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## ANNEX I

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ACHIEVED

NOT ACHIEVED

INDICATORS ACHIEVED: **86%**  
12/14

**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>YES</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>YES</b>		<b>YES</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>65%</b>		<b>NO</b>		<b>YES</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support • Gender analysis • Gender equality strategy • Gender mainstreaming
<b>YES</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>YES</b>		<b>YES</b>	

# AFGHANISTAN

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

- A functional, well-linked GiHA WG: TORs, monthly meetings and active links to HCT/ICCT/ICCGs, annual workplan, and strong WLOs membership (49 WLOs). This has kept gender priorities visible in coordination spaces and created effective escalation pathways.
- HCT endorsed a two-year Strategy on GEEWG(2024), co-developed with GenCap/GiHA, with concrete emphasis on WLOs engagement. This provides system-wide direction and shared accountability. The strategy emphasizes meaningful involvement of women-led organizations in humanitarian response and basic human needs programming. It further highlights the importance of fostering an enabling environment that allows WLOs to access sustained funding, both for humanitarian action and for long-term programming.
- Evidence-based planning: the 2025 HNRP met the SADD threshold across clusters, and a 2024 GiHA Gender Analysis was produced and used, improving intervention targeting and advocacy.
- Meaningful participation of Afghan WLOs: two WLOs sit on the HCT and the WAG has a dedicated seat, bringing frontline perspectives directly into decisions and advocacy.
- GiHA WG capacity-building role: In 2024, GiHA provided targeted training to cluster members, frontline responders, and WLOs, which enhanced their skills in integrating gender markers into project design. The response implementation also became gender-responsive with boosted support from successful localized gendered negotiations and exemptions for female staff participation.

### GAPS + CHALLENGES

- Gender focal point (GFP) coverage is below the 75% benchmark (62%), leaving uneven gender integration, particularly in clusters like Food Security and Protection.
- Joint/multi-cluster assessments (- e.g.: MRAT, MSRAF, parts of WoAA) are not adequately gender-responsive; mixed-gender teams, tailored tools, and systematic enumerator training are inconsistent. This is due to gaps in capacity, funding (as it is more expensive to have women join and DfA restrictions limiting women's participation in the response.

- Senior gender advisory capacity is fragile: GenCap exited in November 2024 and has not been replaced; there is a need for this kind of support for the HCT.
- Resourcing and continuity: Funding cuts risk eroding gendered programming gains as they disproportionately affect women and girls both as aid recipients and staff members. Due to the U.S funding cuts gendered programs and support for women staff have been impacted. This situation risks women and girls being left behind and limited their access to humanitarian assistance.

### RECOMMENDATIONS

- RC/HC with OCHA to secure a GenCap by end of 2025. This directly addresses the advisory gap flagged in 2024.
- Make assessments gender-responsive: OCHA/IMWG with clusters to a) revise MRAT/MSRAF/WoAA data collection tools to capture risks/barriers/opportunities for women and girls, b) require mixed-gender teams and standard PSEA/Gender-responsive data collection training, c) plan localized data collection using practical local permissions to enable women enumerators/participants. Complete revisions before the next assessments cycle and annex guidance to HNRP tools.
- Institutionalize WLO participation and financing: HCT to maintain WLO and WAG seats given the humanitarian reset; OCHA/CBPF to include a dedicated WLO window (light compliance, small grants, mentorship) next allocations; clusters to co-design activity packages with local WLOs and track WLO engagement in 4Ws. Anchored in 2024 HCT strategy commitments.
- Enforce use of SADD beyond planning: ICCT/Regional Teams/Provincial Teams to require SADD in 5W/4W reporting and cluster situation updates; GiHA to spot-check and provide feedback; clusters to reflect on SADD trends quarterly to adjust targeting.

# CENTRAL AFRICAN REPUBLIC

## 2024 Country Level Snapshot



ACHIEVED

NOT ACHIEVED

INDICATORS ACHIEVED: **79%**  
11/14

**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>YES</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>YES</b>		<b>NO</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>70%</b>		<b>YES</b>		<b>NO</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support - Gender analysis - Gender equality strategy - Gender mainstreaming
<b>YES</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>YES</b>		<b>YES</b>	

# CENTRAL AFRICAN REPUBLIC

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

#### Key Successes

- 1. Gender Analysis and Data Use:** cluster-wide application of sex- and age-disaggregated data has improved evidence-based planning and inclusiveness.
- 2. Functional GiHA Working Group with WLO Participation:** Active engagement of women-led organizations at GTGH, ICCG and HCT ensures stronger representation in coordination and decision-making.

- 3. Engagement of Women and Girls:** HCT and ICCG consultations with affected women and girls have enhanced accountability and community-driven responses.
- 4. Senior Gender Expertise:** Deployment by UN WOMEN of a senior humanitarian gender specialist dedicated to coordination of gender equality in humanitarian action has strengthened compliance with IASC Gender Policy and improved technical capacity.

### GAPS + CHALLENGES

- 1. Uneven Gender Integration:** Some clusters fail to meet gender standards, limiting consistency.
- 2. Insufficient Gender Focal Points:** Coverage is 70%, below the 75% target, reducing systematic monitoring.

- 3. Weak GiHA Role in JIAF:** Limited participation undermines gender-sensitive needs analysis.
- 4. Funding Gaps for WLOs and for implementation of HCT gender Work Plan 2024-2025:** Limited direct financing restricts sustainability of GiHA efforts and local WLO ownership.

### RECOMMENDATIONS

Addressing these challenges requires:

- 1. Strengthening cluster compliance with gender integration standards; Responsible:** Cluster Coordinators with GTGH & UN WOMEN Support
- 2. Expanding Gender Focal Points coverage from 70 to 90%; Responsible:** Cluster Coordinators
- 3. Institutionalizing GiHA in JIAF; Responsible:** OCHA (JIAF FPs & GTGH)

- 4. Scaling direct funding to WLOs. Responsible:** HCT, Humanitarian Fund and Funding Partners
- 5. Increased resource mobilisation for implementation of CAR HCT Gender Work Plan 2024-2025; responsible:** HC/HCT & UN WOMEN

These steps will reinforce accountability, ensure more inclusive humanitarian action, and deliver stronger outcomes for crisis-affected populations in CAR.

# COLOMBIA

## 2024 Country Level Snapshot



ACHIEVED

NOT ACHIEVED

INDICATORS ACHIEVED: **64%**  
9/14

**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>YES</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>NO</b>		<b>NO</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>44%</b>		<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support · Gender analysis · Gender equality strategy · Gender mainstreaming
<b>NO</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>NO</b>		<b>YES</b>	

# COLOMBIA

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

Consolidation of the participation of a local women's organization in the co-leadership of the National Gender-Based Violence Coordination Space (a platform that promotes the integration of a gender perspective in the humanitarian program cycle) since 2024. Its participation has brought greater dynamism and the inclusion of key issues that reflect territorial realities.

Increased participation of women and WLO in the humanitarian program cycle, particularly in consultative spaces for determining the People in Need (PIN), calculating severity levels by municipality, contributing to the strategic planning process and—most importantly—providing specific information on the needs of women in humanitarian contexts, both in terms of protection and intersectoral issues.

Enhanced accountability processes in territories where humanitarian responses were implemented in 2024, ensuring broader inclusion of communities—and specifically women and their organizations—in the design and monitoring phases. The Community Participation Group (created under the Flagship Initiative) documents, systematizes, and showcases the extensive experience of organizations implementing community participation methodologies, working closely with the organizations that make up the Humanitarian Country Team (HCT) in Colombia. Thanks to its work, it has produced recommendations on community participation approaches and their link to the humanitarian program cycle.

### GAPS + CHALLENGES

- The absence of a gender focal point group and an advisor at the Resident Coordinator level may limit the dissemination and promotion of the gender approach across the cluster system, placing the greatest responsibility on the GBV AOR within the Protection Cluster.
- The Humanitarian Country Team's limited gender-specific planning—as reflected in the lack of an HCT Gender Plan or a strategy to strengthen gender mainstreaming at both national and territorial levels—could hinder the implementation of the priority areas set out by the IASC.
- Low awareness within the cluster system of the Gender Equality and Empowerment of Women and Girls in Humanitarian Action Policy (IASC Reference Group on Gender and Humanitarian Action, January 2024) remains a challenge.
- While the response tracking and monitoring system incorporates a gender marker through the 345W platform and the HPC Tools, an online tool that monitors preparedness and response activities to identify the organizations, UN agencies, and NGOs engaged in humanitarian action, its ability to track gender-related investments and actions remains limited. As a result, it provides only partial insight into the results and impacts of projects on the lives of women affected by armed conflict or disasters.

### RECOMMENDATIONS

- Train the Humanitarian Team and all cluster system partners on the IASC gender commitments to increase awareness of the challenges involved in mainstreaming a gender perspective in humanitarian action. (Lead: GBV AoR / Inter-Cluster Group. Timeframe: 1 year).
- In coordination with the Localization Group (established under the Flagship Initiative), conduct a national mapping of local women's organizations implementing initiatives related to the humanitarian-development-peace nexus, particularly in territories prioritized by the HNRP, to foster greater participation in the humanitarian program cycle 2026. (Lead: Inter-Cluster Group. Deadline: 6 months).
- Develop a local-level gender strategy for coordination teams (where there is presence of Local Gender and GBV groups), with the active participation of women's organizations, to strengthen the positioning of the gender approach within the framework of the humanitarian reset and the ongoing changes in Colombia's humanitarian architecture. (Responsible: Local Coordination Teams, with guidance from local Gender and GBV subgroups).

# DEMOCRATIC REPUBLIC OF THE CONGO

## 2024 Country Level Snapshot



ACHIEVED

NOT ACHIEVED

INDICATORS ACHIEVED: **86%**  
12/14

**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>YES</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>NO</b>		<b>YES</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>100%</b>		<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support • Gender analysis • Gender equality strategy • Gender mainstreaming
<b>YES</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>YES</b>		<b>NO</b>	

# DEMOCRATIC REPUBLIC OF CONGO

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

- 1. Gender Analysis in Assessments:** Partners conducted gender-sensitive assessments, improving response design in health, protection, and food security.
- 2. Alignment with National Frameworks:** The gender ad hoc committee operates with validated strategic documents, ensuring coherence with national humanitarian coordination.
- 3. Revitalization of Women's Leadership:** Community-level networks of women leaders are strengthening peace and security efforts and gaining influence in coordination mechanisms.
- 4. Holistic GBV Services:** Integrated case management (medical, psychosocial, legal) has improved survivor support.
- 5. Capacity Building on PSEA and AAP:** Training efforts have fostered accountability and rights-based approaches, though a unified hotline remains absent.

### GAPS + CHALLENGES

- 1. Data Gaps:** Humanitarian data often lacks gender, age, and disability disaggregation, limiting tailored responses.
- 2. Underrepresentation:** Women-led organizations remain underrepresented in decision-making and coordination bodies.
- 3. Persistent GBV and Discrimination:** Structural barriers and stereotypes continue to undermine gender equality, especially during crises.
- 4. Funding Constraints:** Gender-focused initiatives and women-led organizations face short-term, inflexible, and insufficient funding.

### RECOMMENDATIONS

- 1. Systematically collect sex- and age-disaggregated data and use gender monitoring tools:** Apply the Gender with Age Marker (GAM), gender-sensitive indicators for needs assessments, the humanitarian response plan, and other planning processes.
- 2. Integrate a gender approach at the Programme and project design stage:** Ensure that the needs and realities of women and men—as well as gender norms and power relations—are considered throughout all phases of the humanitarian programming cycle.
- 3. Promote the participation of women and girls:** Women and girls must be informed and actively involved in decision-making processes, needs assessments and planning processes to ensure their voices are heard. They should also have unimpeded access to complaint mechanisms for GBV, PSEA, and other forms of accountability.
- 4. Prioritize funding for gender equality interventions in humanitarian response and coordination,** especially as the crisis in the DRC is largely protection-related. Funding must be flexible, sustained, and predictable to enable real and sustainable progress in this area.



**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

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**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>N/A</b>		<b>NO</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>100%</b>		<b>NO</b>		<b>YES</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support • Gender analysis • Gender equality strategy • Gender mainstreaming
<b>NO</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>YES</b>		<b>YES</b>	

# ETHIOPIA

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

- 1. Membership of women-led organizations (WLOs) in the GiHA WG is high:** The GiHA WG at national and sub-national level is the only platform where WLOs get together to identify their added value in humanitarian action. The discussion and information shared through these members in the GiHA WG allows it to inform the ICCG and other clusters' decisions and coordination. Through the mapping of WLOs conducted with the GiHA WG members, the ICCG decided for cluster coordinators to reach out and facilitate WLOs' participation in their respective clusters.
- 2. Cluster Gender Focal Points (GFPs) effectively appointed and endorsed:** Accountability of clusters was increased through the endorsed responsibilities of cluster GFPs. This enabled progress on key activities as part of the GiHA WG Workplan, including training for WLOs on clusters' work and the development of cluster-adapted indicators that monitor the inclusivity, accountability and quality of clusters' response plans.
- 3. Systematic use of sex-age-disability disaggregated data (SADDD) by clusters in the HRP reported:** The use of SADDD enabled the development of targeted and tailored cluster activities towards different population groups. It increases cluster partners' requirements to use SADDD in their design, planning, monitoring and reporting, which results in gender integration in their responses ultimately.
- 4. Gender Analysis was conducted and effectively disseminated with relevant stakeholders (ICCG, Assessment & Analysis WG, etc.):** The Gender Analysis results highlighted the need to ensure that more WLOs can participate in certain responses, especially in IDP sites, it provided evidence to advocate for further improvement towards gender mainstreaming and it also informed key decisions in clusters' response planning.

### GAPS + CHALLENGES

- 1. Lack of clarity on GiHA WG membership criteria:** Unclear Terms of Reference (ToR) and objectives for the GiHA WG have led to confusion about its role in facilitating women-led organizations' (WLOs) participation in humanitarian decision-making and the unique value of bringing these WLOs together. There is also misunderstanding about the GiHA WG's potential overlap with the development-focused gender working group. Including donor representatives in the GiHA WG has been proposed to strengthen its commitment to increasing WLOs' access to funding.
- 2. Lack of visible contributions to the HNO/HRP due to non-publication:** Efforts to integrate gender analysis results and considerations into the HNO/HRP were undermined by the documents not being published and lacking endorsement from key stakeholders. To preserve these efforts, the GiHA WG worked with PSEA, AAP, and DI WGs, as well as cluster GFPs, to use the gender-responsive needs analysis findings to advocate for crosscutting outcomes and indicators to be mainstreamed across cluster response plans and to be monitored through ActivityInfo reporting, thereby supporting an inclusive, accountable, and quality response.
- 3. Lack of visibility on the impact achieved through WLOs' engagement at HCT and ICCG:** The effective influence of WLOs in HCT and ICCG decisions remains to be improved by strengthening WLOs' capacity (financial and technical).
- 4. Lack of sustained senior Gender Advisory capacity:** Due to lack of funding, this capacity is no longer available. A request will be submitted to enable future capacity.

# ETHIOPIA

## Successes, Gaps/Challenges & Recommendations

### RECOMMENDATIONS

1. Strengthen engagement at HCT level in collaboration with PSEA, AAP and other crosscutters. The GiHA WG's role can become more impactful if it informs HCT's strategic decisions. This will be achieved on a quarterly basis from UN Women as GiHA WG Secretariat, the PSEA and AAP Coordinators and the Age Disability Inclusion specialist.
2. Organize the GiHA WG activities in Task Forces to have a stronger engagement of members. Volunteers will be identified and assigned specific roles, milestones and reporting timelines to ensure consistent progress and engagement from GiHA WG members.
3. Set up regular reporting requirements from sub-national GiHA WGs to the national one and vice versa. On a quarterly basis, there will be activity updates during the GiHA WG meetings at sub-national and national level to ensure consistency, close collaboration, accountability and stronger localization of the GiHA WG's work in alignment with national processes.
4. Closely engage with REACH, DTM, IM Officers etc. on the gender-focused analysis of the current needs and risks to inform the humanitarian response. The review of multi-sectoral needs assessment processes, tools, capacities and results will ensure that findings are gender-responsive and will strengthen clusters' ownership of the results as they already rely on these assessments to inform their needs analysis. This is achieved by UN Women and WLOs who participate in the review of the assessments as well as in the data collection phases.
5. Set up a Women's Advisory Group at HCT level to strengthen women's influence in key decisions. UN Women will support the mentoring of women-led organizations and facilitate the set up of this group in collaboration with the HC based on other countries' lessons learned..



ACHIEVED

NOT ACHIEVED

**INDICATORS ACHIEVED: 57%**  
8/14

**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>NO</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>NO</b>		<b>YES</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>0%</b>		<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>NO</b>		<b>NO</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support . Gender analysis . Gender equality strategy . Gender mainstreaming
<b>NO</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>NO</b>		<b>YES</b>	

# GUATEMALA

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

There are three territorial GTGs, and due to the advocacy of the GTG, two HCTs are active: one through a reactivation and strengthening process (Izabal), and the one in Huehuetenango, which this year began the process of being formed. Details are as follows:

Formation process of the Huehuetenango Humanitarian Country Team, which began at the express request of the Departmental Governor's Office to the Gender Task Force of that territory to advocate with OCHA. As a result of that advocacy, in August 2025 the first meeting of humanitarian actors working in Huehuetenango was held as a first step toward its formation. Protection agents and women's organizations participated in this meeting, committing to be part of the HCT, achieving for the first time that women in the territory are represented in an HCT. Likewise, in Izabal, the HCT was reactivated through

advocacy by the GTG of this department, ensuring the GTG became part of the entities leading this HCT.

Exchange of knowledge and good practices between the community protection networks of Alta Verapaz and Huehuetenango and presentation of successful experiences of the GTG in incorporating the gender perspective in the humanitarian crises of these departments.

In February 2025, the Gender Task Force drafted and presented the document Call for Attention to Women in Human Mobility, which outlines the situation of women in human mobility, their challenges, and recommendations to the institutions responsible for responding to their needs.

### GAPS + CHALLENGES

The lack of trained and sensitized personnel on gender and women's human rights within humanitarian organizations prevents the approach from being included in all phases of the process. The GTG has developed guidance tools, but these are not sufficient to provide tailored advice to each cluster and entity to ensure gender mainstreaming.

At the territorial level, women's participation is hindered by the cost of attending meetings outside their communities (transportation), as well as the burden of care work, which in rural areas falls on women more than 90% of

the time. Through the project, transportation and food costs have been covered, and protection agents have organized childcare during meetings. However, greater awareness is still needed in communities regarding shared responsibility, as well as among humanitarian actors to ensure women's participation in decision-making spaces.

The lack of financing for gender issues prevents reaching other territories to establish GTGs, which would enable more inclusive humanitarian actions where women are at the center.

### RECOMMENDATIONS

Continue strengthening women's organizations in leadership, participation, and gender in humanitarian action, as this enables them to access more decision-making spaces. Currently, work has only been done with protection networks in 3 departments and with approximately less than 10% of existing communities. Responsible: GTG. Timeline depends on available funding.

Advocate with sectors and donors so that projects include gender indicators and budgets, as well as gender accountability processes with communities. Responsible: UN Women as lead, with CONRED and CARE as GTG

co-leads, and OCHA. Timeline: 1 year. Target: at least one project in each sector can present results.

Promote at the global level the positioning of the Gender Task Force in humanitarian structures, since only by being in a strategic space can real influence be exerted at both the decision-making and operational levels.

Secure greater funding to strengthen women's organizations, enabling them to access financial mechanisms and fund management spaces while complying with required standards. Timeline: 1 year. Responsible: UN Women.



**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>YES</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>77%</b>		<b>YES</b>		<b>NO</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>77%</b>		<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support • Gender analysis • Gender equality strategy • Gender mainstreaming
<b>YES</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>NO</b>		<b>YES</b>	

# HAITI

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

REGAH strives to produce Rapid Gender Analyses each year to provide information on the humanitarian situation in the country and formulate advocacy messages for the HCT.

REGAH is positioned as the HCT's sole point of contact on gender and the situation of women's organizations. The recognition of two places within the HCT on behalf of REGAH is greatly appreciated.

REGAH strives to support displaced women and girls by organizing solidarity and sharing days during which food kits are distributed, women are listened to about their living conditions, and raised awareness on cross-cutting issues such as PSEA, Access, AAP, etc.

More and more women's organizations are receiving humanitarian funding due to REGAH's intensified advocacy efforts with OCHA.

### GAPS + CHALLENGES

The intensification of insecurity has considerably restricted humanitarian access, and REGAH missions to support subnational networks have been blocked since early 2025.

REGAH lacks sufficient technical capacity. UNWOMEN has not received any further support since Gencap left in 2024, even though the crisis continues to intensify and there is an ever-increasing need for gender mainstreaming among humanitarian actors, donors, the HCT, etc.

The REGAH does not have sufficient funds to operate, while sub-national units need to be revitalized and better equipped to be more operational.

The position of humanitarian specialist is not fully established in Haiti for UN Women, unlike other agencies. This situation may reduce the agency's influence within the humanitarian community.

### RECOMMENDATIONS

The country office needs a permanent GiHA technical resource with a dedicated team to better coordinate the office's humanitarian interventions, including REGAH management.

The sub-national REGAH cells require significant capacity building with regular monitoring by at least two GiHA specialists, given their large number and distribution across the country.

The REGAH, under the coordination of UNWOMEN, must produce at least two RGAs per year.

The two organizations designated by REGAH to the HCT must receive adequate support and guidance from dedicated staff regarding their roles and responsibilities in order to better represent the voices of vulnerable women and girls.



**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>YES</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>66%</b>		<b>YES</b>		<b>NO</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>66%</b>		<b>NO</b>		<b>NO</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>NO</b>		<b>NO</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support . Gender analysis . Gender equality strategy . Gender mainstreaming
<b>NO</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>NO</b>		<b>NO</b>	

# LEBANON

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

The GiHA Working Group has made notable progress in strengthening gender-responsive humanitarian action in Lebanon. One key achievement has been the WG's consistent engagement in humanitarian coordination platforms, including participation in the ISCG and collaboration with the Protection, GBV, PSEA, and AAP structures. This has helped ensure that the needs of women and girls are more visible in inter-sectoral discussions and advocacy efforts.

The WG has also worked with the Assessment and Analysis Working Group to ensure the use of gender-sensitive data and analysis. Technical inputs to assessments, along with advocacy for the integration of sex-, age-, and disability-disaggregated data (SADDD) into tools have improved the evidence base for humanitarian planning. Also the

GiHA WG has produced an advocacy paper on the 3 key priorities for gender mainstreaming in the Lebanon Humanitarian Response.

Capacity development has been another success. Trainings for humanitarian actors on gender in humanitarian action, data collection, and gender analysis have contributed to building stronger technical skills across clusters and partners.

Finally, the WG has promoted meaningful participation of women-led organizations (WLOs). By updating WLO mapping, organizing regional consultations, and facilitating access to funding opportunities, the WG has supported stronger WLO leadership and engagement in humanitarian decision-making.

### GAPS + CHALLENGES

**Limited HCT Engagement:** The GiHA WG's link with the HCT remains weak, with limited structured consultations or influence on decision-making.

**Insufficient Senior Gender Expertise:** There is no senior dedicated gender adviser embedded at the strategic level, which reduces capacity to shape high-level planning.

**Weak Systematic Use of SADD:** Not all clusters consistently collect or use sex-, age-, and disability-disaggregated data, leading to gaps in evidence-based programming.

**Funding & Sustainability Constraints:** WLOs and national actors engaged in the GiHA WG face restricted funding and capacity support, limiting their ability to meaningfully and sustainably contribute.

### RECOMMENDATIONS

**Strengthen Strategic Influence:** Ensure regular consultations between the GiHA WG and the HCT/ICCG during emergencies and nation-wide scale ups. The HCT should formally integrate GiHA recommendations into response planning and monitoring.

**Deploy Senior Gender Adviser:** Advocate for the deployment of a GenCap adviser or equivalent to support the HC, HCT, and clusters in advancing gender-responsive programming.

**Improve Data and Analysis:** Standardize the collection and use of SADD across all clusters, and ensure that

intersectional gender analyses inform sectoral and inter-sectoral response plans.

**Resource and Elevate WLO Participation:** Allocate dedicated funding (through pooled funds or direct support) for WLOs and community-based organizations engaged in the GiHA WG to strengthen their technical and leadership role.

**Institutionalize Accountability:** Integrate GiHA WG inputs into HNRP processes, multi-sectoral needs assessments, and monitoring frameworks, ensuring that gender equality and women's empowerment remain central to humanitarian response.



**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
YES		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
N/A		NO		NO	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
N/A		YES		N/A	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
YES		NO	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
NO		N/A	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support · Gender analysis · Gender equality strategy · Gender mainstreaming
YES		Nature of support requested by HCT (top 3)	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
NO		N/A	

# LIBYA

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

In Libya, the humanitarian sector benefits from a notably high representation of women in leadership roles, despite cultural barriers for local staff, including sector co-leads, inter-agency working group chairs, and technical advisors, which ensures gender perspectives are embedded in planning and decision-making. Women-led organizations are often consulted but are not involved, but this at least ensures they bring local expertise that strengthens the cultural relevance and inclusivity of the response.

Gender considerations are systematically integrated into needs overviews, response plans, and strategies, ensuring equitable access to services for women, men, girls, and boys and more often focusing and prioritizing the needs of women as a key target group in Libya for all the country team. Agencies' leads also drive advocacy and resource mobilization for gender-responsive funding, resulting in targeted services such as GBV prevention, reproductive health, and women's economic empowerment initiatives, thereby improving service delivery to women and girls.

### GAPS + CHALLENGES

While the IASC Gender Accountability Framework identifies several unachieved indicators for Libya—such as the absence of a formal HCT gender strategy with structured engagement of women-led organizations (Indicator 9.1), a functional GiHA Working Group meeting the full criteria (Indicator 5.1), and consistent use of sex, age, and disability disaggregated data across clusters (Indicator 2.1)—many of these reflect a shift in context rather than operational underperformance. With the transition away from a formal Humanitarian Country Team toward a humanitarian-development nexus approach,

some indicators are no longer directly applicable, as coordination is increasingly integrated into broader UN Sustainable Development Cooperation Framework (UNSDCF) structures. Nevertheless, challenges remain in securing sustained senior gender advisory capacity (Indicator 8.2) and in mobilizing dedicated funding for gender-specific technical expertise, which limits the ability to systematically guide, monitor, and resource gender integration across joint humanitarian-development planning.

### RECOMMENDATIONS

If a formal Humanitarian Country Team is reactivated, priorities could include: embedding gender targets into HCT workplans; ensuring WLO/WRO representation in sector leadership; mobilizing funding for senior gender advisors and focal points; strengthening collection and use of sex, age, and disability disaggregated data; and

convening a donor roundtable to secure multi-year gender-responsive financing. These actions, led jointly by UN RCO, UN Women, UNFPA, and relevant agencies, could be initiated within the first 6-12 months of HCT reactivation to ensure gender integration from the outset.



**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>YES</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>YES</b>		<b>YES</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>100%</b>		<b>YES</b>		<b>NO</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>NO</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support • Gender analysis • Gender equality strategy • Gender mainstreaming
<b>NO</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>YES</b>		<b>YES</b>	

# MALI

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

Key achievements in gender integration include the development of a gender in humanitarian action joint programme (including UN Women, OCHA, UNICEF, UNFPA as well as CSOs) including strategic actions such as the mapping and capacity building of women's organizations. A rapid gender analysis was carried out and a gender audit of humanitarian response structures was planned but not implemented due to lack of funds.

With regards to the empowerment of women led organisations and localisation, access to the FHRAOC by FEDE, a women-led organization in Mali, marks a significant milestone. FEDE is the first women-led organization to receive direct funding from FHRAOC within the region, having previously benefited only from indirect support. As part of this allocation, the fund also aims to strengthen the capacities of other women-led organizations, further amplifying the impact of the project on gender-responsive humanitarian action.

### GAPS + CHALLENGES

Efforts to integrate gender into humanitarian action remain insufficient due to several challenges:

- Lack of dedicated resources both in terms of dedicated GiHA staff and financial resources to support gender-responsive initiatives; in particular, no GiHA expert is at the moment supporting the work of the Humanitarian Coordinator.

- Limited engagement of Cluster Gender Focal Points in coordination mechanisms and in the GiHA WG, which hinders the mainstreaming of gender in humanitarian response;
- Lack of systematic gender statistics to monitor gender issues in humanitarian action.

### RECOMMENDATIONS

Recommendations to strengthen gender integration in humanitarian action:

- Designate Cluster Leads as Gender Focal Points to ensure gender considerations are mainstreamed across sectors;
- Advocate at the local level to allocate a percentage of CERF funding specifically for gender inclusion and to support targeted initiatives;
- Recruit a gender expert within the humanitarian coordination structure to support the Humanitarian

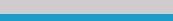
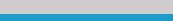
Coordinator/Country Team and the Inter-Cluster Coordination Group (ICCG);

- Continue to advocate for protection funds in support of services for GBV survivors;
- Improve the production and quality of gender statistics to better inform policies and programmatic decisions;
- Encourage women organisation's access to humanitarian funds, by raising funds for dedicated capacity building bootcamps.

**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>  YES	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
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**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>  100%	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>  YES	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>  YES	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>INDICATOR 2.4</b>  66%	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>  YES	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>  YES	GiHA Working Groups in JIAF process

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>  YES	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>  YES	HCT with WLO membership
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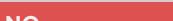
**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>  YES	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>  YES	GiHA Working Groups with WLO membership
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**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>  YES	Senior gender advisory capacity	<b>INDICATOR 8.3</b>  Nature of support requested by HCT (top 3)	Type of Support · Gender analysis · Gender equality strategy · Gender mainstreaming
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**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>  NO	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>  YES	HCT consultations with GiHA Working Group
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# MOZAMBIQUE

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

#### 1. Strengthened Coordination within the Humanitarian Architecture

The GIHA Working Group is firmly embedded within the humanitarian coordination structure, reporting regularly to the Inter-Cluster Coordination Group (ICCG) and providing quarterly updates to the Humanitarian Country Team (HCT). Its diverse membership includes UN agencies, international and national NGOs, women's rights organizations, and local actors. The GIHA WG has become a recognized platform for sharing knowledge, disseminating guidance, discussing challenges, and providing technical support to ensure gender is systematically addressed across all sectors of the humanitarian response.

Collaboration with the GenCap Advisor has been instrumental in strengthening gender mainstreaming: while GenCap advised the HCT at the strategic level, the GIHA WG provided complementary technical-level support and guidance.

#### 2. Meaningful Participation in Humanitarian Planning and Assessments

The GIHA WG played a key role in the development of the 2024 Humanitarian Needs and Response Plan (HNRP), ensuring gender was fully integrated throughout the process. This was achieved through direct engagement with clusters, active participation in ICCG coordination meetings, and involvement in the Multi-Sector Needs Assessment (MSNA) and the Joint Intersectoral Analysis Framework (JIAF).

As a result, the 2024 HNRP reflected a more gender-responsive approach compared to previous years, including:

- The inclusion of gender-disaggregated quantitative data from the MSNA,
- Qualitative inputs gathered through consultations with women's organizations,
- A dedicated chapter on gender, and
- Gender-sensitive indicators for monitoring and evaluation.

#### 3. Gender integration in emergency preparedness and response interventions

- The GIHA WG developed and revised context-specific tools (MIRA, RGA, MSNA tools) improving the gender-responsiveness of needs assessments and supporting the collection and use of sex, age, and disability-disaggregated data and gender analysis. These efforts culminated in the production of RGA in response to both conflict and cyclone in Northern Mozambique, gender-sensitive MIRA assessments in response emergency and integration of gender data in the Humanitarian Needs and Response Plan (HNRP) which informed both strategic planning and operational responses.

#### 4. Technical Support and Capacity Strengthening

The GIHA WG led capacity-building efforts to improve gender-responsive needs assessments and gender analysis in emergency contexts. This included:

- Developing and delivering trainings on gender-responsive needs assessments, including on Rapid Gender Analysis (RGA) and Multi-Sector Initial Rapid Assessment (MIRA), gender mainstreaming in emergency response, GAM, GBV for GIHA WG members and on gender considerations in the Multi-sectoral Needs Assessment for MSNA enumerators.
- Developing and delivering trainings on gender integration in humanitarian action and gender-responsive sectoral interventions for humanitarian partners and clusters.
- Conducting a provincial mapping of women-led and women's rights organizations (WLOs/WROs) to strengthen their participation and enhance local capacities.

#### 5. Advocacy and Accountability to Gender Equality

In partnership with the GenCap Advisor, the GIHA WG has actively promoted the implementation of the IASC Gender Policy and Accountability Framework. This has included advocacy in key coordination fora—such as the HCT, ICCG, sectoral clusters, and HNRP planning processes—to ensure that gender equality and women's empowerment are prioritized and systematically tracked in humanitarian response efforts.

# MOZAMBIQUE

## Successes, Gaps/Challenges & Recommendations

### GAPS + CHALLENGES

1. Despite the critical technical support and guidance provided by the GIHA Working Group to strengthen gender integration in the humanitarian response, key challenges remain—particularly in translating coordination efforts into strategic-level influence. The link between the technical contributions of the GIHA WG and GenCAP—particularly through engagement in ICCG meetings and support to clusters—and the strategic decision-making processes of the Humanitarian Country Team (HCT) remains weak limiting the extent to which gender considerations effectively inform high-level humanitarian planning and priorities. The HCT does not have a Gender Strategy. However, the GIHA WG developed its action plan and reported on it to the HCT, which endorsed it. A seat was secured for a representative of a women's organization at the HCT, in line with the IASC Gender Policy.
2. The composition of the GIHA Working Group includes representatives from UN agencies, INGOs, NGOs, and women's organizations with varying levels of expertise and commitment to gender in humanitarian action. This has sometimes resulted in low and passive participation in coordination meetings, with the bulk of responsibilities falling on the co-chairs—often in addition to their core functions. Additionally, weak or inconsistent engagement of clusters' gender focal points—combined with capacity gaps and the absence of gender focal points in some clusters—continues to undermine the gender responsiveness of humanitarian interventions.
3. The limited gender expertise within the humanitarian coordination system has contributed to reduced visibility of gender issues, resulting in varying levels of commitment and accountability from clusters and heads of agencies in advancing gender equality in humanitarian action. Additionally, reduced capacities of implementing partners on gender across sectors significantly hindered the operationalization of gender responsive humanitarian interventions and the follow up of RGA recommendations.
4. Another persistent challenge is the limited structured engagement of local women's organizations in formal humanitarian coordination mechanisms including in clusters and working groups meetings as well as in sectoral and inter-agency needs assessments. These organizations often lack funding, technical capacity, and familiarity with humanitarian coordination structures to engage meaningfully. Moreover, there are varying levels of capacity and engagement within the humanitarian coordination system among WLOs/WROs, with notable differences between women-led, feminist, and local organizations working on gender-related issues.

### RECOMMENDATIONS

1. **Strengthen the strategic influence of the GIHA WG through:**
  - the establishment of a formal mechanism for systematic integration of GIHA WG inputs into HCT decision-making, such as a standing HCT agenda item on gender or a requirement for gender analysis to inform all strategic discussions;
  - advocacy for explicit HCT commitments to gender equality with follow-up monitoring against agreed benchmarks.
2. Secure dedicated coordination capacity and resources: mobilize funding for dedicated GIHA capacity, including Information Management capacity, to strengthen gender data collection and analysis, coordination and capacity building and secure a GIHA operational budget to support implementation of the work plan (UN Women, OCHA, HCT members).
3. Strengthen participation of Women-Led and Women's Rights Organizations (WLOs/WROs) in humanitarian coordination through provision of direct funding to women's organizations in particular through Country-Based Pooled Fund managed by OCHA or other funding streams for local organizations. Addressing the capacity gaps of WLOs/WROs is essential for advancing a more locally driven, inclusive, and gender-transformative humanitarian response in Mozambique. Sustained support—including training, resources, and mentorship—should be provided through a coordinated inter-agency effort, rather than relying solely on the limited capacity of the GIHA Working Group co-chairs.
4. Develop and adopt an HCT Gender Strategy, endorsed by the Humanitarian Coordinator and the HCT, accompanied by a concrete implementation plan with defined responsibilities, milestones, and monitoring mechanisms, to advance Gender in Humanitarian Action commitments and reinforce leadership attention and accountability across the humanitarian response



**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>YES</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>YES</b>		<b>YES</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>30%</b>		<b>YES</b>		<b>NO</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>NO</b>		<b>YES</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support · Gender analysis · Gender equality strategy · Gender mainstreaming
<b>YES</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>YES</b>		<b>NO</b>	

# MYANMAR

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

Strong partnership with the MHF, resulting in increased allocation to 1M USD for WLOs/WROs and the inclusion of two WLOs/WROs in the MHF Advisory Group. Knowledge management strengthened through a dedicated online platform in MIMU. UNFPA and UN Women Country Representatives in the HCT acting as gender champions. HCT Gender Mainstreaming Guidance Note developed.

WLOs included in the Protection Strategic Advisory Group. Gender analysis and situation reports produced for sudden-onset emergencies. Strong gender technical support in the ICCG, resulting in gender integration across HCT documents. Annual HNO process with WLO/WRO and OPD consultations to inform the HNRP.

### GAPS + CHALLENGES

Fast turnover of GFP in clusters. With the reset coordination review, global cluster TORs emphasis on dedicated Gender Focal Points with specific roles and responsibilities.

2 Women CSOs in the HCT membership, passive participants trust building and skills building needed to be reinforced.

### RECOMMENDATIONS

For WCSOs leadership, support/fund = trust building; safety and security-access, risk sharing as frontliners; increased capacity.

- Increase technical upgrading for GiHA WG leads, technical level not CR/CD levels.

- Fund data analysis activities.
- HCT to report on IASC GEEWG in Humanitarian Action status of implementation/updates. Global clusters to do the same.



**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>YES</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>YES</b>		<b>YES</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>80%</b>		<b>YES</b>		<b>N/A</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support • Gender analysis • Gender equality strategy • Gender mainstreaming
<b>YES</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>NO</b>		<b>YES</b>	

# NIGER

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

Recognition of the GiHA mandate within the humanitarian architecture of Niger. Gender is thus a cross-cutting theme within the HCT, the ICCG, clusters and other working groups, which implies more commitment to gender in the humanitarian response.

Improvement of HNRP data quality (data disaggregation) and gender sensitive programming. The priority needs of women and girls are thus better taken into account and WRO/WLO are involved in the community consultation process for the development of the HNRP.

Access granted for WRO/WLO and UN Women within the HCT of Niger. What allows them firstly to lead

the advocacy for women's access to humanitarian coordination mechanisms and secondly to influence the access to humanitarian funds for female CSOs (about 2% of HNRP funds went to female CSOs in 2023-2024)

Capacity building of the humanitarian community on gender in humanitarian action involving more sensitive gender projects in HNRP. Consistency in the functioning of the GiHA WG with an annual work plan, monthly statutory meetings and an ever increasing number of HWG members.

### GAPS + CHALLENGES

The sustainability of the achievements of the GiHA WG with regard to the sensitivity of gender issues in the new context of Niger, with cultural sensitivity, the non-prioritization of gender issues, the reduction of humanitarian funding, the pooling of AAP-CEA-Gender and Location WG in the new humanitarian architecture of Niger underway, risk leading to a setback of gains in terms of gender in the humanitarian action and especially mortgage the functioning of the GiHA Subnational WG of the regions of Diffa, Tahoua and Maradi.

The non-finalization of the gender strategy of the HCT to mark its commitments with relevant means of monitoring. The gender accountability of the HCT thus risks not being effective or lacking tangible evidence for the effective consideration of gender in the HNRP.

Improving the participation of local women's rights organizations and women-led organizations in the humanitarian programme cycle and decision-making and response processes remains challenging with lack of funding for the organizations of civil society (by sector).

### RECOMMENDATIONS

Taking gender into account in humanitarian action requires more commitment from the Humanitarian Coordinator at the forefront to sustain the achievements of the GiHA WG by improving the integration of gender in HPC in Niger, the participation of women's CSOs in coordination mechanisms, the optimal use of GiHA WG resources (GenCap, gender focal points) within the HCT.

The consideration of gender in all sectors and clusters of the ICCG as part of the planning process of the HNRP must be systematized with the development of rare knowledge, the development and implementation of sensitive gender tools (Gender assessment, rapid

gender intervention plan, sex-disaggregated data, GAM, gender alerts, etc.) and management of gender sensitive information.

The GiHA needs to have a greater place within the HCT to present its work plan, officially report on the revision of the project GAM and track funding in FTS.

The mobilization of humanitarian actors for the financing of gender issues in humanitarian action should be mandatory through synergies, the matrix of gender interventions by actors and by locality(4W), the inventory of available gender expertise in the country to support for HNRP.

# OCCUPIED PALESTINIAN TERRITORY

## 2024 Country Level Snapshot

ACHIEVED  NOT ACHIEVED 

INDICATORS ACHIEVED: **33%**  
4/12

**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

### INDICATOR 1.1

NO

Gender Analysis conducted & shared

For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click [HERE](#). For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

### INDICATOR 2.1

0%

% of clusters in HNRP using SADD (at least 75% required)

### INDICATOR 2.2

NO

HNRP demonstrates Gender Analysis (all 3 criteria required to be met)

### INDICATOR 2.3

NO

Clusters integrating gender into humanitarian response (2 criteria - both required)

### INDICATOR 2.4

75%

% of clusters in HNRP using SADD (at least 75% required)

### INDICATOR 2.7

N/A

Gender-responsive multi-cluster needs assessments

### INDICATOR 2.8

N/A

GiHA Working Groups in JIAF process

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

### INDICATOR 3.1

NO

HCT/ICCG engagement with crisis-affected women and girls

### INDICATOR 3.2

NO

HCT with WLO membership

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

### INDICATOR 5.1

YES

Setting has a functional GiHA Working Group (3+ criteria required to be met)

### INDICATOR 5.2

YES

GiHA Working Groups with WLO membership

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

### INDICATOR 8.2

NO

Senior gender advisory capacity

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

### INDICATOR 9.1

YES

HCT Gender Strategies with WLO engagement

### INDICATOR 9.2

NO

HCT consultations with GiHA Working Group

# OCCUPIED PALESTINIAN TERRITORY

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

Despite extreme conditions, including airstrikes, mass displacement, movement restrictions and the collapse of basic infrastructure, many GiHA Working Group members, particularly WLOs/WROs, remained engaged, often joining meetings from temporary shelters. Co-chaired by UN Women and OCHA, the GiHA Working Group convened five meetings with 31 members, including WLOs/WROs who provided vital frontline insights on the situation of women and girls in Gaza and the West Bank. The GiHA Working Group supported WLO/WRO participation in global advocacy platforms, including the 2024 Humanitarian Networks and Partnerships Week and an OCHA virtual briefing, where representatives

highlighted the gendered impacts of the crisis. To improve access to humanitarian funding, the GiHA Working Group organized a briefing on OCHA Humanitarian Fund procedures and enabled two WLO/WRO representatives to join project vetting committees, helping to ensure gender-responsive programming. Additionally, the GiHA Working Group facilitated capacity-strengthening sessions for Cluster Gender Focal Points and WLOs/WROs, reaching 27 participants. These sessions focused on applying gender analysis and incorporating sex, age and disability disaggregated data into humanitarian planning and decision-making.

### GAPS + CHALLENGES

The HCT's limited engagement impacted efforts to advance gender-responsive humanitarian action, despite endorsing the 2023 GiHA Accountability Framework. Through sustained advocacy, the GiHA Working Group secured the inclusion of a dedicated section on the impacts of the crisis on women and girls in the 2025 Flash Appeal; however, the appeal lacked a robust gender analysis and omitted sex, age and disability disaggregated data. WLOs/WROs remained largely excluded from coordination structures outside the Protection and GBV sectors. In Gaza, WLOs/WROs continued operating under extreme conditions, including office destruction, staff displacement, insecurity, electricity outages, inflated cash commission rates, and disrupted internet access.

Across Gaza and the West Bank, chronic underfunding further jeopardized their sustainability – WLOs/WROs received just 0.2% of oPt humanitarian funding in 2024 – severely limiting their ability to deliver lifesaving services. UN Women also faced major constraints, including high staff turnover and restricted in-country presence due to Israeli visa limitations. As a result, the GiHA Working Group convened only 5 of its 12 planned meetings and functioned primarily as an information-sharing platform, rather than a coordinated response mechanism. Despite these obstacles, the GiHA Working Group continued to advocate for gender-responsive action and meaningful WLO/WRO participation in humanitarian decision-making..

### RECOMMENDATIONS

1) Strengthen HCT and ICCG leadership on gender equality: Reaffirm HCT and ICCG commitment through visible leadership and accountability by influencing discussions on the Humanitarian Reset and revising and reissuing the GiHA Accountability Framework with SMART indicators and clear targets. Develop a GiHA Monitoring Dashboard and produce regular scorecards to track progress and provide actionable recommendations. 2) Promote WLO/WRO leadership in coordination structures: Conduct a survey to establish a baseline for WLO/WRO participation and inform the creation of a Humanitarian Partners Directory. Identify capacity gaps for targeted support. Deliver a presentation to the HCT on WLO/WRO leadership and develop a policy paper on Women-Led Reconstruction,

Recovery and Peacebuilding. 3) Improve access to quality funding: Support WLOs/WROs to directly access OCHA Humanitarian Fund allocations. Advocate for simplified grant processes and convene a high-level roundtable with the HCT and donors to push for increased, direct, and predictable WLO/WRO funding. 4) Strengthen cluster gender capacity: Promote the use of gender analysis and sex, age and disability disaggregated data in assessments, response strategies, monitoring and reporting. 5) Strengthen GiHA Working Group coordination: Hold regular, well-structured meetings with clear agendas, minutes, and updated contacts. Revise the Terms of Reference and develop an annual work plan to guide collective action. Support greater leadership and participation of WLOs/WROs.



**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

**INDICATOR 1.1**

NO

Gender Analysis conducted &amp; shared

For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click [HERE](#). For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

**INDICATOR 2.1**

100%

% of clusters in HNRP using SADD (at least 75% required)

**INDICATOR 2.2**

YES

HNRP demonstrates Gender Analysis (all 3 criteria required to be met)

**INDICATOR 2.3**

YES

Clusters integrating gender into humanitarian response (2 criteria - both required)

**INDICATOR 2.4**

33%

% of clusters in HNRP using SADD (at least 75% required)

**INDICATOR 2.5**

N/A

Gender-responsive multi-cluster needs assessments

**INDICATOR 2.8**

N/A

GiHA Working Groups in JIAF process

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

**INDICATOR 3.1**

YES

HCT/ICCG engagement with crisis-affected women and girls

**INDICATOR 3.2**

YES

HCT with WLO membership

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

**INDICATOR 5.1**

YES

Setting has a functional GiHA Working Group (3+ criteria required to be met)

**INDICATOR 5.2**

YES

GiHA Working Groups with WLO membership

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

**INDICATOR 8.2**

YES

Senior gender advisory capacity

**INDICATOR 8.3**

Nature of support requested by HCT (top 3)

## Type of Support

- Gender analysis
- Gender equality strategy
- Gender mainstreaming

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

**INDICATOR 9.1**

NO

HCT Gender Strategies with WLO engagement

**INDICATOR 9.2**

YES

HCT consultations with GiHA Working Group

# PAKISTAN

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

Strengthened Coordination and Leadership: The GiHA Working Group remained active throughout 2024, maintaining strong linkages with the Humanitarian Country Team (HCT), Inter-Cluster Coordination Group (ICCG), Assessment Working Group (AWG), and sectoral working groups. The platform enabled joint efforts among NDMA, PDMA, UN agencies, INGOs, NGOs, and women-led organizations (WLOs) to mainstream gender in response and preparedness planning.

**ii. Gender Integration in the Refugee Response Plan (RRP):** The 2024 Refugee Response Plan for Afghan refugees featured gender analysis dynamics and sector-specific actions to address the differentiated needs of women, girls, men, and boys. The efforts are also informed by an inter-agency GBV needs assessment

and exemplified good practice in gender-responsive humanitarian planning.

**iii. Access to Senior Gender Technical Capacity:** UN Women and the GiHA Working Group provided consistent access to senior gender expertise, supporting the HCT through inter-sectoral coordination. However, the need for a more formalized and dedicated technical gender seat within the HCT structure remains.

**iv. Meaningful Engagement with Women-Led Organizations:** The GiHA Working Group expanded its membership of WLOs from four in 2023 to eleven in 2024. WLOs contributed meaningfully to policy dialogue, informal analysis, and contingency planning, reinforcing the relevance and inclusion of gender-responsive coordination efforts.

### GAPS + CHALLENGES

**i. Absence of a Stand-Alone Gender Equality Strategy or Equivalent Document:** Despite existing frameworks referencing gender and GiHA work plan, the HCT lacks a dedicated, endorsed strategy to operationalize gender equality systematically. This requires advocacy, consensus and funding support.

**ii. Inconsistent Gender Focal Points Across Clusters:** Not all sectors have designated or capacitated gender focal points, resulting in uneven integration of gender in planning and implementation. This challenge exist due to under-prioritization by the sectors, however, advocacy and consistent engagement is the way forward to resolve this issue.

**iii. Limited Information Sharing on Gendered Response and Disaggregated Data:** Collection and use of sex and age disaggregated data (SADD) is managed by UNOCHA, while sectors report using SADD. However, limited information sharing on gendered response and lack of formalized systematic disaggregated collection affects evidence-based gender programming and consequent resource mobilization.

**iv. Underrepresentation of WLOs in Strategic Forums:** Although engaged in consultations, WLOs are not formally represented in key decision-making platforms such as the HCT, limiting their influence on strategic processes. This is attributed by limited funding, lack of capacity and information sharing.

### RECOMMENDATIONS

**1. Advocate for a gender strategic guidance/document for HCT:** The HCT should adopt a gender-focused strategic guidance document that may include a stand-alone gender strategy, Gender Task Force/GiHA ToRs or a broader framework with clear objectives, accountability mechanisms, and measurable outcomes institutionalizing the role of WLOs and aligned with the broader humanitarian coordination framework.

**2. Institutionalize Gender Focal Points in All Clusters:** Each sector or working group must nominate and capacitate gender focal points with clear terms of reference, dedicated time allocation, and regular capacity development facilitated by the GiHA WG.

**3. Formalize WLO Participation in Strategic Coordination:** WLOs should be formally integrated into the HCT coordination structure, potentially through a dedicated technical gender seat linked to GiHA. Tools and approaches should be adapted to local contexts to ensure meaningful engagement. Increased engagement and effective participation of WLOs in GiHA will support joint voicing out.

**4. In 2024, the GiHA Working Group strengthened inclusive coordination and strategic partnerships, despite the absence of a major crisis.** The IASC Gender Accountability Framework consultation reinforced the need for integrated and equitable action. GiHA remains committed to centering the rights and leadership of women and girls in Pakistan's humanitarian efforts.



**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>NO</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>NO</b>		<b>NO</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>0%</b>		<b>YES</b>		<b>NO</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support . Gender analysis . Gender equality strategy . Gender mainstreaming
<b>NO</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>NO</b>		<b>NO</b>	

# SOMALIA

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

1. The establishment of the GiHA Working Group by HCT was a milestone for gender integration, creating a platform for coordination, technical guidance, and planning, improving accountability and coherence.
2. The advocacy role of SoDMA as co-chair strengthened national ownership, aligned government priorities, and promoted stronger linkages with national coordination structures.
3. Integration of gender in inter-agency assessments and planning, including the Somalia Humanitarian Needs Overview (HNO), strengthened the evidence base for gender-responsive programming and improved accountability. As a result of these efforts, SADD was integrated into at least 75% of sectors/clusters in the 2025 HNRP, demonstrating progress in data disaggregation and gender-responsive planning.
4. Collaboration with the Disability Inclusion and Human Rights Working Groups created synergies to address intersecting vulnerabilities and promote joint training.
5. Positioning GiHA closer to grassroots platforms and deliberately including Women-Led Organizations (WLOs) enhanced participation and leadership, ensuring diverse perspectives shaped decision-making.
6. Targeted capacity-building for 30 members, including civil society, women-led, and national organizations, strengthened understanding of gender dynamics and reinforced impact.
7. Regular monthly coordination meetings, documented with minutes and action points, provided consistency, accountability, and a platform for joint problem-solving on gender equality.

### GAPS + CHALLENGES

- **Coordination Gaps:** The GiHA WG became fully operational in 2025, but its late establishment in mid-2024 caused delays in onboarding, capacity-building, and early engagement. Limited participation of women-led organizations in the HCT also reduced the diversity of perspectives in high-level coordination.
- **Lack of Dedicated Gender Capacity:** The absence of a GenCap advisor throughout 2024 weakened strategic guidance on gender integration. Support from the ProCap advisor focused mainly on protection, leaving a gap in sustained technical expertise for gender equality.
- **Contextual Barriers:** Shrinking humanitarian space, competing priorities, and funding pressures have led to “gender pushback,” where equality is deprioritized for immediate needs. This slowed progress and limited investment in women-led leadership.
- **Weak Localization:** Despite collaboration, localization remains uneven. Many WLOs lack predictable resources and support, limiting consistent engagement in planning.
- **Cluster Capacity Gaps:** Several clusters lack trained gender focal points and systematic use of gender markers, causing inconsistent integration.
- **Weak Accountability:** Limited monitoring tools and weak enforcement mechanisms undermine follow-up, leaving gaps between commitments and practice..

# SOMALIA

## Successes, Gaps/Challenges & Recommendations

### RECOMMENDATIONS

- In the immediate term, engagement between the HCT and the GiHA Working Group should be strengthened over the next six months to ensure closer alignment with the IASC Gender Policy and stronger integration of gender perspectives in coordination and planning.
- Given Somalia's low ranking on the global gender index, deployment of a dedicated GenCap advisor is critical. Embedded within the HCT during the next planning cycle, this advisor would provide sustained senior-level guidance and align the humanitarian response with global standards.
- To advance localization, a comprehensive mapping of women-led and women's rights organizations (WLOs/WROs) should be completed within six months, enabling their systematic inclusion in coordination platforms. Building on this, an advisory board should be established to ensure structured WLO/WRO representation in the HCT, amplifying local voices, promoting accountability, and ensuring decision-making reflects both national and community perspectives.
- Targeted capacity-building for WLO and WRO executives on GiHA principles and humanitarian coordination should be rolled out within 12 months to strengthen leadership, enhance technical expertise, and enable effective participation in planning, advocacy, and monitoring.
- Greater involvement of government institutions is essential to anchor gender integration within national systems. Combined with targeted capacity-building on gender in humanitarian action, this will strengthen alignment with national policies, improve accountability, and enhance sustainability of gender-responsive programming.
- Clusters should institutionalize gender focal points and systematically apply the IASC Gender with (GAM) across projects in the next response cycle to ensure accountability in design and reporting.
- Expanding gender-responsive data collection and analysis, including regular Rapid Gender Analyses, should be prioritized within six months to strengthen evidence-based planning and avoid overlooking marginalized groups.
- Dedicated advocacy with donors is needed to secure earmarked resources for gender and GBV programming, with biannual donor briefings sustaining visibility and momentum despite funding constraints.

# SOUTH SUDAN

## 2024 Country Level Snapshot



ACHIEVED

NOT ACHIEVED

INDICATORS ACHIEVED: **30%**  
3/10

**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
NO		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
33%		NO		NO	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
33%		N/A		N/A	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
YES		YES	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
NO		N/A	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support · Gender analysis · Gender equality strategy · Gender mainstreaming
YES		Nature of support requested by HCT (top 3)	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
NO		N/A	

# SOUTH SUDAN

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

Two gender assessments were completed and published, to contribute valuable data to humanitarian planning. The data plays a critical role in informing humanitarian interventions. It helps identify who is most at risk, what barriers different groups face, and how resources can be distributed more fairly. By using sex-, age-, and diversity-disaggregated data (SADDD), humanitarian actors can design targeted responses that protect vulnerable populations, promote inclusion, and improve accountability.

One GiHA training was conducted, with a previously trained Women-Led Organization (WLO) serving as a co-facilitator demonstrating growing leadership and capacity among local actors. GiHA trainings are essential for building the knowledge and skills of humanitarian actors especially Women-Led Organizations (WLOs) to integrate gender perspectives into emergency planning

and response. These trainings equip participants with tools to understand how crises affect women, men, girls, and boys differently, and how to design programs that address those specific needs. When WLOs are trained and empowered to lead or co-facilitate these sessions, it strengthens local ownership and ensures that gender equality is not just a policy goal but a lived practice in humanitarian settings

UN Women actively participated in Humanitarian Country Team (HCT) meetings, ensuring gender issues were considered in high-level decision-making. Following a meeting with OCHA, UN Women was tasked with leading the development of an HCT Gender Strategy. A Terms of Reference (TOR) has been developed to recruit a consultant, and the GiHA Working Group will monitor progress to ensure accountability.

### GAPS + CHALLENGES

Due to limited funding, the humanitarian team remains small, with only one or two staff managing multiple responsibilities. This same team also coordinates broader UN System efforts, including the Gender Theme Group (GTG) and the UNCT SWAP Scorecard process. From 2015 to 2021, UN Women led coordination of the cluster gender focal points in partnership with OXFAM, CARE, and OCHA.

However, this structure was halted in 2021 and replaced by the Gender and Inclusion Task Force, chaired by UNFPA and WFP, with UN Women continuing to participate as a member. While the task force made progress, its discontinuation and the absence of a dedicated GiHA coordination structure have affected continuity and the integration of gender into humanitarian planning.

### RECOMMENDATIONS

- Re-establish a dedicated GiHA Working Group to serve as an advisory body to the Humanitarian Country Team (HCT) and Inter-Cluster Coordination Group (ICCG), particularly during the Humanitarian Program Cycle. This group should lead GiHA trainings, support gender-responsive assessments, and hold humanitarian actors accountable. UN Women, OCHA should jointly support its coordination.
- Increase leadership by Women-Led Organizations (WLOs) in GiHA trainings, gender assessments, and participation in coordination platforms. Strengthening WLO engagement will promote inclusive decision-making and local ownership. (Led by UN Women)
- Develop and maintain a centralized gender data base compiling key research, assessments, and analysis from various sources. This will improve access to gender evidence and support informed humanitarian planning.
- Support the development of an HCT Gender Strategy with clear actions, responsibilities, and monitoring mechanisms. The strategy should ensure humanitarian responses are inclusive, equitable, and address gender-specific needs, while promoting gender equality and accountability among humanitarian actors.



**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>YES</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>NO</b>		<b>YES</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>75%</b>		<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>NO</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support . Gender analysis . Gender equality strategy . Gender mainstreaming
<b>YES</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>NO</b>		<b>YES</b>	

# SUDAN

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

Sudan has made important progress in institutionalizing gender coordination despite an extremely volatile humanitarian environment. The Gender in Humanitarian Action Working Group, established in April 2024, is now fully functional, meeting monthly and maintaining formal reporting lines to both the ICCG and the HCT. Membership has grown to 47 organizations, including 30 women-led organizations (WLOs), ensuring that local women's voices directly shape operational and strategic decision-making. The HCT Sudan Women's Advisory Group (WAG) now provides structured engagement

between WLOs, the HCT, and ICCG, strengthening accountability and two-way communication.

Gender analysis has also been increased, consistently produced and shared with coordination bodies—including Gender Alerts and Gender Snapshots and thematic analysis on food insecurity, displacement, and protection—which have informed inter-sectoral planning. The use of sex- and age-disaggregated data (SADD) across all clusters in the 2025 HNRP marks a further step toward institutionalized gender integration.

### GAPS + CHALLENGES

Despite this progress, the link between gender analysis and operational planning remains weak. The 2025 HNRP included a cross-cutting issues section but did not fully translate published gender analysis into measurable targets, budgets, or protection outcomes for women and girls that were monitored. While SADD targets are reflected in the plan, the monitoring system through ActivityInfo makes no effort to capture people reached by gender or age, falling short of the minimum SADD reporting standards.

Several key gender questions—particularly on menstrual hygiene management (MHM) and gendered barriers to

access—were refused inclusion in the Multi-Sector Needs Assessment (MSNA) limiting the depth and quality of gender-responsive data collection. The decline in cluster-level gender focal points, particularly in Shelter and WASH, Protection and Child Protection, has also reduced the consistency of gender mainstreaming across technical coordination. Finally, insecurity and intimidation of WLOs continue to restrict their operational space and participation in subnational coordination fora, particularly in Darfur, Kordofan, and Blue Nile that should be directly addressed and considered in operational and coordination efforts.

### RECOMMENDATIONS

- Institutionalize gender equality and WLO participation in HCT decision-making.** The HCT should formally include the Women's Advisory Group in the review and endorsement of strategic documents (HNRP, advocacy statements, and funding priorities), ensuring WLO inputs are systematically reflected in outcomes and decisions.
- Establish a regular accountability mechanism to track HCT gender commitments.** The HCT should adopt a biannual review of progress on gender integration and WLO engagement using the Gender Accountability Framework as a reference, supported by GiHA and OCHA. This review should be minuted and shared with the IASC GenCap team.
- Ensure gender analysis and WLO perspectives shape humanitarian advocacy and access negotiations.** The HCT should commit to using data and testimonies generated by WLOs (through the WAG and GiHA) to inform collective advocacy—particularly on protection of civilians, humanitarian access, and GBV/CRSV risks—and ensure these are integrated into the HC's global and donor messaging.
- Allocate predictable resources to sustain women-led participation in coordination and delivery.** The HCT should recommend that pooled fund partners (e.g., SHF, CERF) allocate at least 15% of total allocations to WLOs, including funding for participation costs, institutional strengthening, and operational safety measures.
- Link HCT-level commitments to subnational action.** Establish a feedback loop between the HCT and subnational coordination hubs to ensure WAG and WLO inputs inform field-level planning, cluster operations, and monitoring. GiHA WG and OCHA should co-lead this linkage.
- Integrate gender accountability into the HCT compact and senior leadership performance.** Gender equality and WLO engagement should be reflected as explicit performance indicators in the HC Compact and in HCT members' annual accountability frameworks, reinforcing leadership accountability for results on gender integration.



ACHIEVED

NOT ACHIEVED

**INDICATORS ACHIEVED: 38%**  
5/13

**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
NO		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
N/A		NO		NO	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
100%		YES		NO	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
YES		NO	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
YES		NO	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support . Gender analysis . Gender equality strategy . Gender mainstreaming
YES		Nature of support requested by HCT (top 3)	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
NO		NO	

# SYRIAN ARAB REPUBLIC

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

One of the key achievements has been the consistent and high-quality technical support provided to clusters and the Syria Cross-border Humanitarian Fund (SCHF), facilitated by experienced and committed gender focal points. The GIHA Working Group brought together representatives from clusters, SCHF, and key donors, fostering a collaborative and inclusive coordination platform.

The GIHA Working Group spearheaded several joint initiatives with thematic groups and relevant clusters. Notably, it co-led the 16 Days of Activism Against Gender-Based Violence campaign in partnership with the GBV Area of Responsibility (AOR). Another milestone

was the joint training conducted with AAP, PSEA, and Inclusion actors, which significantly strengthened the integration of these critical issues into humanitarian programming in Syria.

The group also successfully engaged women-led organizations (WLOs), culminating in the election of a WLO representative as co-chair of the GIHA Working Group. WLOs were supported in conducting outreach to other WLOs outside the formal coordination structures, ultimately leading to the establishment of a dedicated platform for Syrian WLOs to enhance their representation and advocacy efforts.

### GAPS + CHALLENGES

A major challenge has been the inconsistent integration of gender considerations into the Humanitarian Programme Cycle (HPC). Limited funding and the absence of dedicated gender experts have constrained the group's ability to engage meaningfully in key processes such as the Multi-Sector Needs Assessment (MSNA), Joint Intersectoral Analysis Framework (JIAF), cluster response

planning, and the development of the Humanitarian Response Plan (HRP).

Another critical gap was the lack of WLO representation in high-level coordination bodies. Neither the Humanitarian Country Team (HCT) in Damascus nor the Humanitarian Leadership Group (HLG) in the cross-border operation included WLO members, limiting the inclusivity and diversity of decision-making processes.

### RECOMMENDATIONS

- Sustain the GIHA coordination mechanism in Syria, ensuring active participation from UN agencies, INGOs, NNGOs, and WLOs.
- Ensure WLO are represented in decision-making forums, such as the HCT and the SHF Board Committee.
- Increase visibility of WLOs in humanitarian action and support opportunities for dedicated funding.
- Set up gender focal points by sectors and ensure capacity strengthening across sectors on gender analysis and gender-responsive planning.
- Implement comprehensive capacity-building programs for frontline responders and humanitarian actors to strengthen gender mainstreaming.
- Enhance support to the HPC process by ensuring access to gender data, gender analysis by sector and how to use it strategically.
- Lead joint initiatives to generate and analyze gender-disaggregated data to inform evidence-based programming.



**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>YES</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>YES</b>		<b>NO</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>100%</b>		<b>YES</b>		<b>NO</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support • Gender analysis • Gender equality strategy • Gender mainstreaming
<b>YES</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>NO</b>		<b>NO</b>	

# UKRAINE

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

#### Coordination

The GiHA Working Group (GiHA WG) has become a cornerstone of humanitarian coordination, bringing together over 400 members, including more than 100 women's rights organizations (WROs) alongside UN agencies, INGOs, and national CSOs.

One of the co-chairs of the GiHA WG is NGO Girls, a Ukrainian women's rights organization that has grown from a local initiative into a national actor with the capacity to advance gender-sensitive localization efforts across Ukraine.

Dedicated task forces of GiHA WG on Gender Analysis, Capacity Strengthening, and Funding ensured structured engagement of WROs/WLOs on critical aspect of the response on data coordination, capacity strengthening and advocacy.

Regional GiHA WGs in Poltava and Zaporizhzhia, co-chaired by local WROs, provide localized coordination platforms, enabling grassroots perspectives to shape both humanitarian and recovery planning..

### GAPS + CHALLENGES

Advocating for SADD indicators in the Ukraine HNRP remains challenging. Unlike other contexts where basic sex- and age-disaggregated data quickly reveal gaps, in Ukraine gender differences are often less visible at a single-layer level. It risks sending the wrong message that gender analysis is unnecessary, when in fact more complex intersectional data are needed to uncover disparities. Such analyses require higher levels of gender expertise and sustained capacity-building.

Therefore, while all clusters disaggregated demographic figures by sex, age, and disability, the use of this data often stopped at the most basic level. In many cases, SADD was reported but not linked to actual needs analysis or programming objectives, limiting its value for decision-making. Intersectional analysis – for example, examining the specific experiences of women with disabilities, Roma women, or older men – was largely absent, meaning that critical nuances of vulnerability and capacity were overlooked.

Most cluster gender focal points carry these responsibilities alongside other roles, leaving them overstretched. Without dedicated positions, gender integration risks being partial, while the double burden reflects broader systemic inequalities. Strengthening dedicated expertise and resourcing including dedicated funding is therefore critical to ensure meaningful gender-responsive planning in Ukraine.

Although UN Women and GiHA WG co-chairs regularly engage WROs and WLOs, the GiHA WG did not have

access to the Inter-Agency Cluster Coordination Group (ICCG) until November 2024, as this role had previously been undertaken by GenCAP. Engagement with the HCT has so far been limited, mainly through consultation meetings with Roma and LGBTIQ+ organizations. The last dedicated HCT consultation with WROs/WLOs took place in 2023, and since then no further consultations have been organized. Moreover, the HCT does not yet have a clear strategy for structured engagement with WROs/WLOs. Two WROs, including NGO Girls and Ukrainian Foundation for Public Health served members of the HCT in 2024 although these organizations were not selected based on their WROs status rather based on local CSO status. Following the humanitarian reset and reprioritization, the HCT has tasked the GiHA WG to develop a joint approach on cross-cutting issues with other working groups to inform HNRP 2026.

Participation emerged as one of the weakest aspects across clusters for WROs especially. A number of clusters is limited in having a clear mechanism for engaging affected women, WROs, or marginalized groups.

Although the response demonstrates good practice in adapting interventions for people with disabilities, references to tailoring responses to gender and age were inconsistent. In several instances, language on GBV risk mitigation or gender-sensitive targeting remained generic and lacked operational detail, reducing its practical impact on programming.

# UKRAINE

## Successes, Gaps/Challenges & Recommendations

### RECOMMENDATIONS

#### Humanitarian Country Team

- The HCT to exercise its oversight role by systematically reviewing cluster performance on gender equality, with the GiHA WG providing technical support to the HCT and ICCG in fulfilling this responsibility.
- The HCT to engage systematically with WROs, WLOs, LGBTIQ+ organizations, Roma organizations, and organizations of persons with disabilities (PwDs) with regularized meetings to ensure that the HNRP 2026 reflects the needs and priorities of all affected groups.
- Invite the GiHA WG to HCT meetings on a quarterly basis to provide updates on progress, challenges, and key recommendations for advancing gender equality in humanitarian response.

#### OCHA and Humanitarian County Team

- Develop a roadmap for the engagement of local GiHA Working Groups with Area-Based Coordination structures to ensure consistent gender-responsive planning at subnational levels.

- Ensure that funding including the funding through Ukraine Humanitarian Fund (UHF) for WLOs, WROs, and gender-targeted programming is consistently tracked, monitored, and reported to strengthen accountability and transparency.

#### OCHA and the Humanitarian Community

- Qualitative Gender, Age, Disability Data Collection as well Qualitative Indicators for HNRP activities should be prioritized to inform gender-sensitive/responsive programme design.

#### UN Agencies, NGOs, and Clusters

- Ensure that Cluster Gender Focal Points are adequately resourced to work with the GiHA WG on advancing gender integration within HNRP 2026 priority areas, or lead discussions on alternative mechanisms for gender mainstreaming across all clusters in line with the humanitarian reset.



ACHIEVED

NOT ACHIEVED

**INDICATORS ACHIEVED: 93%**  
13/14

**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>YES</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>YES</b>		<b>YES</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>71%</b>		<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support • Gender analysis • Gender equality strategy • Gender mainstreaming
<b>YES</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>YES</b>		<b>YES</b>	

# VENEZUELA

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

- Advocacy by WLOs/WROs within the HCT.
- Advocacy within the HRP for the prioritization of WLOs/WROs, as well as for the thematic prioritization of the differentiated needs of women and girls in humanitarian funding (allocated funds in the HRP).
- Designation of a donor focal point within the GiHA Working Group.
- Capacity strengthening, mentorship for organizations, and development of specialized tools by sector (e.g., checklists).
- Promotion of gender-responsive approaches in information products.
- Gender indicators for monitoring the humanitarian response.
- Work plan for gender focal points to ensure gender mainstreaming across clusters and the HCT.
- 3,047 individuals and key stakeholders participated in gender analysis processes that informed humanitarian programming between 2024 and 2025.
- 36,607 individuals from communities, organizations, and institutions received key messages, awareness-raising, and capacity-building on gender equality, inclusion of LGBTIQ+ persons, and the empowerment of women and girls between 2024 and 2025.

### GAPS + CHALLENGES

- Global deprioritization, both thematically and in funding allocations.
- Operational downsizing, closure of programs, and discontinuation of specialized services.
- Impact of the NGO Law and Resolution 010.25.
- Operational costs related to adaptation and coordination functions.

- Cultural barriers and discriminatory social norms, and the challenges in implementing an intersectional approach.
- Reporting on gender indicators and access to sex-, age-, and diversity-disaggregated data.
- Fostering a gender-sensitive organizational culture that goes beyond the role of gender focal points.

### RECOMMENDATIONS

- Continue prioritizing under CERF and the HRP those underfunded thematic areas, Women-Led Organizations (WLOs)/Women's Rights Organizations (WROs), and agencies with mandates on gender equality and gender-based violence (GBV).
- Whenever possible, directly or systematically integrate the activities recommended by the GiHA Working Group into the 2025 prioritization process (e.g., gender analysis and action plans, awareness-raising, and institutional capacity-building).
- Designate the remaining gender focal points to support the development of checklists, facilitate training sessions, and provide technical support in project review.
- Generate evidence on gender gaps, barriers, and strategies to reduce them, and establish mechanisms

- to measure the quality of gender-transformative interventions.
- Integrate gender-responsive and intersectional approaches into sectoral documents.
- Maintain the activation of the GBV AoR, PSEA Network, and the GiHA Working Group in line with IASC recommendations.
- Establish dedicated funding for gender coordination (including for WLO/WRO representatives and lead agencies).
- Advocate with donors to fund underfinanced areas such as gender equality, GBV, PSEA, sexual and reproductive health (SRH), and the empowerment of women and girls.



ACHIEVED

NOT ACHIEVED

**INDICATORS ACHIEVED: 55%**  
6/11

**PRIORITY AREA 1 COLLECTION & ANALYSIS:** Collect sex, age and disability disaggregated data to inform context-specific intersectional analyses and guide humanitarian planning, implementation, and monitoring processes. Conduct systematic rapid gender analysis at the beginning of a new crisis and as often as necessary (significant change in context, etc.).

<b>INDICATOR 1.1</b>	Gender Analysis conducted & shared	For additional details on the Gender Accountability Framework and its Priority Areas, Indicators and Criteria, please click <a href="#">HERE</a> . For complete country responses to the GiHA Working Group consultation, see Kobo Inputs PDF.
<b>NO</b>		

**PRIORITY AREA 2 PLANNING & CONSULTATION:** Ensure the prioritized response plan includes both gender targeted, and gender mainstreamed actions that meet the specific humanitarian needs of all women, girls, men and boys, as identified through the gender analysis and through consultation with the affected crisis affected population, including women and girls.

<b>INDICATOR 2.1</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.2</b>	HNRP demonstrates Gender Analysis (all 3 criteria required to be met)	<b>INDICATOR 2.3</b>	Clusters integrating gender into humanitarian response (2 criteria - both required)
<b>100%</b>		<b>YES</b>		<b>YES</b>	
<b>INDICATOR 2.4</b>	% of clusters in HNRP using SADD (at least 75% required)	<b>INDICATOR 2.7</b>	Gender-responsive multi-cluster needs assessments	<b>INDICATOR 2.8</b>	GiHA Working Groups in JIAF process
<b>11%</b>		<b>NO</b>		<b>N/A</b>	

**PRIORITY AREA 3 MEANINGFUL INCLUSION:** Meaningfully include crisis affected women and girls, persons with diverse SOGIESC, and the organisations representing them in the coordination decision-making processes for assessing, planning, implementing, monitoring and evaluation of humanitarian programming, as well as promote their inclusion in conflict prevention, resilience and peacebuilding efforts.

<b>INDICATOR 3.1</b>	HCT/ICCG engagement with crisis-affected women and girls	<b>INDICATOR 3.2</b>	HCT with WLO membership
<b>YES</b>		<b>YES</b>	

**PRIORITY AREA 5 GiHA WG ESTABLISHMENT:** Establish gender in humanitarian action (GiHA) working groups in each crisis context comprising representation from UN entities, INGOs, LNGOs (including local and national WLOs, WROs and organizations representing persons with disabilities and with diverse SOGIESC), clusters/sectors, local government etc.

<b>INDICATOR 5.1</b>	Setting has a functional GiHA Working Group (3+ criteria required to be met)	<b>INDICATOR 5.2</b>	GiHA Working Groups with WLO membership
<b>NO</b>		<b>N/A</b>	

**PRIORITY AREA 8 GENDER EXPERTISE:** Ensure adequate gender advisory capacity, (such as advisers deployed by the IASC Gender Capacity (GenCap) project, UN Women, UNICEF, and/or UNFPA) is in place to advise Humanitarian Coordinators (HCs), the HCT and inter-cluster coordination, including to facilitate compliance with the IASC's Gender Policy.

<b>INDICATOR 8.2</b>	Senior gender advisory capacity	<b>INDICATOR 8.3</b>	Type of Support . Gender analysis . Gender equality strategy . Gender mainstreaming
<b>YES</b>		<b>Nature of support requested by HCT (top 3)</b>	

**PRIORITY AREA 9 HCTs ADVANCING GEEWG:** Ensure HCTs have defined priorities and a plan on gender equality and GEEWG in place, either standalone or part of a comprehensive plan on cross-cutting thematic priorities, including strategies for engagement with local WLOs, WROs and organizations representing persons with disabilities and/or with diverse SOGIESC.

<b>INDICATOR 9.1</b>	HCT Gender Strategies with WLO engagement	<b>INDICATOR 9.2</b>	HCT consultations with GiHA Working Group
<b>NO</b>		<b>N/A</b>	

# YEMEN

## Successes, Gaps/Challenges & Recommendations

### SUCCESSES

- Advocacy by WLOs/WROs within the HCT.
- Advocacy within the HRP for the prioritization of WLOs/WROs, as well as for the thematic prioritization of the differentiated needs of women and girls in humanitarian funding (allocated funds in the HRP).
- Designation of a donor focal point within the GiHA Working Group.
- Capacity strengthening, mentorship for organizations, and development of specialized tools by sector (e.g., checklists).
- Promotion of gender-responsive approaches in information products.
- Gender indicators for monitoring the humanitarian response.
- Work plan for gender focal points to ensure gender mainstreaming across clusters and the HCT.
- 3,047 individuals and key stakeholders participated in gender analysis processes that informed humanitarian programming between 2024 and 2025.
- 36,607 individuals from communities, organizations, and institutions received key messages, awareness-raising, and capacity-building on gender equality, inclusion of LGBTIQ+ persons, and the empowerment of women and girls between 2024 and 2025.

### GAPS + CHALLENGES

- Global deprioritization, both thematically and in funding allocations.
- Operational downsizing, closure of programs, and discontinuation of specialized services.
- Impact of the NGO Law and Resolution 010.25.
- Operational costs related to adaptation and coordination functions.

- Cultural barriers and discriminatory social norms, and the challenges in implementing an intersectional approach.
- Reporting on gender indicators and access to sex-, age-, and diversity-disaggregated data.
- Fostering a gender-sensitive organizational culture that goes beyond the role of gender focal points.

### RECOMMENDATIONS

- Continue prioritizing under CERF and the HRP those underfunded thematic areas, Women-Led Organizations (WLOs)/Women's Rights Organizations (WROs), and agencies with mandates on gender equality and gender-based violence (GBV).
- Whenever possible, directly or systematically integrate the activities recommended by the GiHA Working Group into the 2025 prioritization process (e.g., gender analysis and action plans, awareness-raising, and institutional capacity-building).
- Designate the remaining gender focal points to support the development of checklists, facilitate training sessions, and provide technical support in project review.
- Generate evidence on gender gaps, barriers, and strategies to reduce them, and establish mechanisms

- to measure the quality of gender-transformative interventions.
- Integrate gender-responsive and intersectional approaches into sectoral documents.
- Maintain the activation of the GBV AoR, PSEA Network, and the GiHA Working Group in line with IASC recommendations.
- Establish dedicated funding for gender coordination (including for WLO/WRO representatives and lead agencies).
- Advocate with donors to fund underfinanced areas such as gender equality, GBV, PSEA, sexual and reproductive health (SRH), and the empowerment of women and girls.