregation, long distance and lack of privacy in WASH facilities**, whether located in collective shelters, camps, or any other setting.
2. **Coordinate with S/NFI sectors** to ensure lighting and other GBV risk mitigation measures exist in collective shelters and related WASH facilities.

DISTRIBUTIONS (FOOD, NFIs, & HYGIENE ITEMS)

1. **Train all staff and volunteers** engaged in distributions on GBV and SEA risk mitigation and protection mainstreaming.
2. **Ensure female staff and volunteers are part of the distribution teams.**
3. **Ensure distributions are designed with GBV risk mitigation measures to enhance safety.**

DISCLAIMER

Information reported in this document is derived from assessments, observations, and consultations that took place as of 6 February 2023 as part of the earthquake humanitarian response. The data obtained from areas under the control of the Government of Syria comes in the form of formal assessment reports, information related to NWS comes from direct site observation and consultations with GBV experts. Data gathering exercises have used different methodologies and questions and, therefore, data are not comparable. It is important to note, however, that GBV risks identified in other sector interventions are consistent across hubs and allow for an initial analysis.

“ The night of the earthquake changed my life forever, leaving me and my children homeless and alone. For days, my children and I could not sleep, and after every aftershock; we were terrified.

— A WOMAN FROM NORTH-WEST SYRIA



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