



Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action

HEALTH

Essential Actions for <i>Reducing Risk, Promoting Resilience and Aiding Recovery</i> throughout the Programme Cycle	Stage of Emergency Applicable to Each Action			
	Pre-Emergency/ Preparedness	Emergency	Stabilized Stage	Recovery to Development
ASSESSMENT, ANALYSIS AND PLANNING				
Promote the active participation of women, girls and other at-risk groups in all health assessment processes	✓	✓	✓	✓
Investigate cultural and community perceptions, norms and practices related to GBV and GBV-related health services (e.g. stigma that may prevent survivors from accessing health care; community awareness about the physical and mental health consequences of GBV and benefits of seeking care; existing community supports for survivors; providers' attitudes towards survivors; etc.)	✓	✓	✓	✓
Assess the safety and accessibility of existing GBV-related health services (e.g. safety travelling to/from facilities; cost; language, cultural and/or physical barriers to services, especially for minority groups and persons with disabilities; existence of mobile clinics; etc.)	✓	✓	✓	✓
Assess the quality of existing GBV-related health services (e.g. range of health services provided; privacy and confidentiality; representation of females in clinical and administrator positions; policies and protocols for clinical care of survivors; safe and ethical case documentation and information-sharing processes; availability of appropriate drugs and equipment; etc.)	✓	✓	✓	✓
Assess awareness of specialized (clinical) staff in the provision of targeted care for survivors (including how to provide clinical care for adult and child survivors of sexual assault; how to safely and confidentially document cases of GBV; knowledge and use of multi-sectoral referral pathways; how to provide care for intimate partner violence and other forms of domestic violence; how to provide court testimony when appropriate; etc.)	✓	✓	✓	✓
Assess awareness of all health personnel on basic issues related to gender, GBV, women's/human rights, social exclusion and sexuality	✓	✓	✓	✓
Investigate national and local laws related to GBV that might affect the provision of GBV-related health services (e.g. legal definitions of rape and other forms of GBV; legal age of consent; legal status of abortion and emergency contraception; etc.)	✓	✓		
With the leadership/involvement of the Ministry of Health, assess whether existing national policies and protocols related to the clinical care and referral of GBV are in line with international standards (e.g. post-exposure prophylaxis (PEP); emergency contraception; abortion/post-abortion care in settings where these services are legal; etc.)	✓	✓		
Review existing/proposed health-related community outreach material to ensure it includes basic information about GBV (including prevention; where to report risk; health effects of GBV; benefits of health treatment; and how to access care)	✓	✓	✓	✓
RESOURCE MOBILIZATION				
Develop proposals for GBV-related health programming that reflect awareness of GBV risks for the affected population and strategies for health sector prevention and response	✓	✓	✓	✓
Pre-position trained staff and appropriate supplies to implement clinical care for GBV survivors in a variety of health delivery systems (e.g. medical drugs, equipment, administrative supplies, mental health and psychosocial support, referrals, etc.)	✓	✓		
Prepare and provide trainings for government, health facility administrators and staff, and community health workers (including traditional birth attendants and traditional healers) on sexual assault-related protocols	✓	✓	✓	✓
IMPLEMENTATION				
▶ Programming				
Involve women, adolescent girls and other at-risk groups in the design and delivery of health programming (with due caution where this poses a potential security risk or increases the risk of GBV)	✓	✓	✓	✓
Increase the accessibility of health and reproductive health facilities that integrate GBV-related services (e.g. provide safe and confidential escorts to facilities; make opening times convenient; ensure universal access for persons with disabilities; eliminate service fees; etc.)	✓	✓	✓	✓
Implement strategies that maximize the quality of survivor care at health facilities (e.g. implement standardized guidelines for the clinical care of sexual assault; establish private consultation rooms; maintain adequate supplies and medical drugs; provide follow-up services; etc.)		✓	✓	✓
Enhance the capacity of health providers to deliver quality care to survivors through training, support and supervision (and, where feasible, include a GBV caseworker on staff at health facilities)		✓	✓	✓
Implement all health programmes within the framework of sustainability beyond the initial crisis stage (e.g. design plans for rebuilding health centres; provide more frequent and intensive training of health workers; develop longer-term supply management strategies; etc.)			✓	✓
▶ Policies				
Develop and/or standardize protocols and policies for GBV-related health programming that ensure confidential, compassionate and quality care of survivors and referral pathways for multi-sectoral support	✓	✓	✓	✓
Advocate for the reform of national and local laws and policies that hinder survivors or those at risk of GBV from accessing quality health care and other services, and allocate funding for sustainability	✓		✓	✓
▶ Communications and Information Sharing				
Ensure that health programmes sharing information about reports of GBV within the health sector or with partners in the larger humanitarian community abide by safety and ethical standards (e.g. shared information does not reveal the identity of or pose a security risk to individual survivors, their family members or the broader community)	✓	✓	✓	✓
Incorporate GBV messages into health-related community outreach and awareness-raising activities (including prevention; where to report risk; health effects of different forms of GBV; benefits of health treatment; and how to access care, using multiple formats to ensure accessibility)		✓	✓	✓
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 a health focal point to regularly participate in GBV coordination meetings	✓	✓	✓	✓
MONITORING AND EVALUATION				
Identify, collect and analyse a core set of indicators—disaggregated by sex, age, disability and other relevant vulnerability factors—to monitor GBV risk-reduction activities throughout the programme cycle	✓	✓	✓	✓
Evaluate GBV risk-reduction activities by measuring programme outcomes (including potential adverse effects) and using the data to inform decision-making and ensure accountability		✓	✓	✓

NOTE: The essential actions above are organized in chronological order according to an ideal model for programming. The actions that are in bold are the **suggested minimum commitments** for health actors in the early stages of an emergency. These minimum commitments will not necessarily be undertaken according to an ideal model for programming; for this reason, they do not always fall first under each subcategory of the summary table. When it is not possible to implement all actions—particularly in the early stages of an emergency—the minimum commitments should be prioritized and the other actions implemented at a later date.