Tsunami, Gender, and Recovery

- Gender Issues in Tsunami Recovery Planning
- Recovery of Women: Issues and Plans
- Lessons from Earthquake Affected Women: Inputs to Tsunami Recovery Planning
- How Do We Support Women's Capacities?
- Gender in Sphere Standards

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## Gender Issues in Tsunami Recovery Planning

*Tsunami recovery planning process neglects important gender considerations.*

The main actors of tsunami recovery, the key government agencies, such as Task Force for Rebuilding the Nation (TAFREN), the international agencies including International NGOs, and many UN agencies do not have the capacity and skills to consult and engage women adequately, or incorporate gender issues into the rebuilding process. While the importance of gender considerations is endorsed by the respective organisations at the highest levels, in the policy documentation, there is limited evidence of application at the planning or implementation levels. Recovery projects, such as livelihood recovery and capacity building of institutions and affected people, suffer from the lack of inclusion of gender based issues. Both at the central and field levels, recovery projects are often planned without sufficient gender disaggregated information. It is observed that the institutions and teams responsible for capacity building and planning, are often not equipped with persons with the required skills. The implementation teams, which often consist mainly of technical staff, do not have the necessary awareness of gender issues. For example the main expertise of the teams in charge of housing and infrastructure recovery is limited to technical and structural aspects, while expertise on the related socio-economic aspects are often lacking. All agencies engaged in recovery are pressurised with tight deadlines, and as a consequence gender issues are dropped relatively easily, along with other social issues. This has implications mainly for women as their needs and aspirations are not met. This leads to their further marginalisation, gender stereotyping and gender based gaps in opportunities for skill development, in planning and decision making and in entry into alternative fields.

### Issues to be addressed

In this context there are a number of issues which need immediate attention. Firstly, agreeing on a minimum set of gender based issues which are non-negotiable in each major recovery programme; secondly re-emphasising the gender gap observed in the recovery at the policy decision making and planning level and agreeing on required action for a change; and thirdly addressing the issue of gaps in the available skills and capacities for gender integration at the conceptual, planning, implementation and monitoring levels. This aspect must focus both on the medium and the long term. Lastly, there is a need for analysis and review of gender issues pre and post tsunami, given that the dynamics of the devastation and recovery process are likely to result in new gender dimensions both from practical and strategic view points.

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**Madhavi Malalgoda Ariyabandu**

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Unequal Impact of Tsunami on Women

While the different global media have reported extensively about the impact of the 26 December Tsunami on all kinds of issues such as like tourism, environment and even animals, the impact on women has been, unfortunately, too much neglected. The tsunami recognized no distinctions of race, ethnicity, religion, class, gender, or age, but humankind often does. This is an effort to highlight the way women, the heart of most community networks, have suffered and still suffer today from one of the greatest natural disasters ever occurred in South Asia.1

Although no official and agreed death figures divided by sex have been released for the whole area that is affected by the tsunami, it is very clear that far more women than men have been killed. In Nagapattinam, the worst affected district of Tamil Nadu, South India, government statistics state that 2,406 women died, compared with 1,883 men. In Cuddalore, the second most affected district of India, the amount of casualties between men and women is even more unequal. Almost three times as many women were killed than men.

In Indonesia and Sri Lanka the situation is no different. From most towns and districts come reports that male survivors outnumber women by 3 or 4 times. For example in North Aceh district, Indonesia, more than 77 percent of the casualties were women.

Some of the causes of this terrible pattern are similar across the region; many women died because they stayed behind to look for their children and other relatives; men more often than women can swim; and men more often than women can climb trees. But differences too are important: women in Aceh, Indonesia, for example, traditionally have a high level of participation in the labour force, but the wave struck on a Sunday morning when they were at home and the men were out on errands away from the seafront. Women in India play a major role in fishing and were waiting on the shore for the fishermen to bring in the catch, which they would then process and sell in the local market. In Sri Lanka in Batticaloa District, the tsunami hit at the hour women on the east coast usually took their baths in the sea.

But not only in terms of casualties women have suffered most severely from the disaster. Women and men face great difficulties every day due to the fact that so few women have survived. Many men are experiencing serious “role uncertainty”, having been left to fend for themselves and taking on unfamiliar tasks as they look after their families. Many fear the possibility that they may lose their self-esteem as a consequence of not being able to support their families in the aftermath of the disaster. But in most cases, the most disadvantaged people, besides children, are women.

Women are more vulnerable in the aftermath of the tsunami, because, besides the fact that women are physically more vulnerable, gender inequality is present in most South Asian communities. Women have less access to resources, are victims of the gendered division of labour, and they are the primary caregivers to children, the elderly and the disabled. This means that they are less able to mobilise resources for rehabilitation, more likely to be over-represented in the unemployed following a disaster, and overburdened with domestic responsibilities leaving them with less freedom to pursue sources of income to alleviate their economic burdens.

1 From The tsunami’s impact on women, Oxfam Briefing Note, March 2005, with thanks.
It is also most often the women who go without food in order to feed their families during a disaster. In addition to these issues, women are often victims of domestic and sexual violence following a natural disaster. There have been unconfirmed reports of rape and sexual molestation in Sri Lanka and reports of human traffickers taking advantage of women and children’s vulnerability in Aceh, Indonesia. In any case, the fear is real and severe.

Experience of natural disasters in a wide range of contexts shows that events of this type can weaken the status of women and girls and their ability to negotiate both within and outside the family even more. The loss of assets, homes, and family members all contribute to increased gender inequality. There is already some evidence of this emerging in the case of the tsunami. The number of marriages of girls within their extended families in some of the affected villages in Cuddalore has increased severely. There are cases where girls whose marriages had already been arranged before the tsunami, and who have lost both their parents, are now being married off by members of the extended family or the community to other young men. These marriages seem to be contracted in desperation and without involving the girls’ consent. More research is needed in this area.

Widows and elderly women who have survived are also in a desperate position and need extra support. Many of the women who would previously have taken on roles caring for them have been killed. In Nagarcoil, in Kanyakumari district in Tamil Nadu, India for instance, many of the elderly women are now gathering and selling firewood long hours all week to support themselves. And even in the distribution of aid women are disadvantaged. In many coastal towns fishermen have received new boats and are able to make money again, but the women are often forgotten. How can women survive when they have no means at all to make a living? Furthermore, women have different needs than men. They need other basic facilities that are not always provided like special healthcare and designated washing areas for sanitary cloths used during menstruation. Cultural taboos exist against washing these cloths in public and women need to be comfortable while caring for their basic needs in the villages.

But even though women have suffered a great deal and still have to face enormous burdens every day, many women have stood up to give new energy, hope and leadership to their community. Let’s help them.

The Unbreakable Spirit of Women: Believe in Change Makers

This time it was fire to have burnt our efforts yet not our will. The following story is based on the experiences of Kala Peiris, Siyath Foundation, Sri Lanka. While trying to recover from the 2004 Tsunami, fire disaster struck again.

It was another normal day for watching the sun set at the Hikkaduwa beach. If you have been in a really good mood, though tired, you would have asked where the sun has rushed to hiding between the golden waves of the Indian Ocean.

You learn every day, never can you trust the foam of the waves or the breeze which touches your face leaving a salty taste on your lips. You never seem to come to terms with the fact that broken hearts can be mended with time. The ocean along the South coast broke our hearts in a very strange way on the 26th of December 2004. The buildings, the bundles of yarn and the door mats ready to be shipped overseas, washed away in an instant. So I ask myself; would you trust this sea again? Would the broken hearts really get mended with time?

On Thursday night, September 1, 2005, I left the office around 8.30 in the evening and must have fallen asleep around 11.30 as I was reading a book to disturb my mind from ever pending work. There rings a bell in my ear, my mobile under the pillow. I answer the phone and all I hear is screams, all in darkness. I realize it is Parinda and ask, “what’s up?” and she says, “no use, should not talk, everything is gone!” Are you going to ask whether I got frightened? I do not know but I felt waves going over me for a second: getting washed away in a wave, the image of a Tsunami. But within a split second I was telling myself, ” Let it be any thing, but not another single life.” I stood up like a shaft.

Still she would not answer me. I hear screams, people shouting. Then Parinda says “fire, fire, Siyath field office is on fire”. Again now, you feel like asking what I felt? “Fine” I said, “anything other than a life! Fire” I repeat aloud. There goes the light and
all excited … fire! …fire! …what fire?

So I ask what the damage is. No one knows. It is only flames high up into the sky in the dark night. So I realize that no body is hurt. The mats wrapped and ready to be shipped the next day are on fire, and the yarn collected to be sold is on fire. These things that got burned did not breathe. But they carry monetary value which breathes life into our poor partners. I tell myself that I have been through a more difficult situation. I remember the moment I saw Paraliya the field facilitation center of Siyath lying on the ground with the scattered bodies of our people who died on the train. We have been through a lot together.

Fifteen years discipline as a development worker came into action. I told Pamoda that it was okay; sure we are able to build up on ashes as long as nobody is hurt. I repeat, "We are "SIYATH": hundreds of hands together, collectively." Yet at the same time my heart cries, if I could have blown out the flames from here.

I find my self playing my executive role. I say that there are only five things which can be done.

1. As long as nobody is hurt, stop the flames. And get into the other building if possible.
2. Inform the police and the Electricity Board to disconnect the electricity.
3. If possible, without getting hurt, pull out what ever bundles of mats are left.
4. If you manage to save something, take it to a safer place as whatever is not spoiled will be damaged by the crowd. Make sure that you gather it in the morning.
5. Most importantly there is life, trust and hundreds of hopes in these flames. Not that we let this heat kill our energy, motivation and empowerment.

By dawn there should be a place for women to work. The women should know that their daily earnings are secured. There shall also be equipment (basic mat making, boards, hammers and nails). Our promises to the fair-trade buyers shall be kept (we are an internationally accredited fair-trade organization).

I ask Parnoda, while the flames still rise up in to the air, "are we there? Are our troops filled with development energy?" She says, "Tomorrow people will have all they need to work" (sure they did) Then I tell her as it is 2.40 in the morning it will be 4.40 when we reach there. Would I have been able to see the flame as high as then or only the heated red coal.

I call Iresha who is about 10 Km away from Dodanduwa but she was on the spot within 20 minutes.

The day is done. I look out of the window at 6.45 on Friday evening. Birds fly home and the gloomy sky is getting ready to rain. The mat order redistributed and women are back at work. Temporarily, equipment has been provided. Women are working in whatever space is available. The whole village comes forward to give life back. This is the power of social mobilization for which we are known. Our staff is ready to take the weight on their shoulders and to get the community to clear the way collective energy flows.

I look at my own self and ask: "what gave me this discipline within the eight months after tsunami." I was calm throughout. My usual restless way of jumping in to things is some what gone. What made me change this? Then I realize, that the shock of tsunami has taught me more about the uncertainty of life and the importance of getting detached which minimizes the heart ache. For the first time I realize that maturity tames my heart. I anticipate risks.

In strengthening the community during the disaster with which we were faced, we have found more strength within ourselves. From where did this tolerance and resilience come? The people who were really affected by tsunami found their own strength, level of tolerance and resilience, to face life. Yet they never defined the terms. The coping and resilience is power, more valuable than gold coins. Our own strength is the jewel.

Kala Peiris
Recovery of Women: Issues and Plans

Understanding the Key Social Issues of Women using Anganwadies

The purpose of this article is twofold. First, to develop a clearer understanding of the key social issues affecting the women of Jamnagar, Rajkot and Surendranagar districts in Gujarat, India, who use the Anganwadi (the courtyard centres which deliver Integrated Child Development Services-ICDS to children under six, pregnant women and lactating mothers). And second, to document the lessons that were learnt from the 2001 Gujarat earthquake reconstruction project with regards to the appropriateness of construction projects for the local community and their sensitivity to community views and women in particular. It is ironic that the most vulnerable and needy women and children made use of the worst anganwadies in marginal areas of towns in these districts. The social issues that affect women have been identified and the reconstruction process has provided an opportunity to rectify the problems faced by the women using the anganwadies.

1. Background
The Indian Government’s Integrated Child Development Services (ICDS) programme was established in 1975 to promote the holistic development of children under six years of age. This was to be done through improved access to basic services at the community level. The programme was designed to reach disadvantaged and low-income groups and achieve the following:

- Improve the nutritional status of children under six
- Lay the foundation for psychological, physical and social development of children
- Encourage school enrolment through pre-school stimulation
- Enhance mothers’ awareness of health and nutrition issues
- Co-ordinate immunisation projects in order to decrease child mortality rates

The focal point for these activities is the ‘Anganwadi’, the courtyard or kindergarten centre. Each anganwadi is provided with two members of staff, a worker and a helper. Every twenty anganwadi has a supervisor reporting to a Child Development Project Officer who in turn reports to the ICDS Programme Officer for that district. The location of government buildings depends on the village Panchayat (elected village committee) as they have the right to allocate the land. The government policy is to provide an anganwadi for every 1000 families. They are to have sixty registered beneficiaries under the age of six. Supplementary feeding is provided to pregnant and lactating mothers of children under three years of age at home, while children aged between three and six are catered for at the anganwadi.

2. Social Issues
Caste differences are prominent in rural areas, in particular Jamnagar district. This has several affects on the women who avail of the services provided by the anganwadies. As is common, lower caste communities tend to inhabit marginal land at the edge of their town or village. These areas are often a dumping ground for the rest of the village where household and animal waste is left in the open. This land may also be prone to flooding during the monsoon season. If a town merits more than one anganwadi, as is often the case, one may be found in these marginal areas of the town. The women of these lower castes areas have to bring their infants to an area entirely unsuitable for any form of education or nutritional programme. Food for infants is being prepared in the general area of refuse and

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1 This article draws heavily on the work of the British Red Cross and their commissioned work: Towards Understanding Key Social Issues: BRC Reconstruction Project, Gujarat, India, August 2001.
transported through areas containing waste to be delivered to pregnant women and lactating mothers. Such a situation is dangerous for all those involved and exposes the lower caste mothers and children to a higher risk of disease. In higher caste areas,anganwadis are often located next to schools, which provides a suitable area. However,anganwadis in lower caste areas are often in rented buildings that are in a bad state of repair. Again, providing an unsuitable environment for mother and child healthcare and education.

The majority of Anganwadi do not have water or sanitation facilities. The water is collected from the village well, water tank or village pond and stored in earthen pots. When the children attend the Anganwadi they go to the toilet either outside in the grounds or in the room itself. Both these scenarios are unsatisfactory. Despite this, the Anganwadi workers oppose the provision of water and toilet facilities for mothers and their children. They feel that they would have to maintain the toilets and this is traditionally the job of lower caste people. The affect is that children are not being trained in good hygiene habits at an early age.

The majority of the Anganwadi workers are women from the upper caste communities in the village. This is due, in part, to these women having attained a higher level of education than their lower caste peers. The anganwadi workers are tasked with identifying the eligible children and mothers for supplementary feeding programmes, it is not clear whether any rigorous method of selection is used to identify these beneficiaries. Sometimes beneficiaries are chosen simply to make up the 60 that are required and other times the most vulnerable mothers and children form the lower caste are left out. In effect, in most cases, lower caste children and mothers are discriminated against.

Some mothers will not send their children to the Anganwadi or will not allow them to eat food prepared by the worker.

Most Anganwadi workers are women. They are paid a maximum of 530 rupees per month, making them the lowest paid government employees for the job they are expected to perform. The main complaint is that the government minimum wage at the time of relief work is 40 rupees per day, making this a better option. The consequence of such is that supervisors find it increasingly hard to recruit good quality workers.

3. Lessons in Tsunami Reconstruction from the Gujarat Earthquake

The earthquake in January 2001 brought a huge death toll and destruction of large amounts of public infrastructure and housing. The districts of Jamnagar, Rajkot and Surendranagar were among the worst affected. They are also amongst the poorest and most disaster prone areas in Gujarat, having experienced drought in the previous four years and suffered from the super cyclone in 1998. The British Red Cross committed itself to the rehabilitation programme by undertaking the reconstruction of a number of government anganwadis in the areas mentioned above that were totally destroyed. The British Red Cross commissioned report, upon which this article is based, sought to ensure that the construction project was appropriate for the local communities, built on past experience and took into account the needs of women and vulnerable people. Several recommendations were made so as to address the social issues affecting women when reconstructing the anganwadis.

(a) Mapping Vulnerability

Where there is more than one anganwadi the Community Field Officer (CFO) should carry out a mapping exercise to find out where the most vulnerable communities are situated. Geographic Information Systems (GIS) would be very useful in this context. The provision of new anganwadis for vulnerable communities and the reconstruction of anganwadis on a suitable site are important. The latter issue needs to be discussed with the local panchayat. By providing land that is not marginal a cleaner more suitable environment will be created for mothers and children in poorer areas. Increasing the access of vulnerable and lower caste groups to anganwadis is a key issue but needs to be handled sensitively. This was an important lesson to come from the reconstruction process and decreases the chance of conflict in the community.

(b) Providing Community Infrastructure

The need to provide better sanitation facilities for the reconstructed anganwadi is important. Any such
alterations should be appropriate to the culture and the environment and rely on local technology. With regard to women, different kinds of water facilities need to be explored and women consulted before they are put in place. The issue of cleaning these facilities needs to be addressed. The provision of facilities that need minimal maintenance should be a priority and the mentality that the cleaning of these facilities is a lower caste activity addressed as much as possible. Providing children with proper sanitation facilities will lead to more hygienic practices at home, thus all the members of the household will face less health risks and the mother’s household activities will be made easier. Water and sanitation health education sessions should be included when these facilities are being installed.

(c) Selecting Suitable Workers
A greater effort to recruit suitable anganwadi workers and helpers from the lower castes needs to be made. The staff of each anganwadi should reflect the community in which it works. The field officer should make a presentation to the community about the Red Cross and its work. The community field officers and the community liaison officers should pay particular attention to the caste issue when surveys are carried out in villages that will have anganwadies reconstructed. Discrimination, especially against women children who need to avail of the anganwadi services can not be tolerated. This needs to be made clear by the relevant field officer to all workers and helpers. In addition, a procedure for identifying those mothers and children that needs the support of the anganwadi the most must be implemented.

The reconstruction of anganwadies in Gujarat was an opportunity to address key issues affecting women that avail of these services. Reducing discrimination, improving and reducing the disparity of service between different communities can be achieved in tsunami recovery also.

Addressing Gender Issues in Humanitarian Practice: Tsunami Recovery

Gender based prejudices and divisions mainly affect women. Existing socio-structural biases mean women are almost always more vulnerable in the aftermath of a disaster, in terms of security, safety. And women’s access to relief goods and recovery information is limited. Implications for men, also reflect the prevailing gender-based social norms and expectations as observed in the case of tsunami aftermath.

Gender-based violence
There is a greater risk of domestic and sexual violence for women during periods of humanitarian crisis. High levels of stress and trauma, and disintegration of social normality increases such attacks. Instances of rape and molestation of women and children rarely get reported without an established support network. As the most vulnerable members of a community in social turmoil, women, often widowed, are constantly concerned about their own safety, physical and economic, and that of their children, both within and outside the camps.

Access to relief
There are severe gaps observed in women's access to relief. Schemes whereby relief is distributed to the head of the household and other such support distribution bypass female needs. Womens confinement to the camps for displaced deprives them of the knowledge and capacity to access emergency assistance offered outside the camps. The gaps in legal literacy lead to issues of land and house ownership for women in times of crisis.

Intensified multiple roles
Women tend to take responsibility for dependants and the needy. In relief camps women and girls are often seen taking care of families, children and elderly. It is their job to secure firewood and ensure meals for all the family, and take on the nutritional
aspects and family welfare. They have to ensure the safety of children in what is frequently a unknown and volatile environment. These tasks not only put females under extra pressure, but lead to limitations in contribution to areas such as recovery planning and camp management, where their opinions and points of view valid and relevant.

**Camp planning**
The women's knowledge about the family nutritional, emotional and other basic needs is often not taken into account as women have less opportunities to contribute to the camp planning process. Child-birth and pregnancy-related health issues are neglected or not adequately attended to in camp situations. Arrangements for procuring and washing sanitary wear are often humiliating. It is difficult to access family planning advice and methods, making women more vulnerable to unwanted pregnancies, HIV and STDs in the camp environment.

**Recovery planning**
When collating data and information for recovery planning, there is a general failure to recognise the many diverse groups, each of which are composed of a series of different subgroups. There is no gender disaggregated data which could help relief organisations address the specific needs of women. For example, none of the initial post-tsunami national and sector based assessments conducted in Sri Lanka contained gender analysis.

There is a severe lack of avenues for women to express their concerns during the various stages of recovery planning. Discussions and meetings held by officials and other visitors are conducted with a predominantly male attendance. There is a low representation of women in emergency management and disaster mitigation efforts. Women are not consulted in camp management, relocation decisions and in the design of houses, even though their knowledge and experience within the community make their ideas need based and practical.

**Impact on men**
There are always a large number of widowers in the wake of a humanitarian disaster, as in the case of Asia tsunami. The difficulties men face in raising young families are compounded by traditional gender roles and social norms.

**Issues to be faced**
Within the humanitarian aid sector, there are globally available gender specific studies documenting useful experiences and the lessons learned and suggesting the best practices for dealing with future challenges. The literature outlines appropriate conceptual frameworks and provides course materials and information, but such reference works are not used to their full potential. There considerable gaps between the documented gender based socio-cultural aspects and the practical application of these ideas in disaster scenarios. There is a definite need for consolidation of existing information and expertise, in order to build a broad knowledge base and to suggest relevant, practical and appropriate approaches to different situations. The level of awareness, capability, and capacity varies widely from agency to agency, and interventions into situations requiring a gender-specific approach are extremely ad hoc. There is a pressing need for the development of practical and operational guides for humanitarian agencies. These guides must be supported by a concerted effort to raise awareness of gender issues and to incorporate the most important gender considerations into humanitarian practices.

**Suggestions for ALNAP members to consider**
- Make the institutionalisation of gender concerns in humanitarian practices part of the ALNAP agenda.
- Focus on enabling humanitarian planners and workers to work in a gender sensitive manner.
- Research and study gender concerns in varying cultural and social scenarios.
- Develop indicators to monitor and evaluate the gender sensitivity of humanitarian programmes.
- Conduct gender audits of relief operations.

Madhavi Malalgoda Ariyabandu
at The Haag ALNAP Biennial
Lessons from Earthquake Affected Women: Inputs to Tsunami Recovery Planning

In times of normalcy, women are usually charged with an overwhelming amount of responsibility including childcare, acquisition of food, shelter, water, and care of livestock. When a disaster does occur, women are often the last to receive relief from external recovery inputs. This increases the challenge of caring for their family manifold. However throughout the disaster recovery cycle women are the most active, creative, and determined in their efforts to come out of loss. The following lessons from the 2001 Gujarat earthquake confirm their spirit.

1. Post-earthquake, it was widely accepted that women have different needs and special recovery needs. Earthquakes homogenized communities as 'victims.' However, recovery broadens the gap between different groups. The differential impact on, and recovery of, females post-earthquake support this observation.

2. Women’s links beyond their usual ‘inside’ (traditional) world to the ‘outside’ (new) world were improved by their repeated exposure to diverse schemes, programs, and institutions during both relief and recovery.

3. Women’s rapid exposure to new ideas and responsibilities in the aftermath of the disaster often left them with little time to learn before having to make decisions. Most success stories of men and women working jointly traced their roots to women having taken the lead.

4. As the recovery moved from relief to reconstruction of shelter, more women had a say in the design and ownership of shelter building. Over time, more and more relief, compensation and rehabilitation resources in cash and kind, and entitlements went into the hands of women. However, this did not include ownership of assets and resources.

5. Women learned skills in: building earthquake safe houses, water harvesting, village planning, business recovery, use of computers and mobile phones, effective interactions with NGOs and government, and in many cases emergency response. Learning these skills, and roles during recovery from an emergency was not easy. The achievements are remarkable.

6. For women, the twin sectors of shelter and livelihood were more important than the domestic sectors of food, water and sanitation. Women’s own individual involvement in shelter and livelihood recovery was noted to be almost on a par with men, if not higher in most cases. Organizations who provided space and flexibility to women to build their home and livelihood at their own pace succeeded.

7. Men and women worked shoulder-to-shoulder during the recovery phase for digging foundations and building walls (but not roofs); following up with district level authorities for compensation; and, taking turns in running newly located kiosks. Both men and women expected the government to pursue and promote gender equality. As a consequence, many livelihood relief and rehabilitation initiatives became women-focused.

8. Disaster provides an opportunity for women to broaden their horizons and learn new things, the greater time and effort required to participate in recovery can be an added burden.

9. Women had to deal with the weight of multiple roles: in addition to the domestic and livelihood-related ‘burden’, women became central to the rebuilding and recovery process. Those with a support network—traditional or new—were able to manage these new roles; those without such support found this very difficult.

10. Women acknowledged their increased roles as well as assumed the responsibility of fulfilling the roles that previously men were expected to fulfill. They were also aware of the opportunities that the earthquake and resulting response brought in relation to better healthcare, education and property rights. Most, however, expressed frustration at their inability to capitalize on these opportunities due to, for example, societal pressure.

Mhir R. Bhatt
Preparedness, Risk Mitigation, and Women

Poor, Women and Local Governance: Good Practices from the Jeevika Project

The Livelihood Security Project for Earthquake Affected Rural Households in Gujarat, known as Jeevika, is a seven-year collaborative effort between the Self Employed Women’s Association (SEWA), the Government of India, the Government of Gujarat, World Food Programme (WFP), and the International Fund For Agricultural Development (IFAD). Jeevika’s primary objective is to develop sustainable livelihoods and reduce vulnerabilities against multiple disasters, specifically targeting women and the poorest of the poor, in the areas hardest hit by the January 2001 earthquake. It covers 400 villages and 40,000 women member of SEWA in Gujarat.

The following good practice examples on poor, women and local governance are derived from the Jeevika Project.

Targeting the Poorest of the Poor
The poorest of the poor have been singled out as a priority under Jeevika because, for them, the effects of natural disasters are disproportionately high and debilitating, and can lead to debt dependency, loss of meager resources, and ultimately migration. The Jeevika Project is a good example of targeting based on pre-existing poverty and livelihood analysis. In order for a village to be a member of the Jeevika Project, approximately two-third of its households must be Below the Poverty Line (BPL). The poor households are selected based on the household profile describing indicators and causes of poverty and alternatives for moving out of poverty and risk. The Jeevika promotes positive gender bias as an essential change in achieving gender equality in recovery.

Risk Management
The risk management component of the Jeevika project moves further from women’s equality to centrality and from recovery to risk mitigation. The risk management approach of the Jeevika Project integrates risk reduction in developmental activities. It makes mitigation central, directly in the villages, across local institutions and in livelihoods of the women through context specific and demand driven capacity building exercises. The capacity building activities for risk management goes beyond relief and builds culture of preparedness, mitigation, emergency response, and women’s livelihood security.

Capacity Building
The Jeevika Project defines capacity building as an ongoing, dynamic, and endless process of realization. The breadth of training activities covered under the Jeevika project is extensive. For example, midwife training, agriculture and animal husbandry, women health and child care training, functional literacy education, micro finance, insurance, disaster mitigation and so on. The best part of these capacity building activities under the Jeevika Project is that all of them are moored in the reality of the poor women. The lateral nature of all these capacity building activities also provide platform for practitioners to learn and share lessons from and with the poor women.

Convergence with Government
SEWA act as the main facilitating agency for implementing activities of the Jeevika. The overall responsibility of managing the project belongs to the Rural Development Department of the Government of Gujarat. The project strives to strengthen its convergence with the government to ensure the sustainability of the villagers’ livelihoods once the project ends. The Jeevika project is continuously adding value to existing government programs and avoids any possible duplication. The Project is helping government to improve its performance in providing basic services through strengthening local governance capacities.

Micro Planning
The participatory Micro Planning serves as an effective local governance tool for planning, implementing, budgeting and monitoring the Project activities. The Village Development Committees (VDC) consists of poor and women members and is formed by the villagers themselves. Based on the demands identified during the Micro Planning the VDC make decisions and execute activities. Allocation of resources for community demands with community representative group (VDC) leads to transparency, sustainability and effectiveness of the overall project.

Livelihoods Security
The Jeevika Project helps women develop alternative livelihoods and strengthen their existing livelihoods through improving their skill base. The project establishes forward linkages to the market and backward linkages to increase the availability of raw materials and improving quality of products. The Jeevika Project reconfirms some of the most important lessons for livelihood security of the women. Livelihood security can be achieved by the absence of non-productive drudgery such as inefficient collecting of water. It took the women up to four hours to get water but the building water storage facilities and rainwater-harvesting structures shortened this period. It not only improved the quality of the water but also increased number of productive hours of work. The project has also identified that increasing a woman’s “leisure time” improved her health.

Mehul Pandya
Emerging Good Practices

AID-India’s Tsunami Relief, Rehabilitation and Community Rebuilding Programs

1. Organization and coordination of the immediate relief
AID-India acknowledged that the key of efficient and effective relief support would be a well-organized coordination and planning system. Therefore they formed "Short-term Relief teams" who had to facilitate the mobilization and coordination of the many volunteers that were needed. Special ‘field offices’ were set up across the coast from where the volunteers went to the village they were assigned to. Each day they went to their villages, worked on debris clearing or relief distribution and came back in the evening for a night meeting to discuss the work progress and needs demanded by the villagers for the next day, because supply needs changed rapidly. After the meeting the coordinators from each field office called up the Chennai office with the new set of requirements. Furthermore, a large amount of storage space was arranged and volunteers helped with the ‘supply chain management’.

2. Focus on the weaker
Because the voices of the weakest and poorest are often submerged by the loud chattering of the more well-to-do, AID-India decided to consciously search and focus on the most vulnerable. AID-India especially focuses on women, children, disabled and dalits. For example, special Health Clinics are organized for women and the people living in dalit areas to make sure that women can speak freely about their problems.

AID-India provided relief and support to villages just outside the tsunami area, because they recognize that the economies of different locations are often very integrated and therefore hit as well. The towns more land inwards are often even more poor and vulnerable than the coastal villages.

3. Core business and flexibility
AID-India has decided to focus on the gaps other NGO’s and government bodies leave open, although it makes sure it does what it does best. This way AID-India makes sure that aid offered to the whole area is distributed fair and effective. They keep away from the ‘rush’ to wait and see if there are specific forms of relief are missing or people have been left out. Focus on women was direct.

Therefore they have set up a coordination system that is as flexible as possible and they have formulated their core business as detailed as possible. For example, AID-India refused to build permanent houses, because they found that other NGO’s could do this more efficiently.

4. Prevention and advice
In all stages of relief AID-India has focussed on giving as much advice and schooling as possible, preferably to prevent instead of to cure. They have supported the victims with many health, educational and legal issues.

Immediately after the disaster occurred medicines were offered, but also health and nutrition advice about Cholera, Diarrhea and water use. Furthermore, they have provided information to people in different coastal villages about the plans of the government to take advantage of the situation and demand the inhabitants to move land inward to be able to built hotels etc. for touristical purposes. This helped the women a lot.

5. Short, medium and long term relief and development

AID-India views the Tsunami as a starting point towards poverty reduction and development. They try to make sure that immediate relief is provided as good as possible but also focus on long-term development. This means that they choose projects and villages that are not supported by other organizations and stay there for at least 5 years. Women emphasised long term planning.

AID-India makes a distinction between the immediate relief and the medium/long term programs. Whenever an individual village has been provided with the basic needs the content of the programs is changed towards a more sustainable approach including education, women empowerment and the organization of sports activities.

6. Mental support
Besides giving practical support, AID-India finds it very important to provide psychological counselling and mental support. Many people were extremely traumatized by the disaster and counselling was needed badly. But AID-India also provides mental support to the people in the villages on a long-term scale and to volunteers and other people who provide support to the victims. This is not only done by talk sessions, but also by organizing communal sport and other entertainment events.

(Courtesy: AID-India)
Greater Role of Women in Recovery and Reconstruction Efforts: UNIFEM Efforts

The force of the 2004 Tsunami has generated incredible devastation, but it has also led to the emergence of strong survival systems and a mutual-aid network. And women have been at the forefront of many of these. So, as the international community organises to provide much needed assistance, it must prioritise the mobilisation and support of women’s networks that are crucial for emotional, social, and economic recovery.

UNIFEM, the United Nations Development Fund for Women focusing on women’s human rights and safety, emphasizes that women must be at the heart of the recovery process. According to Noeleen Heyzer, Executive Director of UNIFEM, women have been the lifeline of their communities, leading survival systems and mutual-aid networks, including among the internally displaced and refugee communities. She argues that women are not just victims, but are survivors, and they need to be part of the solution. “The reweaving of the social fabric of life is the foundation for reconstruction and a necessary part of the healing process. It is women, in their families and their communities, who are playing this role”, she says.

In their response to the tsunami UNIFEM has built on existing partnerships and network to promote and protect women’s rights and leadership in support of the overall UN effort for relief and reconstruction in the region. In order to mobilize women’s network to identify the needs and concerns of women survivors and to ensure that a gender perspective is incorporated in reconstruction processes, they have organized two major women’s meetings, one in Aceh, Indonesia, and the other in Colombo, Sri Lanka.

Hundreds of women gathered to discuss their concerns and articulate their role in the recovery and rebuilding phase, where women on the ground identified four critical issues; the urgent need to re-establish livelihood; the issue of land titles and ownership, including inheritance rights, particularly in the case of children who lost their entire family; the creation of adequate settlements and housing, and the lack of gender sensitivity in the planning and management of temporary barracks; and the need for more opportunities for women to interact with local and national authorities and participate in decision-making to engage with the reconstruction process.

UNIFEM and its partners have submitted the recommendations formulated at the meeting by the women active at the grassroots level, at the highest policy levels. At the same time, women’s groups are being supported to undertake advocacy activities, to ensure that their voices are heard at local and national decision-making levels, especially in critical policy decisions affecting livelihoods, land rights, shelter and recovery.

Based on the priorities and concerns identified by women, UNIFEM is concentrating its efforts in the tsunami-affected areas on leadership, livelihoods and protection. Activities include identifying the specific needs of women, and female-headed households in particular, and advocating for an adequate response to these within the reconstruction process; supporting women’s organizations in their efforts to engage in the reconstruction process, and building the capacity of partners to include a gender perspective in programme design and implementation by national authorities, the UN system, international NGOs and multilateral and bilateral organizations.
Capacity development programmes can refer to the capacity development of an organisation or to capacity development in civil society. This article will address both these forms of capacity development with regards to women. In recent years there has been a shift away from only responding with disaster relief to developing a culture of prevention. A framework for developing a proactive capacity for women in disaster risk management is an important part of this change in focus.

Developing the capacity of an organisation such as All India Disaster Mitigation Institute (AIDMI) is more than just the provision of financial and physical resources. It is the realisation that improved performance depends on the organisation’s ability to look at all aspects of itself, such as vision, mission and personnel strategies, in a coherent and comprehensive way. AIDMI has consistently focussed on the most vulnerable and at risk, and as such has often focussed on developing the capacity of women and women headed families. Thus, the organisation has been strengthened to perform specific activities such as focussing on women’s issues and building the capacity of women to cope with disasters.

Women’s capacity development in civil society is a process that involves fostering communication. The process of debate, education, relationship building, conflict resolution and improved ability of society to deal with its differences are central to this. AIDMI has focussed on educating the women and the young in the aftermath of the 2002 Gujarat riots. The hosting of meetings between women from different communities has also been successful in creating a more peaceful environment.

A process of helping vulnerable women and women headed families to become more stable results in increased capacity for coping with disasters. Developing jobs that are less prone to disaster risks is an important part of this. The concept of insuring against a disaster has been around for a long time in developed countries. An insurance policy provides cash payouts following a disaster, helping to fund the recovery programme. Recently this type of insurance has been applied in developing countries. Micro-finance schemes are helping the poor, and the women among them, to invest in productive activities that increase their livelihood. Women have made use of these facilities provided under the Livelihood Relief Fund at AIDMI. Robert Owenes

Gender Watchers: Fighters Inequality

GenderWatchers (GW) is one of the most important and influential global organizations fighting gender inequality. Playing an active role in the tsunami area, they encourage women’s full participation in the process of the reconstruction of their environment.

GW generates quality, empirical information and technical assistance on women’s educational research and programs. Their aim is to provide a comprehensive electronic resource geared toward the advancement of females and their participation in all aspects of life. By making a site with several resources and disseminating them, they contribute to the raise of individual consciousness regarding the status of women. Like early feminists, Genderwatchers advocates social awareness and education as the primary agents to eliminate social, educational, political and economic injustices imposed upon women and their children. They try to achieve this is through educational programs designed for continual public acknowledgment of this problem using the latest research, facts, and statistics.
Gender in Sphere Standards
Recognising vulnerabilities and capacities of disaster-affected populations

In order to maximise the coping strategies of those affected by disasters, it is important to acknowledge the differing vulnerabilities, needs and capacities of affected groups. Specific factors, such as gender, age, disability and HIV/AIDS status, affect vulnerability and shape people’s ability to cope and survive in a disaster context. In particular, women, children, older people and people living with HIV/AIDS (PLWH/A) may suffer specific disadvantages in coping with a disaster and may face physical, cultural and social barriers in accessing the services and support to which they are entitled. Frequently ethnic origin, religious or political affiliation, or displacement may put certain people at risk who otherwise would not be considered vulnerable.

Failure to recognise the differing needs of vulnerable groups and the barriers they face in gaining equal access to appropriate services and support can result in them being further marginalised, or even denied vital assistance. Providing information to disaster-affected populations about their right to assistance and the means of accessing this assistance is essential. The provision of such information to vulnerable groups is particularly important as they may be less able to cope and recover than others when faced with the erosion or loss of their assets, and may need more support. For these reasons, it is essential to recognise specific vulnerable groups, to understand how they are affected in different disaster contexts, and to formulate a response accordingly. Special care must be taken to protect and provide for all affected groups in a nondiscriminatory manner and according to their specific needs.

However, disaster-affected populations must not be seen as helpless victims, and this includes members of vulnerable groups. They possess, and acquire, skills and capacities and have structures to cope with and respond to a disaster situation that need to be recognised and supported. Individuals, families and communities can be remarkably resourceful and resilient in the face of disaster, and initial assessments should take account of the capacities and skills as much as of the needs and deficiencies of the affected population. Irrespective of whether a disaster is of sudden onset or develops gradually, individuals and communities will be actively coping and recovering from its effects, according to their own priorities.

The key vulnerable groups are women, children, older people, disabled people, PLWH/A and ethnic minorities. This is not an exhaustive list of vulnerable groups, but it includes those most frequently identified. Throughout the handbook, when the term ‘vulnerable groups’ is used, it refers to all these groups. There may be circumstances in which one particular group of vulnerable people is more at risk than another, but at any time of threat to one group, it is likely that others will also be at risk. In general, the handbook avoids specifying between different vulnerable groups. When any one group is at risk, users are strongly urged to think clearly of all the groups mentioned in this list.

Cross-cutting issues
In revising the handbook, care has been taken to address a number of important issues that have relevance to all sectors. These relate to 1) children, 2) older people, 3) disabled people. 4) gender, 5) protection, 6) HIV/AIDS and 7) the environment. They have been incorporated into the relevant sections of each chapter, rather than being dealt with in parallel. These particular issues were given on account of their relation to vulnerability, and because they were the ones most frequently raised in feedback from users of Sphere in the field. The handbook cannot address all cross-cutting issues comprehensively, but it recognises their importance.

Gender: The equal rights of women and men are explicit in the human rights documents that form the basis of the Humanitarian Charter. Women and men, and girls and boys, have the same entitlement to humanitarian assistance; to respect for their human dignity; to acknowledgement of their equal human capacities, including the capacity to make choices; to the same opportunities to act on those choices; and to the same level of power to shape the outcome of their actions.

Humanitarian responses are more effective when they are based on an understanding of the different needs, vulnerabilities, interests, capacities and coping strategies of men and women and the differing impacts of disaster upon them. The understanding of these differences, as well as of inequalities in women’s and men’s roles and workloads, access to and control of resources, decision-making power and opportunities for skills development, is achieved through gender analysis. Gender cuts across all the other cross-cutting issues. Humanitarian aims of proportionality and impartiality mean that attention must be paid to achieving fairness between women and men and ensuring equality of outcome.

Deepesh Sinha
Women, Work, and Recovery Process

Local materials and local markets jump start recovery process.

Group work around productive activity reduces psychosocial trauma.

Appropriate tools and technologies are preferred by women.

“Cash for Cleaning” increases purchasing power of women.

Changing roles is possible: supervising community infrastructure repairs.

Deciding money matters is empowering.

Do you wish to receive this publication regularly? Write to Vandana Patel at AIDMI (dmi@icenet.co.in). The publication will be sent to you by E-mail.

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AIDMI’s Emergency Food Security Network

EFSN is a stakeholder network of local, national and global agencies that has played a key role in the field of humanitarian response related to food security in India. Its objective is to make food security a priority disaster response within mainstream development activity through means of capacity building, public-private initiatives, and systematic research.

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