2022 IASC GENDER ACCOUNTABILITY FRAMEWORK REPORT





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The 2022 IASC Gender Accountability Framework Report is a product of the Inter-Agency Standing Committee's Reference Group for Gender in Humanitarian Action (GRG) developed by UN Women in its role as the GRG's Gender Desk.

As per provisions endorsed by the Inter-Agency Standing Committee (IASC) in its 2017 Gender Policy, the Gender Desk within the IASC Gender Reference Group (GRG) was tasked with leading the requisite data collection, consolidation, and synthesis to fulfill the reporting requirements of the Gender Accountability Framework which accompanies the Gender Policy. The Gender Desk was hosted by UN Women on behalf of the GRG and a dedicated Working Group comprising of CARE International, IMPACT Initiatives, UNICEF, IOM, Action *Contre La Faim*, OCHA, the Gender Capacity Standby (GenCap) Project, and the IASC Secretariat supported the Gender Desk in the review of over 90 documents. In addition to the desk-review component, survey responses submitted by UN Women and OCHA country offices on behalf of the humanitarian coordination mechanisms from across 29 crisis contexts¹ were also reviewed by the Gender Desk.

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1 Afghanistan, Burkina Faso, Cameroon, Central African Republic (CAR), Chad, Colombia, Democratic Republic of the Congo (DRC), Eritrea, Haiti, Iraq, Lebanon, Libya, Madagascar, Mali, Mozambique, Myanmar, Niger, Nigeria, Pakistan, occupied Palestinian territory (oPt), Philippines, Somalia, South Sudan, Sudan, Syrian Arab Republic, Ukraine, Venezuela, Yemen, and Zimbabwe.

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ANNEX

<u>ACRONYMS</u>

AAP	Accountability to Affected People	HRP	Humanitarian Response Plan
AF	Accountability Framework	IAHE	Inter-Agency Humanitarian Evaluation
AWP	Annual Work Plan	IASC	Inter-Agency Standing Committee
CBPF	Country-Based Pooled Funds	мсн	Maternal and Child Health
сссм	Camp Management and Camp Coordination	NGO	Non-Governmental Organization
CERF	Central Emergency Response Fund	ОСНА	Office for the Coordination of Humanitarian Affairs
ECOSOC – HAS	Economic and Social Council – Humanitarian Affairs Segment	OPAG	Operational Policy and Advocacy Group
EDG	Emergency Directors Group	P2P	Peer-2-Peer Support Project
GAM	GAM Gender with Age Marker		Protection Against Sexual Exploitation and Abuse
GBV	Gender-Based Violence	SADD	Sex and Age Disaggregated Data
GenCap	Gender Standby Capacity Project	SEA	Sexual Exploitation and Abuse
GEEWG	Gender Equality and the Empowerment of Women and Girls	UNFPA	United Nations Populations Fund
GiHA	Gender in Humanitarian Action	UNHCR	United Nations High Commissioner for Refugees
GRG	Gender Reference Group	UNICEF	United Nations Children's Fund
нс	Humanitarian Coordinator	UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
нст	Humanitarian Country Team	WRC	Women's Refugee Commission
HNO	Humanitarian Needs Overview		

EXECUTIVE SUMMARY

The 2022 Inter-Agency Standing Committee (IASC) Gender Accountability Framework (GAF) report marks the fifth monitoring cycle of the *IASC's Gender Equality and the Empowerment of Women and Girls in Humanitarian Action Policy (2017).* It provides a snapshot of the IASC's output in the calendar year 2022 and allows for cross comparison with the baseline established with the 2018 GAF report and the subsequent 2019, 2020, and 2021 reports. The annual GAF report is the only global monitoring mechanism in place to track implementation of gender commitments in humanitarian settings.

The 2022 GAF Report benefited from inputs provided by UN Women and OCHA offices operating in 29 crisis contexts, the highest response rate to date. The improvement in quantity and quality of responses suggests that there is growing awareness of and familiarity with the IASC Gender Policy and overall stronger prioritization of gender by the humanitarian sector.

At the global level, results of most indicators largely remained at the same level as 2021. 80 percent of outputs from the Principals Group, 40 percent of annual work plans adopted by the OPAG Task Forces, 75 percent of annual work plans adopted by the global clusters, and 80 percent of the outputs endorsed by the Deputies Group, OPAG, and Emergency Directors Group demonstrated some level of attention to gender considerations and priorities. At the field level, while some areas remained at the same level as in previous years, there was improvement in results across most other indicators. Notably, there was an improvement in the number of active Gender in Humanitarian Action (GiHA)/Gender Working Groups as well as an increase in percentage of contexts which consulted local women's organizations as part of the humanitarian programme cycle. A higher percentage of Humanitarian Country Teams (HCTs) also had strategies or action plans on gender equality, and more crisis contexts reported having conducted a joint gender analysis² compared to the previous year.

The number of Humanitarian Needs Overviews (HNOs) utilizing sex- and age- disaggregated data as well as gender analysis slightly dropped from 85 percent to 80 percent. Similarly, 83 percent of all Humanitarian Response Plans (HRPs) included provisions to implement the three cross-cutting areas of gender priorities (economic empowerment, gender-based violence, and sexual and reproductive health). This is a slight drop from the previous year when 95 percent of HRPs included provisions for all three priority areas. While all HRPs included some reference to activities promoting SRH and the prevention and mitigation of GBV (higher than previous years), there was a drop in the inclusion of provisions for livelihoods and economic empowerment targeting women contributing to the overall drop.

² **Gender Analysis** is the systematic gathering and examination of sex and age disaggregated data and information to identify, understand and redress gender inequalities. Gender analyses should be integrated into all humanitarian needs assessments and situational analyses and used to inform the planning, implementation, monitoring and evaluation of all humanitarian interventions. Joint gender analysis is the development of gender analysis by two or more agencies involved in the humanitarian response.

Overview of Conclusions and Recommendations

As with previous reports, we see some continued improvements in the monitored compliance of the IASC to its gender commitments both globally and in the assessed crisis contexts. But we also see continued gaps and challenges. For example, the provision of sustained gender capacity to advise HCs and HCTs and provide leadership on gender in the coordination effort is a crucial element to ensure a sustained and consistent focus on the needs of women and girls. But we see that only 17 of the 29 (59 percent) monitored crisis contexts had GenCap deployments . While this is a significant improvement from the beginning of the GAF monitoring in 2018, it still leaves a significant gap (41 percent) to be filled in an ad-hoc manner, if at all. This gap was noted in the same section of the last report (covering 2021) and remains a concern.

Also of note is the disparity between improvements in the country level indicators and the lack of progress in outputs of the IASC bodies at the global level. For instance, inclusion of gender in the outputs endorsed by the IASC dropped from 90 percent in 2021 to 80 percent in 2022, P2P TORs dropped to 40 percent from 50 percent in 2020, and the inclusion of gender in the AWPs for global clusters is at a static 75 percent for the past two years. Whilst emphasis is often on delivery of gender integration at the field level, it is essential that the IASC is consistent on its own accountability across all of its levels.

The recommendations from previous GAF reports (attached in annex to this report) still stand, as do the important actions set out in the Management Response Plan to the IAHE Gender Evaluation of 2020. Based on the findings from 2022, this Gender Accountability Framework report recommends:

 GRG member agencies – where present in crisis contexts – to work closely with OCHA, HCTs, and ICCGs to ensure GiHA Working Groups are established in each crisis context covered by the IASC to bring together humanitarian stakeholders across clusters and agencies (including local women's organizations) to collaborate and cooperate on identifying and addressing the specific needs of women and girls during the planning and implementation of the humanitarian response.

- HCTs and clusters should improve both the quality and frequency of consultations with local women's organizations at the local level to ensure that consultations are full, equal, meaningful and safe. The inclusion of more marginalized sections of crisis affected populations - including women and girls – must be central to the IASC's efforts to address its concerns on erosion of trust and lack of follow-through of AAP feedback, as well as in the development of key strategic positions, including on climate change. Initiatives to this end should include the socialization and consistent roll out of the IASC Guidance on Strengthening Participation, Representation and Leadership of Local and National Actors in IASC Humanitarian Coordination Mechanisms.
- HCTs and clusters should strengthen the meaningful participation of local women and girls and marginalized population groups. This should include holding dedicated consultations with local women's organizations during the planning and prioritization processes of the HPC. Women and girls' needs, priorities and recommendations should inform decision making, with feedback mechanisms in place on how their contributions will be addressed, as per the <u>IASC Guidance on Strengthening Participation, Representation and Leadership of Local and National Actors in IASC Humanitarian Coordination Mechanisms.
 </u>
- The IASC Deputies' Group to maintain gender equality and the empowerment of women and girls as an IASC Strategic Priority – biennium review, with an emphasis on follow-up monitoring of the Management Response Plan to the IAHE Gender Evaluation recommendations (2020).
- OPAG to ensure a gender focus is maintained in any HNO/HRP reform or field level innovation, such as the ERC Flagship Initiative and the IASC Principals Advocacy Pilot Programme.

Management Response to 2020 IAHE Gender **Evaluation**

The 2020 Inter-Agency Humanitarian Evaluation presented crucial findings and recommendations to the IASC with regards to Gender Equality and the Empowerment of Women and Girls in Humanitarian Action. Findings

suggest that in 2021, progress towards the specific actions agreed to in the IAHE Gender Evaluation management response plan has been limited.

Recommendation 1 - Strengthen Gender Equality Expertise in Sudden Onset Emergency Response Recommendation 3 - Increase HCTs Access to Strategic and Technical Expertise on GEEWG

In 2021, IASC's GenCap project provided technical capacity support in 17 of 29 crisis contexts (58 percent) with an appointed Humanitarian Coordinator. Most of these contexts were established, protracted crisis settings but the scale-up in the level of emergency in Afghanistan due to the Taliban takeover of government was met with a GenCap deployment in December 2021.

Recommendation 2 - Strengthen Meaningful Participation of Women in Humanitarian Decision Making

Responses from 29 IASC crisis settings indicated that 69 percent of them (17 of the 29) had at least one consultation with local women's organizations to inform the formal humanitarian planning process. This reflects a slight improvement (65 percent in 2021) in the rate of consultations with local women's organizations.

Across contexts where local women's organizations were consulted, the levels of engagement varied. In some locations, the consultations were specific to a few clusters and in others, broader efforts were in place to ensure that the perspectives of women's groups informed the humanitarian planning process.

Recommendation 5 - Strengthen Global Leadership and Capacity for Gender

A key milestone in 2022 was UN Women joining the Inter-Agency Standing Committee as a full member, to help the IASC hold itself accountable to its existing and future gender commitments. This development will strengthen the work of existing members working to ensure that a focus on gender is included in all IASC decision-making processes, at all levels.

KEY FINDINGS

80%	80 percent of outputs released by the IASC Principals Group as well as 80 percent of outputs endorsed by other high-level entities in the IASC (Deputies Group, OPAG, EDG) in 2022 reflected the standards and commitments of the IASC Gender Policy.
80%	80 percent of HNOs demonstrated use of SADD and gender analysis reflecting a slight drop from 85 percent in 2021 but nevertheless an improvement from earlier years.
83%	83 percent of HRPs included provisions to implement all three cross-cutting areas of gender priorities (economic empowerment, gender-based violence, and sexual and reproductive health).
69%	69 percent of crisis contexts reported having consulted at least one local women's organization in 2022. This reflects an area of improvement compared to previous years. 76 percent (22 of 29) of crisis contexts had active GiHA/Gender Working Groups in 2022, an improvement from 2021.
82%	Where GiHA/Gender Working Groups were active, a higher percentage (82 percent) of crisis contexts reported having consulted local women's organizations, compared to 29 percent without active working groups. In other words, consultations are nearly three times more likely to take place if a working group is active. This finding remains consistent with a similar link seen in 2020 and 2021 between GiHA/Gender Working Groups and the rate of consultations with local women's organizations.
59%	Sustained gender capacity for the HCT was in place in 17 out of 29 (59 percent) crisis contexts through the deployment of senior gender capacity (GenCap). An additional five crisis contexts (17 percent) reported ad-hoc arrangements through which agencies such as UN Women and UNFPA – together with INGO partners – extended gender expertise.
76%	Joint gender analyses were produced in 76 percent of country contexts where there was active appointed gender capacity (GenCap) compared to only 14 percent in countries without any gender capacity in place. This means that joint gender analysis is conducted five times more often in contexts with appointed gender capacity.
38%	38 percent of HCTs had an action / strategic plan for Gender Equality and the Empowerment of Women and Girls in 2022, an improvement from 17 percent last year. There was a clear correlation between having appointed gender capacity and an action/strategic plan in place, with the 11 HCTs that did have an action/strategic plan, all 11 had appointed gender capacity.



INTRODUCTION





The Inter-Agency Standing Committee (IASC) renewed its commitments to gender equality and the empowerment of women and girls in humanitarian action through its 2017 <u>Policy on Gender Equality and the Empowerment of Women</u> and <u>Girls in Humanitarian Action</u> (Gender Policy). This was accompanied by an <u>Accountability Framework</u> (AF), intended to allow the IASC to monitor its delivery – both at the global and field levels – on the commitments, standards and prescribed roles and responsibilities contained within the Gender Policy.

The AF focuses on the collective actions of the IASC with regards to gender equality and the empowerment of women and girls (GEEWG).

Overall aims of the AF are to:

Monitor the collective actions of the IASC – at both global and field levels – to integrate gender equality and the empowerment of women and girls into the coordination of humanitarian response efforts around the world.

Guide the IASC in identifying priority actions to advance gender equality and the empowerment of women and girls.

Support the strengthening of accountability across the IASC with respect to advancing gender equality in humanitarian action.

Showcase good practice and implementation of the IASC's commitments on gender equality.

Highlight gaps where the IASC needs to amplify efforts to advance gender equality and the empowerment of women and girls.



OUTLINE OF PROCESS

COLLECCE 10

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As the main reporting mechanism on the implementation of the Gender Policy, the Accountability Framework is intended to capture, monitor, and measure the performance of the IASC Bodies as per the standards, roles and responsibilities set out in the Policy and how they have been implemented at global and field level. Over time, it is intended to show progress in the implementation of the Gender Policy.

As per the provisions of the endorsed AF document, a *Gender Desk* was tasked with the requisite data collection, consolidation, and synthesis to fulfill the reporting requirements of the Accountability Framework. Since 2018, annual reports reviewing the IASC's adherence to its Gender Policy have been developed by UN Women in its role as Gender Desk of the IASC Gender Reference Group (GRG).3 To strengthen the system-wide ownership of the exercise and to better harness the expertise of gender experts across the humanitarian system, the 2022, 2021 and 2020 Reports were developed with support from a dedicated Working Group comprising of UN and INGO GRG members.

In 2022, the GRG Working Group was comprised of CARE International, IMPACT Initiatives, UNICEF, IOM, Action Contre La Faim, OCHA, the GenCap Project, and the IASC Secretariat in its review of outputs produced by various strata of the IASC in 2022. These outputs comprised of over 90 documents including Humanitarian Needs Overviews (HNOs) and Humanitarian Response Plans (HRPs) developed in 2022 as well as outputs published by IASC bodies at the global level over the course of 2022.

As in previous years, information in relation to the implementation of the IASC Gender Policy at the field level was gathered from UN Women country offices operating in IASC-managed contexts. Where UN Women offices were not present, OCHA country offices gathered the requisite information for the exercise.

The monitoring and reporting exercise is done against the two logframes contained within the AF covering:

1) The Standards of the Gender Policy

- Analysis, Design and Implementation
- Participation and Leadership
- Organizational Practice to Deliver on Programme Commitments – financial resources, human resources
- Monitoring and Evaluation

2) Roles and Responsibilities defined in the Gender Policy

- Principals Group
- Operational Policy and Advocacy Group (OPAG) and its Results Groups
- Emergency Directors Group
- Peer-2-Peer Support Project
- IASC Associated Entities, including the GRG
- Global Clusters
- Humanitarian Coordinators
- Humanitarian Country Teams



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³ Please refer to previous Annual Reports here: 2021 IASC Gender Accountability Framework Report, 2020 Gender Accountability Framework Report, 2019 IASC Gender Accountability Framework Report and 2018 IASC Gender Accountability Framework Report.

INFORMATION SOURCES

The scope of this exercise is focused on IASC-managed crisis-contexts in which a Humanitarian Coordinator was present in 2022. This covered a total of 30 crisis settings: Afghanistan, Burkina Faso, Cameroon, Central African Republic (CAR), Chad, Colombia, Democratic Republic of the Congo (DRC), Eritrea, Ethiopia, Haiti, Iraq, Lebanon, Libya, Madagascar, Mali, Mozambique, Myanmar, Niger, Nigeria, Pakistan, occupied Palestinian territory (oPt), Philippines, Somalia, South Sudan, Sudan, Syrian Arab Republic, Ukraine, Venezuela, Yemen, and Zimbabwe. From across these crisis settings, documents and direct inputs were collected and reviewed as follows:

Direct information was received from 29 crisis contexts ⁴	Humanitarian Needs Overviews were developed in 21 countries in 2022 ⁵	Humanitarian Response Plans were developed in 23 countries in 2022
Afghanistan Burkina Faso Cameroon CAR Chad Colombia DRC Eritrea Haiti Iraq Lebanon Libya Madagascar Mali Mozambique Myanmar Niger Nigera Nigera OPt Pakistan Philippines Somalia South Sudan Sudan Sudan	in 2022 ⁵ Afghanistan Burkina Faso CAR Chad Colombia DRC El Salvador Guatemala Haiti Honduras Mali Myanmar Niger Nigeria OPt Somalia South Sudan Sudan Syria Ukraine Yemen	in 2022 Burkina Faso Burundi CAR Chad Colombia DRC El Salvador Ethiopia Guatemala Haiti Honduras Mali Mozambique Myanmar Niger Nigera Nigeria OPt Somalia South Sudan Sudan Ukraine Venezuela Yemen
Venezuela Yemen Zimbabwe		

⁴ Channeled through UN Women and OCHA country offices.

⁵ Not all crisis contexts with an appointed HC or Regional HC produced an HNO or HRP in 2022. Some settings extended an existing HNO or HRP for an additional year. In these cases, the review of the document was not repeated.



DELIVERY AT THE GLOBAL LEVEL OF COMMITMENTS TO GENDER IN HUMANITARIAN ACTION (GIHA)

Principals, Operational Policy and Advisory Group, Emergency Directors Group, Associated Entities, Global Clusters

Table 1: Percentage of IASC documents/events which contain commitments to GiHA

Delivery at the Global Level of Commitments to Gender in Humanitarian Action	2018	2019	2020	2021	2022
Gender integrated into outputs of Principals	33%	33%	77%	80%	80%
Associated Entities with gender in defined deliverables	50%	80%	40%	40%	40%
IASC side events facilitating dialogue between humanitarian actors and women's rights or gender justice organizations	2	2	4	1	1
OPAG Results Groups / Task Forces complying with the standards of the Gender Policy	-	20%	20%	40%	40%

PERCENTAGE OF OUTPUTS ENDORSED BY THE PRINCIPALS WHICH ARE CONSISTENT WITH THE COMMITMENTS OF THE GENDER POLICY

(2018: 33 PERCENT; 2019: 33 PERCENT; 2020: 77 PERCENT; 2021: 80 PERCENT; 2022: 80 PERCENT)

In 2022, a total of five outputs were endorsed by the IASC Principals. Three among the five outputs were joint statements.

Four of the five (80 percent) outputs published by the IASC Principals in 2022 included some reference to gender equality and the empowerment of women and girls. At 80 percent, the level of attention to gender remains at the same level as in the previous year.

Consistent with previous years, the GRG Working Group reviewers noted that within the outputs which were categorized as having *some* reference to gender, that reference was often limited. For instance, the IASC Vision and Strategy on PSEA (2022-2026) contains a reference to gender inequality as an enabler of sexual exploitation and abuse (SEA) but falls short of recognizing that women and girls are disproportionately at risk of SEA and that gender-targeted efforts are necessary to ensure that prevention, mitigation, and response efforts are effective.

The IASC Cash Coordination Model contained no reference to gender equality or the empowerment of women and girls. As humanitarian responses increasingly rely on cash-based interventions, and cash interventions having been linked to increased risks of gender-based violence in different contexts, the absence of any substantive attention to how gender considerations must inform cash coordination efforts was a concerning omission.



PERCENTAGE OF IASC ASSOCIATED ENTITIES WHICH INCLUDE GENDER EQUALITY AND THE EMPOWERMENT OF WOMEN AND GIRLS AS A CENTRAL ASPECT WITHIN ITS DEFINED DELIVERABLES

(2018: 50 PERCENT; 2019: 80 PERCENT; 2020: 40 PERCENT; 2021: 40 PERCENT; 2022: 40 PERCENT)⁶

Progress reports of five IASC associated entities were reviewed: Global Cluster Coordination Group, Gender Reference Group, Mental Health and Psychosocial Support Group, Inter-Agency Humanitarian Evaluations Steering Group, and Humanitarian Programme Cycle Steering Group. Of the five associated entities, only progress reports from the Gender Reference Group and the Inter-Agency Humanitarian Evaluation Steering Group displayed any concrete integration of gender in its key deliverables. The Gender Reference Group remained the only dedicated space within the IASC at the global level focused on gender equality and the empowerment of women and girls (GEEWG). All its deliverables in 2022 focused on advancing GEEWG in humanitarian action.

THE GENDER REFERENCE GROUP (GRG) HOSTED SIDE EVENTS AT GLOBAL HUMANITARIAN-THEMED FORA IN WHICH THE GRG FACILITATED DIALOGUE BETWEEN HUMANITARIAN ACTORS AND WOMEN'S RIGHTS OR GENDER JUSTICE ORGANIZATIONS (2018: 2; 2019: 2; 2020: 4; 2021: 1; 2022: 1)

The *Commitment to Action: Women's Representation Leading to Better Humanitarian Outcomes* side event at ECOSOC Humanitarian Affairs Segment was organized by UN Women, OCHA and UNICEF and co-hosted together with Germany and the USA, featuring women civil society representatives from Afghanistan, Ethiopia, Haiti, Ukraine, and Yemen.

PERCENTAGE OF IASC RESULT GROUPS (NOW TASK FORCES) WHICH MAKE SPECIFIC REFERENCE TO MEASURABLE GEEWG ACTIVITIES AND/OR HAVE DEMONSTRATED MAINSTREAMING OF GENDER EQUALITY AND THE EMPOWERMENT OF WOMEN AND GIRLS IN POLICIES, OPERATIONAL GUIDANCE, TORS, OBJECTIVES, ANNUAL WORK PLANS AND ANY OTHER RELEVANT DOCUMENT

(2018: 20 PERCENT; 2019: 20 PERCENT; 2020: NO DATA; 2021: 40 PERCENT; 2022: 40 PERCENT)

Priority areas outlined by all five Task Forces (Centrality of Protection, Accountability to Affected People, Preserving Humanitarian Space, Humanitarian Development Collaboration and its Linkages to Peace, and Localization) were reviewed. Task Force 2 on Accountability to Affected People and Task Force 5 on Localization reflected integration of gender priorities. There was no evident attention to gender in the priority areas outlined by the other three Task Forces.

⁶ Starting with the 2020 GAF Report, this data is based on a desk review conducted by the Gender Desk Working Group. In previous years, the data was based on responses from the relevant IASC bodies as relayed through the self-assessment surveys.



SUPPORT FROM THE GLOBAL LEVEL TO THE NATIONAL LEVEL

Associated Entities, Global Clusters, Emergency Directors Group, and Peer-2-Peer Support Project

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Table 2: Percentage of global-level documents/outputs to the national level which contain gender considerations

Source	2018	2019	2020	2021	2022
Outputs endorsed by the IASC (DG, OPAG, EDG)	100%	78%	60%7	90%	80%
P2P project	0%	50%	50%	0%	40%
AWPs of global clusters	40%	67%		75%	75%



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7 Starting with the 2020 GAF Report, this data is based on a desk review conducted by the Gender Desk Working Group. In previous years, the data was based on responses from the relevant IASC bodies as relayed through the self-assessment surveys.

RELEVANT IASC POLICIES, DIRECTIVES, AND OPERATIONAL GUIDANCE DOCUMENTS - AS SIGNED OFF BY THE DEPUTIES GROUP, OPAG OR EDG - ARE CONSISTENT WITH THE POLICY COMMITMENTS TO GENDER EQUALITY AND THE EMPOWERMENT OF WOMEN AND GIRLS IN HUMANITARIAN ACTION

(2018: 100 PERCENT; 2019: 78 PERCENT; 2021: 90 PERCENT; 2022: 80 PERCENT)

A total of 15 outputs including guidance, evaluations, analyses, and key messages endorsed by the Deputies Group, Operational Policy and Accountability Group (OPAG), and Executive Directors Group (EDG) were reviewed. Of the 15, 12 outputs were found to have integrated gender considerations although the extent to which this was done varied significantly. This included seven outputs from Associated Entities (Reference Group on MHPSS, Gender Reference Group, and IAHE Steering Group) – all of which integrated gender equality considerations. Other resources such as the Guidance on Addressing Bureaucratic and Administrative Impediments to Humanitarian Action did not pay attention to gender considerations that may have relevance to the drivers behind as well as consequences of bureaucratic and administrative impediments.

TORS FOR OPERATIONAL PEER REVIEWS AND PEER-2-PEER SUPPORT MISSIONS ADDRESS RELEVANT GENDER POLICY COMMITMENTS

(2018: 0 PERCENT; 2019: 50 PERCENT - MOZAMBIQUE; 2020: 50 PERCENT - LIBYA; 2021: 0 PERCENT; 2022: 40 PERCENT - AFGHANISTAN AND MOZAMBIQUE)

In 2022, the Peer-2-Peer Support Group facilitated P2P support missions to Burkina Faso, Mozambique, Myanmar, and South Sudan, as well as an Operational Peer Review mission to Afghanistan. Of the five mission ToRs reviewed, two included specific attention to gender considerations. This included the Mission ToR for Afghanistan which included a reference to gender programming as part of the mission scope as well as the Mission ToR for Mozambique which described an exploration of how to prioritize an effective gender focus as a critical area for consideration. The reports from both these missions also reflect a focus on gender considerations.

Although the Mission ToR for South Sudan did not include any explicit reference to gender, the mission report highlights that implementation of gender priorities is a gap in practice. The mission report also discusses the need to prioritize crisis-affected women and female-headed households.

While the Mission ToR and mission report for Burkina Faso include references to GBV and PSEA, neither document has a focus on gender equality, women's empowerment or crisis-affected women and girls beyond that. Similarly, the Mission ToR nor the mission report for Myanmar reflect any integration of gender considerations.

PERCENTAGE OF GLOBAL CLUSTER ANNUAL WORK PLANS WHICH HAVE INCLUDED MEASURABLE AND EVIDENCE-BASED GEEWG ACTIVITIES, AND/OR DEMONSTRATED MAINSTREAMING OF GENDER

(2018: 40 PERCENT; 2019: 67 PERCENT; 2020: NO DATA; 2021: 75 PERCENT; 2022: 75 PERCENT)

The Education, Logistics, Nutrition, and WASH clusters released new strategies to guide their work in 2022. Other clusters continue to be guided by multi-year strategies from previous years. Of the four clusters that released new strategies in 2022, three included specific considerations to integrate gender priorities in their work. The new strategy for the Logistics cluster is the only one that does not feature specific actions to improve gender equality outcomes, despite clear opportunities to do so. For example, given its role in supply chain management and communications, gender equality could be promoted by encouraging the collection of sex, age and disability disaggregated data; support to women-owned, equitable and local businesses; and involvement of women in the selection of and processes by which goods and information are sourced and delivered.



DELIVERY AT THE NATIONAL LEVEL

Humanitarian Coordinators, Humanitarian Country Teams, and Clusters

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Table 3: Delivery results at the national level through the review of HNOs, HRPs, and HC/ HCT self-assessments

Indicators	2018	2019	2020	2021	2022
Use of SADD and gender analysis in HNOs	45%	47%	55%	85%	80%
Provisions for women's economic empowerment in HRPs	60%	60%	63%	95%	83%
Provisions for sexual and reproductive health in HRPs	70%	75%	92%	95%	100%
Provisions to mitigate and respond to GBV in HRPs	65%	85%	94%	100%	100%
Direct consultations with local women's organizations	56%	61%	68%	65%	69%
Presence of GiHA/Gender Reference / Working Groups	44%	43%	81%	62%	76%
Presence of Gender Advisors	15%	13%	19%	45%	59%
Implementation of plan on GEEWG by HCT	16%	21%	7%	17%	38%
Joint gender analyses	20%	25%	78%	39%	52%



HNOs USE SADD IN AT LEAST HALF OF THE CLUSTER CHAPTERS

(2018: 55 PERCENT; 2019: 53 PERCENT; 2020: 64 PERCENT; 2021: 85 PERCENT; 2022: 81 PERCENT)

HNOS DEMONSTRATE GENDER ANALYSIS BY IDENTIFYING THE DIFFERENTIAL IMPACT ON AFFECTED WOMEN, GIRLS, MEN, AND BOYS IN THE CRISIS NARRATIVE OUTLINE (2018: 90 PERCENT; 2019: 68 PERCENT; 2020: 86 PERCENT; 2021: 90 PERCENT; 2022: 95 PERCENT)

HNOs WITH SADD AND GENDER ANALYSIS

(2018: 45 PERCENT; 2019: 47 PERCENT; 2020: 55 PERCENT; 2021: 85 PERCENT; 2022: 80 PERCENT)

80 percent⁸ of HNOs developed by HCTs for the 2022 period identified the gendered impacts of the crisis (beyond protection and reproductive health) *and* demonstrated some use of SADD in at least half of the cluster chapters covered, compared to 85 per cent in 2021. This suggests that attention to gender in HNOs has remained at about the same level compared to the previous year.

Table 4: HNOs which contain gender analysis and/or sex and age disaggregated data

HNO ⁹	Includes impact of crisis on women and girls	Uses SADD in at least half of the cluster chapters	Contains both Gender Analysis and use of SADD
Afghanistan	O	N/A	N/A
Burkina Faso	8	0	8
CAR	<	⊘	0
Chad	⊘	⊘	0
Colombia	♥	8	8
DRC	⊘	N/A	N/A
El Salvador	<	⊘	0
Guatemala	♥	8	8
Haiti	N/A	8	N/A
Honduras	O	⊘	\bigcirc
Mali	•	⊘	0

⁸ HNOs which utilized different formats could not be reviewed against these indicators and therefore are not included. Afghanistan, DRC, Myanmar, oPt, and Niger did not have cluster chapters. Haiti adopted a new approach in its HNO and presented testimonials from affected persons to convey the gravity of needs.

⁹ N/A entries indicate that the criterion was not reviewed because the HNO utilized a different format.

Myanmar	O	N/A	N/A
Niger	O	N/A	N/A
Nigeria	O	O	•
oPt	O	N/A	N/A
Somalia	O	O	•
South Sudan	O	⊘	•
Sudan	O	O	•
Syria	O	⊘	•
Ukraine	O	O	0
Yemen	O	⊘	•
	95%	81%	80%

<u>Reference to the gendered impacts of the crisis</u>: **95 percent** (19 of 20)¹⁰ of HNOs identified the specific impact of the crisis on women, girls, men, and/or boys by going beyond protection and reproductive health needs. This reflects a stronger recognition in comparison to previous years of how crises impact women and girls differently and disproportionately.

The quality of gender analysis varied across HNOs. Several HNOs integrated a gender profile or dedicated section on the gendered impacts of the crisis. Most HNOs drew attention to the wide-ranging gender inequalities that have persisted and grown during the humanitarian crisis. Needs analyses touched upon the exacerbated impact of climate induced crises and conflicts on women and girls, the risks of exclusion due to discriminatory gender norms, heightened protection risks, gender disparities in health, and inequalities in access to humanitarian services and economic resources. While the HNO for Burkina Faso highlighted protection concerns, it did not specify broader impacts on women and girls.

<u>Use of Sex and Age Disaggregated Data</u>: **81 percent** (13 of 16)¹¹ of HNOs demonstrated some use of sex and age disaggregated data in at least half of the included cluster chapters. This reflects a slight drop compared to the previous year. Of the HNOs which met this minimum criterion, only one HNO (Somalia) utilized sex and age disaggregated data in all cluster chapters (see Table 5 below).

• CAR, Nigeria, and Sudan have produced HNOs that demonstrate gender analysis and use of SADD consistently for five years since the launch of the IASC Gender Policy.¹²

HNOs for Guatemala and Colombia referred to the gendered impacts of the crisis in the 'Impact' section of the HNOs but did not reflect use of SADD in at least half of the active clusters.

¹⁰ While a total of 21 HNOs were reviewed, the Haiti HNO was excluded from this indicator as it adopted a different model for its 2023 HNO.

¹¹ While a total of 21 HNOs were reviewed, HNOs for Afghanistan, DRC, Myanmar, oPt, and Niger were not included as they did not contain cluster chapters.

¹² Afghanistan and oPt were not included because they adopted different formats in their HNOs for 2023 but otherwise also produced consistent gender analysis and SADD.

A breakdown of the use of SADD for individual clusters across the 21 HNOs reveals that only the Protection cluster and Refugee/Migrant Multi-Sector – when present – demonstrated use of SADD in all HNOs. The Health cluster utilized sex and age disaggregation in 88 percent of HNOs. Use of sex and age disaggregation was lowest in the Camp Coordination and Camp Management (CCCM) cluster (30 percent) and Shelter and Non-Food Items (NFI) cluster (36 percent) chapters, followed by Food Security and WASH cluster chapters (both at 44 percent). The high level of attention to gender in the Protection cluster and contrastingly, the low level of attention in the Shelter/NFI cluster is a gap that persists from previous years.

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CLUSTER HNO ¹³	% of clusters using SADD	сссм	Education	Early Recovery + Livelihoods	Food Security	Health	Nutrition	Protection	Shelter + NFI
Burkina Faso	88%		0		0	0	٢	0	Ø
CAR	71%	8	0		0	0	0	0	

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Table 5: HNO breakdown by cluster and the use of SADD

Chad

Colombia

El Salvador

Guatemala

Honduras

Haiti

Mali

Nigeria

Somalia

Sudan

Syria

South Sudan

50%

43%

50%

25%

29%

75%

63%

56%

100%

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12	HNOs for Afghanistan, DR	C Muanmar off an	d Nigor word not inclu	idad as they did not contai	n clustor chaptors
12	HNUS IUI Alghanistan, DK	C, Myannai, OF L, ar	iu Niger were not incit	ideu as they did hot contai	n ciuster chapters.

¹⁴ The HNO for Burkina Faso included a cluster chapter on 'Management of Temporary Reception Sites.' As this was the only HNO with this chapter, for the purpose of this review, it was categorized under 'Refugee and Migrant Multi-Sector.'

Refugee & Migrant <u>Multi</u>-

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Ukraine	71%	ω	0		•	0		0	0	0	
Yemen	56%	ω	0		•	0	0	0	8	8	0
	'	30%	63%	67%	44%	88%	69%	100%	36%	44%	100%

CROSS-ANALYSIS

Of reporting countries with active GiHA/gender working groups and of which there was a 2023 HNO developed with cluster chapters, **91 percent** contained SADD in at least half clusters, compared to 67 percent HNOs of countries that did not have active working groups.

Table 6: HRPs which contain provisions for economic empowerment, SRH, and GBV

HRP	Economic Empowerment and Livelihoods	Sexual and Reproductive Health	Gender-Based Violence	Provisions for all three priorities
Burkina Faso	0	0	0	0
Burundi	8	0	0	\bigotimes
CAR	0	0	0	0
Chad	0	⊘	0	0
Colombia	⊘	⊘	⊘	0
DRC	⊘	⊘	0	Ø
El Salvador	⊘	⊘	⊘	•
Ethiopia	⊘	⊘	0	ø
Guatemala	⊘	⊘	⊘	0
Haiti	•	0	0	8
Honduras	0	0	⊘	0
Mali	0	0	0	0
Mozambique	0	0	⊘	0

Myanmar	0	0	⊘	0
Niger	0	0	⊘	0
Nigeria	⊘	⊘	⊘	Ø
oPt	<	⊘	⊘	0
Somalia	<	⊘	⊘	0
South Sudan	⊘	⊘	⊘	0
Sudan	•	⊘	⊘	0
Ukraine	⊘	⊘	⊘	0
Venezuela	8	⊘	⊘	8
Yemen	8	⊘	⊘	8
	83%	100%	100%	83%

83 percent of all HRPs included provisions to implement the three cross-cutting areas of gender priorities (economic empowerment, gender-based violence, and sexual and reproductive health). This is a slight drop from the previous year when 95 percent of HRPs included provisions for all three priority areas. While all HRPs included some reference to activities promoting SRH and the prevention and mitigation of GBV in 2022 (a higher number than in previous years), there was a drop in the number of HRPs with provisions for livelihoods and economic empowerment targeting women, which contributed to the overall drop.

Beyond the three cross-cutting priority areas, several HRPs, including Sudan, Myanmar, Yemen, Venezuela, Ukraine, Mali, Honduras, and Guatemala, also explicitly referred to the participation and leadership of women leaders and local women's organizations – a positive trend. Notably, the Myanmar HRP points to the growing participation of local women's organizations and other local and national organizations in the HCT, and highlights support to local partners including women's CSOs as a priority area. The HRP for Guatemala also included an indicator to track women's participation in humanitarian decision-making and planning.

PERCENTAGE OF HRPs WHICH SPECIFY ACTION THAT TARGETS LIVELIHOODS, ECONOMIC EMPOWERMENT AND/OR EMPLOYMENT FOR WOMEN AND GIRLS (2018: 60 PERCENT: 2019: 60 PERCENT: 2020: 63 PERCENT: 2021: 95 PERCENT: 2022: 83

(2018: 60 PERCENT; 2019: 60 PERCENT; 2020: 63 PERCENT; 2021: 95 PERCENT; 2022: 83 PERCENT)

83 percent (19 of 23) of reviewed HRPs included provisions to support the livelihoods, economic empowerment and/ or employment of women, which is a drop from 2021 (95 percent) but still an improvement from earlier years.

As in previous years, the extent of these provisions varied across HRPs. In most cases, provisions on livelihoods and economic empowerment targeting women fell under the Food Security and Livelihoods cluster and in some cases, the Protection cluster. The HRPs for Sudan and South Sudan contained provisions for women-friendly livelihoods projects planned by Food Security and Livelihoods cluster and presented their key objectives under the cluster as centered on the needs, rights, and voices of women. In contrast, several other HRPs only refer to access to livelihoods as a passing reference to GBV response efforts or the inclusion of women under a broader cash-based intervention.

PERCENTAGE OF HRPs WHICH INCLUDE SPECIFIC PROVISIONS FOR SRH FOR WOMEN AND GIRLS, BEYOND MCH (2018: 70 PERCENT; 2019: 75 PERCENT; 2020: 92 PERCENT; 2021: 95 PERCENT; 2022: 100 PERCENT) PERCENTAGE OF HRPs WHICH INCLUDE SPECIFIC PROVISION FOR SRH FOR ADOLESCENT

YOUTH (2018: N/A; 2019: 10 PERCENT; 2020: 25 PERCENT; 2021: 48 PERCENT; 2022: 39 PERCENT)

100 percent (23 of 23) of reviewed HRPs specify some provision of sexual and reproductive health (SRH) that goes beyond maternal and child health (MCH), reflecting an improvement from the previous year. In most cases, activities to promote SRH fell under the Health cluster and GBV sub-cluster. In a few HRPs, the reference is limited to mentions of providing SRH. In others, such as the HRP for Honduras, there is a good focus on SRH provisions with key objectives and activities listed around access to a range of essential SRH services.

Only ten of the reviewed HRPs (39 percent) included any provision to address the sexual and reproductive health of adolescent youth, including girls, reflecting a drop in mentions of SRH for adolescent youth in HRPs from last year (48 percent).

PERCENTAGE OF HRPs WHICH CONTAIN PROVISIONS TO MITIGATE AND RESPOND TO GBV (2018: 65 PERCENT; 2019: 85 PERCENT; 2020: 96 PERCENT; 2021: 100 PERCENT; 2022: 100 PERCENT)

100 percent (23 of 23) of HRPs reviewed include strategies that address both the mitigation of and response to GBV. This sustained attention to GBV in HRPs continues on from the previous year as well. Provisions were most often included as part of the GBV sub-cluster chapter. Several HRPs featured GBV prevention and response efforts in other cluster activities.

Table 7: Efforts by Humanitarian Country Teams to implement the IASC Gender Policy

Country	Consultation with local WROs	Active Gender Working Groups	Gender Capacity for technical support	Action plan for GEEWG	Joint Gender Analysis
Afghanistan	0	0	0	\mathbf{S}	0
Burkina Faso	8	0	⊘	0	0
Cameroon	8	0	⊘	0	0
CAR	Ø	0	8	8	0
Colombia	0	8	8	8	8
DRC	0	0	⊘	•	0
Eritrea	8	8	8	8	•
Haiti	0	0	♥	•	0
Iraq	0	0	8	8	0
Lebanon	0	0	⊘	8	•
Libya	8	8	8	8	•
Madagascar	8	0	\bigcirc	8	•
Mali	0	0	0	0	0
Mozambique	0	0	⊘	8	•
Myanmar	0	0	0	8	•
Niger	0	0	⊘	•	0
Nigeria	0	0	•	•	0
oPt	0	0	0	$\boldsymbol{\otimes}$	0
Pakistan	8	0	O	8	•
Philippines	0	8	⊘	8	0
Somalia	8	8	⊘	0	•

South Sudan	⊘	⊘	0	•	0
Sudan	0	0	8	8	8
Syria	0	0	0	0	0
Tchad	8	8	0	8	8
Ukraine	⊘	0	0	8	0
Venezuela	⊘	0	0	8	0
Yemen	⊘	0	0	•	8
	69%	76%	59%	38%	52%

PERCENTAGE OF HUMANITARIAN PLANNING PROCESSES WHICH INCLUDE DIRECT CONSULTATIONS WITH LOCAL WOMEN'S ORGANIZATIONS AND INTEGRATE THEIR INPUTS (2018: 56 PERCENT; 2019: 61 PERCENT; 2020: 68 PERCENT; 2021: 65 PERCENT; 2022: 69 PERCENT)

Responses from 29 crisis settings indicate that in 69 percent of contexts (20 of 29), there was at least one consultation with local women's organizations to inform the formal humanitarian planning process. This reflects a slight increase from the previous year (65 percent).

Where GiHA/Gender Working Groups were active, a higher percentage (**82 percent**) of crisis contexts reported having consulted local women's organizations compared to 29 percent without active working groups. In other words, consultations are nearly three times more likely to take place if a working group is active. This correlation between GiHA/Gender Working Groups and the rate of consultations with local women's organizations was also observed in 2020 and 2021.

Across contexts where local women's organizations were consulted, the levels of engagement varied. In some locations, the consultations were specific to a few clusters and in others, broader efforts were in place to ensure that the perspectives of women's groups informed the humanitarian planning process. Often, consultations with local women's organizations took place to inform the development of the HNO or HRP.

PERCENTAGE OF COUNTRIES WITH A FUNCTIONING GIHA/GENDER REFERENCE/WORKING GROUP, WHICH MEETS ON A REGULAR BASIS

(2018: 44 PERCENT; 2019: 43 PERCENT; 2020: 81 PERCENT; 2021: 62 PERCENT; 2022: 76 PERCENT)

Of the 29 contexts that responded, 22 (76 percent) indicated that a GiHA/Gender Working Group (or its equivalent) linked to the humanitarian coordination system was active in 2022. However, in two of these contexts (Burkina Faso and Pakistan), it was unclear whether the Working Group was consulted or utilized by the relevant humanitarian decision-making bodies. In most cases, responses indicated that the membership included local and national women's organizations. The level and frequency of engagement between the Working Groups and other parts of the humanitarian coordination system varied. While some (Afghanistan, Lebanon, Myanmar, oPt, and Yemen) met as often as every month and regularly linked their work with that of the Inter-Cluster Coordination Group (ICCG) and the HCT,

others were organized in a more ad-hoc manner. In two contexts (Somalia and Chad), responses suggested that the establishment of GiHA/Gender Working Groups was being discussed in 2022.

PERCENTAGE OF IASC-MANAGED COUNTRY CONTEXTS WHICH HAVE APPOINTED SENIOR GENDER CAPACITY FOR TECHNICAL SUPPORT

(2018: 15 PERCENT; 2019: 13 PERCENT; 2020: 19 PERCENT; 2021: 45 PERCENT; 2022: 59 PERCENT)

From among the 29 crisis contexts for which data on this indicator is available, 17 (59 percent) indicated that senior Gender Capacity for technical support was available through the deployment of GenCap advisors. This is a notable increase from previous years and reflects the GenCap project's efforts to provide longer-term support, but a 41 percent gap remains a serious concern. In 38 percent of crisis contexts, the gender expertise came from UN agencies such as UN Women and UNFPA (often in collaboration with NGO partners) through locally negotiated arrangements. In 10 crisis contexts (34 percent), it was reported that some level of gender expertise was available to all clusters. In most cases, the source of expertise was cited as UN Women or GenCap.

PERCENTAGE OF HCTs WHICH HAVE PREPARED AND IMPLEMENTED A PLAN ON GENDER EQUALITY AND THE EMPOWERMENT OF WOMEN AND GIRLS, INCLUDING STRATEGIES FOR ENGAGEMENT WITH LOCAL WOMEN'S ORGANIZATIONS

(2018: 16 PERCENT; 2019: 21 PERCENT; 2020: 11 PERCENT; 2021: 22 PERCENT; 2022: 38 PERCENT)

38 percent of crisis contexts which responded indicated that their humanitarian response included a strategic plan or roadmap for gender equality and the empowerment of women and girls. While this is still a low number, it reflects an increase from previous years. Seven of the nine contexts which reported having a gender strategy or roadmap also indicated that engagement with local women's organizations was a priority within the strategy or roadmap.

NUMBER OF JOINT GENDER ANALYSES PRODUCED TO INPUT TO HNO AND HCT PLANS (2018: 20 PERCENT; 2019: 25 PERCENT; 2020: 75 PERCENT; 2021: 39 PERCENT; 2022: 52 PERCENT)

15 of 29 crisis settings which responded to this question reported conducting a joint gender analysis which contributed to the humanitarian planning process. At **52 percent**, this is an increase from the previous year. 75 percent of contexts reported conducting joint gender analysis in 2020 but it was noted last year that this relatively high number likely occurred due to the COVID-specific analysis and assessment efforts that year.

Beyond the 15 contexts where a joint gender analysis was conducted, four other settings (Lebanon, Madagascar, Myanmar and, Yemen) reported efforts to integrate gender considerations and use of SADD into broader multi-sectoral analyses and assessments even though a dedicated gender analysis was not conducted.

CROSS-ANALYSIS

Joint gender analyses were produced in **76 percent** of country contexts where there was active appointed gender capacity (GenCap) compared to only 14 percent in countries without any gender capacity in place. This can infer that joint gender analysis is five times more likely in contexts with appointed gender capacity.



<u>ANNEX</u>

Previous Accountability Framework Recommendations

ACCOUNTABILITY FRAMEWORK RECOMMENDATIONS FROM 2018, 2019, 2020, AND 2021 THAT STILL APPLY

PRINCIPALS:

- When establishing strategic priorities for the future work of the IASC as a whole, the Principals must ensure they include reflection of the commitments, standards and roles and responsibilities set-out in the IASC's 2017 Gender Policy.
- IASC Principals should strengthen the promotion of the IASC Gender Policy and Accountability Framework to all of its structures, member agencies and field representation so that they are aware of the Policy's contents and their obligations with regards roles and responsibilities and reporting requirements.
- The Principals group should ensure that they have – or consult with – the requisite gender in humanitarian action capacity at the decisionmaking level so that adherence to and application of the Gender Policy is consistent

OPAG, EDG AND DEPUTIES FORUM:

- OPAG, EDG and Deputies Forum should ensure that they have the requisite gender capacity at the decision-making level so that adherence to and application of the Gender Policy is consistent.
- The IASC Gender with Age Marker (GAM) should be consistently used in the development and monitoring of all humanitarian interventions.

GENDER REFERENCE GROUP:

- The GRG needs to continue to socialize the contents of the IASC Gender Policy, both globally and at the field level to ensure that all humanitarians are aware of the Policy's existence and what it contains. Working with the IASC Secretariat and Peer-2-Peer group, the GRG should conduct webinars, host relevant and topical events and other communication strategies to ensure all bodies and all positions included in the Policy know what the commitments, standards and roles and responsibilities are that pertain to them and everyone else.
- The GRG should also promote and help facilitate the recommendations contained within this report.

OTHER IASC BODIES:

- The global structures of the IASC should turn to the GRG as a resource to assist all IASC bodies and associated entities to provide technical capacity and support in ensuring the commitments of the IASC Gender Policy are fully realized.
- The GCCG should encourage all global clusters to nominate a gender focal point internally as a first step towards ensuring that gender is consistently mainstreamed in the work of the field clusters.
- Strengthen engagement and collaboration between Global Clusters and GRG with regular information sharing, briefings, and exchange regarding obligations and commitments contained in the IASC Gender Policy and Accountability Framework.
- OCHA, Cluster Lead Agencies, GCCG should promote the application of the IASC Gender Age Marker (GAM) as a mandatory project design and monitoring tool for all humanitarian interventions.
- Cluster lead agencies and global clusters should explore options to provide and/or facilitate access to resources and funding for sustainable technical gender expertise to support with integrating gender in responses.

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- Cluster lead agencies and global clusters should explore options to provide and/or facilitate access to resources and funding for sustainable technical gender expertise to support with integrating gender in responses.

IASC POOLED FUNDING MECHANISMS:

- A guidance note should be developed to compliment the CERF Handbook detailing best practice and expectations of how gender should be integrated into CERF supported projects and how it should be demonstrated in the CERF application.
- A tracking mechanism should be established to monitor levels of funding specifically utilized for gender targeted programming.

PEER-2-PEER MISSIONS:

 The TORs of P2P missions should integrate gender and make provisions for consultations with women's groups and relevant Government machineries. Furthermore, their mission reports should reflect findings relating to the operations' key gender concerns and how the operations have identified and addressed such issues.

USE OF GENDER ANALYSIS AND SEX AND AGE DISAGGREGATED DATA:

- Sectors should demonstrate the use of SADD by specifying the different needs, vulnerabilities and capacities through analysis. Mere breakdown of total affected population numbers into male and female does not suffice as the use of SADD. Furthermore, the data for women and children should not be grouped together.
- A separate and detailed joint-agency gender analysis should be developed for each country context which is then used to inform the planning process and guide individual implementing agencies on formulating their response plan so that it identifies and address the specific needs and rights of affected women, girls, men and boys.

 Care must be taken to ensure that the specific crisis impacts identified through gender analysis are followed through on a sector-by-sector basis, both in the prioritization developed in the shared strategic vision of the HNO and in the subsequent official plan.

GENDER PRIORITIES IN HUMANITARIAN RESPONSE PLANS:

- Whilst it is encouraging to see almost ubiquitous inclusion of women's economic empowerment of women and girls, access to SRH and strategies to mitigate GBV, improvements should be made to further elaborate these interventions across clusters and the scope of the entire humanitarian response plan.
- In addition, HRP monitoring plans should consistently utilize gender focused indicators, measured by sex and age disaggregated data.

PROTECTION FROM SEXUAL EXPLOITATION AND ABUSE:

- In keeping with the Gender Policy and the 2017 Terms of Reference for Humanitarian Country Teams that placed PSEA as a mandatory responsibility of HCTs requiring a collective mechanism and approach, it is crucial that the PSEA mechanisms in country are outlined.
- Resources should be allocated for the coordination of PSEA prevention and response.
- Details should also be provided on specific contextual SEA protection needs of women, girls, men and boys are to be addressed or how they have been considered.

ACCOUNTABILITY FOR AFFECTED POPULATIONS:

 Inclusion of AAP as a strategic objective should also detail the specific provisions on how women and girls will be included in humanitarian planning decision making processes and how any potential challenges to access feedback mechanisms will be addressed.

CONSULTATIONS WITH LOCAL WOMEN'S ORGANIZATIONS:

- Consultation with local women's organizations in the planning and decision-making processes for humanitarian programming should be facilitated as an effective strategy for identifying the specific needs of women and girls, leading to more nuanced and inclusive response plans.
- Local women's organizations should be consulted in the development of the gender analysis.

HUMANITARIAN COUNTRY TEAMS (HCTS), INTER-CLUSTER COORDINATION GROUPS AND CLUSTERS:

- HCTs should have long-term dedicated gender expertise, to ensure sustainability.
- All contextualized local HCT TORs should reflect the roles and responsibilities set out in the IASC Gender Policy. A guidance note should be developed to assist in this process.
- Any plan on GEEWG in humanitarian action must look beyond just protection and GBV response.
- The HCT protection strategy must also contain gender component with gender indicators and outcomes.
- Clusters should make efforts to promote more robust gender analysis including impacts on marginalized groups such as adolescent girls, women and girls with disabilities, as well as LGBTI individuals, and ensure consistency between identified needs and response plans.

- HCTs and Country Based Pooled Funds Advisory Groups at country level should facilitate access to humanitarian funds to local women's organizations to build capacity and to enable engagement with the processes of humanitarian coordination and planning.
- HCTs and ICCG should develop a framework/ process to ensure sustained engagement of women's organizations within the planning process and coordination architecture, in particular women's meaningful participation in decision making.
- HCs and HCTs should ensure consistency between needs identified in the gender analysis findings outlined in the HNO with the final prioritized response plans. This includes issues such as added care burden and the means to alleviate.

GENDER WORKING GROUPS (OR EQUIVALENT):

- Gender Working Groups which include humanitarian actors from UN, INGOs, as well as local organizations (specifically local women's organizations) should be established in each humanitarian country context.
- These groups should be regularly consulted and utilized as a resource in planning processes. Ideally, there should be a mechanism/structure set in place which allows for the GWG to consistently contribute to the HPC.
- Gender Working Groups should develop and keep updated – an open and available contextual gender analysis to provide humanitarian actors with relevant and timely information on the needs, vulnerabilities as well as capacities and opportunities for the crisis affected and/or at-risk population. This can be adapted to assist and guide the development of response plans so that they address the needs and rights of the crisis affected women, girls, men and boys.
- Gender working groups should undertake studies to get a clearer, contextualized understanding of the capacities of women and girls to prevent and respond to crises, to counteract the frequent exclusive focus on their vulnerabilities.

The Gender Accountability Framework Report is the monitoring mechanism of the IASC's Gender Equality and the Empowerment of Women and Girls in Humanitarian Action Policy endorsed in 2017. It provides a snapshot and baseline of where the structures and representation of the IASC were at with regards to fulfilling the commitments, standards and roles and responsibilities set out in the Policy. Over time, the Report produced annually is intended to show progress in the implementation of the Policy and to provide guidance and recommendations for improvement.

Previous editions can be found on the IASC and UN Women websites.



