

# Reducing GBV risks through better shelter programme design

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**Good shelter programming must include mitigation measures throughout the project cycle in order to reduce GBV risks.**

Shelters must be habitable, and provide physical safety and adequate space, as well as protection against the elements. They are also homes where people seek well-being and safety, especially so in displacement. In essence, shelter offers protection. However, it is not enough to build shelters. These – and settlements in which shelters are built – also need to provide protection from violence, including gender-based violence (GBV).<sup>1</sup>

Potential GBV risk mitigation interventions in shelter programmes should be informed by a gender and risk analysis conducted at the start of the programme. In this way shelter practitioners are more likely to identify risks before they unintentionally cause harm. The appropriate inclusion of, for example, gender and female participation in projects has the potential not only to improve women's status in society but also to reduce risks that can lead to GBV. However, when done without a proper assessment of gender dynamics and roles, the involvement of women may inadvertently lead to a decrease in men's control of the recovery process, contributing to domestic, intimate partner and other types of GBV.

Mainstreaming GBV should help to achieve better shelter projects that proactively aim to avoid or reduce harm. It is a strategy and process that can help staff – including shelter staff – to reduce the vulnerabilities of affected populations. A focus on GBV risk mitigation and gender-specific needs and capacities ensures more relevant shelter assistance which meets individuals' needs.

## **Nepal earthquakes, 2015**

Following the Nepal earthquakes in April and May 2015, one shelter and WASH (Water, Sanitation and Hygiene) programme integrated a gender-sensitive approach to increase women's and girls' access to essential household items and to reduce protection risks.<sup>3</sup> Female staff members assessed roles and responsibilities of women and girls in order to design distribution points that ensured safe and equitable access. Crowd control measures at distribution times and enclosed sites further increased security.



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### Typhoon Haiyan, 2013

After typhoon Haiyan in the Philippines, the international humanitarian community promoted Build Back Safer messaging and vocational trainings on construction.<sup>2</sup> Traditionally, construction roles were held by men, limiting women's participation in the design of shelters that would meet their needs. In one shelter programme, women had a leading voice in deciding the design of shelters in order to ensure the inclusion of elements to guard their privacy and dignity, such as internal partitions for separate sleeping areas, opaque wall materials and spaces for washing and sanitation activities. Through the inclusion of women and girls, this shelter project was better able to take steps to mitigate risks of GBV related to shelter design and construction.

The starting point for any shelter programme is at the settlement level, taking account of issues such as overcrowding and site density, and access to sanitation facilities,

markets and emergency relief items. To successfully ensure access to services and opportunities, shelter programmes must integrate GBV and gender considerations prior to and during implementation; this includes in the planning of assessments, targeting and distribution locations, in the prioritisation of individuals at distribution sites, in onwards transportation of materials, in feedback and complaints systems, and in appropriate staffing to ensure safe access for vulnerable groups during such activities as distributions.

Once settlement approaches and location have been decided, the focus of shelter programmes moves toward the home. GBV does not just occur outside the home. For many people, the home is not a place of safety; intimate partner violence and domestic violence by their very nature tend to take place in private, behind closed doors, and between family members. Providing suitable shelter designs and sleeping spaces for the different members of the family, considerate of their cultural practices, can help to mitigate some acts of GBV in the home. Providing adequate covered space

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### Haiti earthquake, 2010

In the immediate aftermath of the earthquake that hit Haiti in January 2010, a transitional shelter project aimed to provide safer shelters for displaced persons, paying particular attention to the needs of women and girls. Project teams that included female staff assessed special needs through targeted focus group discussions. As a result, an additional door was added to the rear of shelters; not only was it traditional to have two entrances but it also served as a secondary exit from the house if a family member needed to escape an act of violence.<sup>4</sup> Separately, some women also felt safer in homes with outward opening doors, as they felt it would be harder for someone to pry the door open rather than to kick it in.

per person reduces risks associated with sharing spaces with non-family members.

Good shelter programming which considers GBV will not only focus on practical construction aspects but will also make sure that vulnerable families feel safe and secure in their communities and are able, for example, to meet the costs of shelter (such as rent, bills, maintenance and repairs).

Increasingly shelter actors and protection staff, inclusive of GBV specialists, are working together to identify and mitigate risks in shelter programmes. Additionally, all field staff should be trained in when and how to act if they witness or hear about a case of GBV, in order to minimise further negative impacts on survivors and to facilitate access to available support services for GBV survivors. This requires those working on shelter to understand the

concepts of confidentiality, consent and child safeguarding, while also adhering to referral protocols in place to support survivors.<sup>5</sup>

Measuring the impact of shelter interventions on GBV mitigation can be challenging. Despite this, providing privacy, dignity and a feeling of safety can greatly influence families' access to services and broader well-being. Therefore GBV integration should not be seen as an additional task to add to shelter practitioners' to-do list; it should be understood rather as integral to programming which includes the key principles of risk analysis, participation, inclusion, consultation and engagement with the affected communities.

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For further reading please visit

<http://sheltercluster.org/gbv> and

<http://gbvguidelines.org/>

1. IASC (2015) *Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action* <http://gbvguidelines.org/>
2. See article in this issue by Bill Flinn, Holly Schofield and Luisa Miranda Morel.
3. Case study A.5 in *Shelter Projects 2015-2016* [www.shelterprojects.org/shelterprojects2015-2016.html](http://www.shelterprojects.org/shelterprojects2015-2016.html)
4. Rees-Gildea P and Moles O (2012) *Lessons Learnt and Best Practice, IFRC Shelter programme in Haiti 2010-2012* <http://bit.ly/2iQNIft>
5. *The GBV Constant Companion*, a useful tool with practical step-by-step advice on how to react when faced with a disclosure of GBV, is available along with other resources at: [www.sheltercluster.org/gbv](http://www.sheltercluster.org/gbv)



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