CALL TO ACTION

on Protection from Gender-Based Violence in Emergencies

Road Map 2021-2025



Under the leadership of the Government of Canada, the Women's Refugee Commission facilitated the development of the 2021-2025 Road Map in consultation with the Call to Action partnership.

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Introduction

The Call to Action on Protection from Gender-Based Violence in Emergencies (Call to Action) is a groundbreaking global initiative to fundamentally transform the way gender-based violence (GBV) is addressed in humanitarian action. The aim is to drive change and foster accountability so that every humanitarian effort, from the earliest phases of a crisis, includes the policies, systems, and mechanisms necessary to prevent, mitigate, and respond to GBV, especially violence against women and girls.

GBV is a horrifying reality and human rights violation for women and girls globally. It is a power, health, rights, and protection issue that is deeply rooted in gender inequality and structural norms that disempower and discriminate. The risk of violence, exploitation, and abuse is heightened during emergencies. Crises weaken national systems, such as health and legal systems, and community and social support networks. This breakdown of systems can reduce access to health services, including sexual and reproductive health services, and legal services, leading to an environment of impunity in which perpetrators are not held to account.¹

When systems and services are disrupted or destroyed, women and girls face even higher risk of human rights violations such as sexual violence, intimate partner violence, exploitation and abuse, child marriage, denial of resources, and harmful traditional practices.² Forced displacement by conflict, natural disasters, climate change, or other crises may further compound the risks. GBV has significant and long-lasting impacts on the health and psychosocial and economic well-being of women and girls, and their families and communities.³ While women and girls are disproportionately affected by GBV, the risks of sexual violence against men and boys can also rise in crises.

Early and sustained action to prevent, mitigate, and respond to GBV is at the heart of the humanitarian mandate. It is a collective responsibility that requires all elements of the humanitarian system to do their part. Yet, GBV was not historically considered a lifesaving priority in humanitarian response. The Call to Action was launched in 2013 to meet this challenge head on—to secure the transformational change that ensures priority attention to the needs and rights of women and girls and GBV survivors in humanitarian action.

By the end of 2019, there were over **80 global Call to Action partners** committed to achieving this transformational change. Partners are states and donors, international organizations, and international, national, and local nongovernmental organizations, each bringing their unique strengths and capacities to drive change. The strength of the Call to Action lies in the power of collective action and the shared commitment of diverse stakeholders to accountability for results. The success of the Call to Action will ultimately be determined by the crisis-affected women, girls, families, and communities who are safer because GBV was effectively addressed in partnership with them from the start of the humanitarian response to the restoration of peace and development.

Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming, p. V. https://www.unfpa.org/minimum-standards

² Ibid.

³ Ibid.



The Foundational 2016-2020 Road Map

Shortly after the Call to Action was launched, partners created a five-year Road Map to guide their work. The 2016-2020 Road Map was designed to meet three inter-linked objectives:

- **Ensure Services for Survivors**: Establish specialized services and programs that are accessible to anyone affected by GBV and are available from the onset of an emergency.
- **Mitigate the Risks of GBV**: Integrate and implement actions to reduce and mitigate GBV risk across all levels and sectors of humanitarian response from the earliest stages of an emergency and throughout the program cycle.
- Address Gender Inequality: Gender equality and the empowerment of women and girls are mainstreamed throughout humanitarian action.

The Action Plan to achieve these objectives was developed from partners' research and reflection on the nature of GBV in crises, the systemic barriers to a quality response, and the strategic drivers of change. The analysis pointed to the following factors as essential underpinnings of an effective response:

- **Strong leadership and ownership** of GBV as a cross-cutting issue within organizations and across the humanitarian system at all levels.
- Adequate funding for human resources and quality interventions at every phase of the response.
- Accountability throughout the system for implementation of established inter-agency policies, guidelines, and agreements.
- Understanding among humanitarian actors of the link between gender inequality and GBV, the impact on women and girls, and the need to commit to women's participation, empowerment, and equality.
- **Sufficient capacity** to address GBV through specialized and cross-cutting programming, and to promote gender equality and women's empowerment, in international, national, and local organizations, particularly women's organizations.⁴
- Quality engagement of the humanitarian system with national systems and local actors, including engagement of women in affected communities and women's organizations, as leaders and responders.
- **Continual work to build the evidence base** on effective programmatic interventions for GBV prevention, response, and risk mitigation.

There has been marked progress under the first Call to Action Road Map as described below and further detailed in Call to Action Progress Reports.⁵ However, so much more remains to be done to fulfill the promise of the initiative—to leave no one behind, to reinforce our accountability to women and girls, and to reach the point where effective action on GBV is standard operating procedure for all actors working in humanitarian settings.



Women's organizations include national, regional, and local civil society entities, including women-led and women-focused organizations, women's organizations, and feminist movements.

The Call to Action's 2017, 2018, 2019 Progress Reports and individual partners' 2018 and 2019 progress reports can be found here: https://www.calltoactiongbv.com/general-documents.

Key Achievements and Learning to Date

In the last five years, the partnership has grown from a founding group of 50 partners to 85 at the end of 2019. Partners advocated successfully for increased resources for GBV prevention and response and for improvements in policy and practice. Coalitions came together to develop critical guidance and tools to help policymakers and practitioners strengthen efforts to address GBV, promote gender equality, and ensure accountability for performance. These include the new Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming, the GBV Accountability Framework, and the updated Inter-Agency Standing Committee (IASC) Gender Handbook for Humanitarian Action.⁶ Several initiatives were undertaken with field-based colleagues to leverage the value of the Call to Action in their settings.7

Partners remain deeply committed to the transformational goal of the Call to Action. This is manifest in the decision to update and extend the Call to Action Road Map through 2025. The strategic considerations that informed the first Road Map remain central to the work that will be done under this Road Map. While the contexts in which we work continue to evolve, many of the same challenges persist. But there are also achievements and learning to build on and incorporate into the post-2020 Road Map.

The growth in the global partnership includes 5 national civil society organizations. One CSO partner now co-chairs the NGO Stakeholder Working Group and serves on the global Steering Committee. This is an important milestone for the Call to Action, but partners should also accelerate efforts to bring additional national and local partners into the initiative.



For additional information on critical guidance and resources, see pages 10-11.

See https://www.calltoactiongbv.com/call-to-action-in-the-field for reports on Road Map pilot projects in Northeast Nigeria and Democratic Republic of the Congo, and the report on European Union-sponsored Call to Action workshops in ten countries in 2018.

Increased Advocacy, Awareness, and Commitment

Since the Call to Action was launched in 2013, there is much greater awareness of the pervasive nature of GBV in emergencies and more commitments from multiple stakeholders to address it. Call to Action partners have increased their own accountability and transparency by publishing their individual progress reports on the Call to Action website and pledging to make public their commitments to the 2021-2025 Road Map.

In addition to commitments under the Call to Action, advocacy efforts to address GBV and promote gender equality were advanced at the 2016 World Humanitarian Summit, the 2019 Oslo Conference on Ending Sexual and Gender-based Violence in Humanitarian Crises, the 33rd International Conference of the Red Cross and Red Crescent, and the 2019 Global Forum on Refugees, and through the Women, Peace, and Security Agenda. Building on the 2018 G7 Whistler Declaration on Gender Equality and the Empowerment of Women and Girls, Ministers at the G7 2019 meeting pledged to mobilize the international community to prevent GBV in conflict and better meet survivors' needs.

The ongoing challenge is to ensure that commitments translate into sustained improvements in the lives of women and girls and others at risk. The Call to Action will continue to press for action and accountability on GBV that is focused on violence against women and girls and female participation and empowerment, while remaining responsive to the needs of male survivors of sexual violence.

Improvements within the Humanitarian System

The Centrality of Protection and GBV are now considered essential components of Humanitarian Country Team Compacts. GBV and gender equality are priority areas in Humanitarian Coordinators' Terms of Reference. GBV is a core component of the UN refugee agency's (UNHCR's) protection mandate and identified as a key priority for all responses. Coordination mechanisms at the global and field levels are stronger. Surge capacity rosters for GBV specialists have helped improve humanitarian responses. Humanitarian clusters have made progress in integrating GBV risk mitigation into their work.⁸ Between 2016 and 2019, the inter-agency team supporting uptake of the revised IASC GBV Guidelines trained over 3,600 practitioners across 12 sectors/clusters in 37 countries on risk mitigation. A number of Call to Action partners have strengthened their internal capacity to address GBV. These are important developments on the road to a more effective response.

The Call to Action will work to sustain and deepen this progress and continue to advocate for stronger leadership support and accountability at all levels and across all sectors in the humanitarian system.

⁸ See Call to Action 2018 Progress Report for examples of the Clusters' work on GBV risk mitigation, http://wrc.ms/CtA2018progressreport, p. 18.



Promotion of Gender Equality in Humanitarian Action

Mainstreaming gender equality and the empowerment of women and girls in humanitarian action is the third objective of both the first Call to Action Road Map and this 2021-2025 Road Map. Humanitarian GBV standards stipulate that gender equality programming is essential to any long-term effort to address GBV and should be initiated from the start of any humanitarian intervention. Policy and practice has improved, but too many humanitarians continue to believe that gender equality work should not be prioritized in humanitarian response. This remains a real barrier to prioritizing and implementing effective GBV prevention and response programming.

The Call to Action is elevating attention to the promotion of gender equality in the updated Road Map. It remains a Road Map objective and is also identified as a core principle that guides the collective efforts of the partnership. Specific actions related to gender equality are included under every Road Map Outcome.

Inter-Agency Minimum Standards on Gender-Based Violence in Emergencies Programming, p. VIII, https://www.unfpa.org/minimum-standards.

Strengthening Partnerships with Local Organizations

The importance of working with national and local organizations, particularly women's organizations, as equal partners in humanitarian response was a major area of emphasis at the World Humanitarian Summit and an important consideration under the Call to Action. Partnerships with local women's organizations play a central role in spearheading change. They are key to sustaining localized action to address GBV against women and girls and the gender inequalities that are its root cause. There has been some progress in advancing localization in humanitarian response, but the pace has been slow and uneven. A study by the co-leads of the GBV Area of Responsibility's (GBV AoR) Localization Task Team found that GBV localization overall has been minimal.



and that women-led organizations are not meaningfully included in humanitarian response or given access to funding to support their involvement.¹⁰ Partnerships need to be conducted in a manner that brings tangible benefits to local organizations, including access to funding.

Call to Action partners are bringing added emphasis to this priority concern by including it as a core principle in the Road Map and integrating localization, particularly support for women's organizations, into every Outcome area.

Increased Funding

Leading donors report they have increased funding for GBV in keeping with their Call to Action commitments. Further, donors at the 2019 Oslo Conference pledged \$363 million for GBV prevention, mitigation, and response. That said, the overall funding picture is difficult to analyze in detail, and it is clear that funding for GBV and gender equality work in humanitarian settings still falls significantly short of the need. 12

Sufficient and timely funding for GBV and gender equality work remains a top priority for the Call to Action, along with securing much-needed improvements to systems for tracking and reporting on this funding.

¹⁰ GBV Localization: Humanitarian Transformation or Maintaining the Status Quo? December 2019, p. 6. https://careevaluations.org/wp-content/uploads/GBV-Localization-Mapping-Study-Full-Report-FINAL.pdf.

¹¹ See Oslo conference financial pledge results. The government of Norway will track and report on the delivery of commitments made at the conference in coordination with the Call to Action.

Where's the Money? How the Humanitarian System is Failing in its Commitment to End Violence Against Women and Girls, https://www.rescue.org/report/wheres-money-how-humanitarian-system-failing-fund-end-violence-against-women-and-girls.



Attention to Protection from Sexual Exploitation and Abuse (PSEA)

Sexual exploitation and abuse (SEA) of beneficiaries by humanitarian aid workers and peacekeepers is also receiving increased attention from the humanitarian sector and donor governments. As stronger policies and systems are put in place to address SEA, there must also be commensurate attention to ensuring comprehensive GBV response services are in place for survivors at every phase of humanitarian response.

Under the updated Road Map, PSEA is an issue that every Call to Action partner must address in their organizational policies and accountability mechanisms.

Intersectionality and Effective Programming

The humanitarian community continues to improve its understanding of intersecting factors that can heighten a person's risk of GBV. Effective GBV programming must take into account the diverse and intersecting forms of structural oppression, discrimination, and inequality that women and girls experience in a given context. Women and girls who face intersecting inequalities include those with disabilities, adolescent girls, older women, those living with HIV and AIDS, those with diverse sexual orientations and gender identity, and ethnic and religious minorities.¹³

Men and boys may be targeted for abuse because of reduced power and status based on age, disability, sexual orientation, gender identity, and other intersecting qualities.¹⁴

The humanitarian community should build on work underway with child protection actors, women's organizations, social justice movements, organizations of persons with the disabilities, and LGBTI rights organizations to advance learning and improve programming.

Intersectionality is now included in the core principles that guide the Call to Action's work.

³ Inter-Agency Minimum Standards for GBV in Emergencies Programming, p. VII, https://www.unfpa.org/minimum-standards.

¹⁴ Ibid., p. VIII.

Humanitarian-Development-Peace Nexus

The Call to Action remains targeted on the significant work that remains to be done by all stakeholders to effectively address GBV in emergencies. We also recognize that as protracted crises continue to present complicated and overlapping consequences for those affected, the renewed attention in the international community to the humanitarian-development-peace nexus is vital.

Addressing the nexus entails building resilience in institutions and societies, and empowering women and girls as stakeholders and agents of change. The work should focus on reducing risk and building resilience to achieve development goals. It should break down silos between development, peace, and humanitarian action, ensure local ownership, and build partnerships with other stakeholders, including the private sector, to meet collective outcomes. Actors working at the nexus should collaborate to develop and implement gender equality and GBV programming and advocacy strategies to meet collective goals in crisis settings.

Programs should be designed and delivered in a gender-transformative way and include promotion of the full participation of women in peace negotiations, security sector reform, and post-conflict reconstruction. Actors should advocate together for the funding mechanisms and processes to support such programming, ensuring that humanitarian principles are upheld at all times.

Nexus considerations are integrated into the updated Road Map's Action Plan to support transformative results in preparedness, longer-term response, and recovery.



Essential Tools and Resources

As noted earlier, foundational guidance and tools have been produced or updated in recent years that support the goal of the Call to Action. They help stakeholders significantly strengthen their GBV and gender equality work, and should inform partners' commitments under this Road Map. The **GBV Area of Responsibility** website also contains links to important tools and resources, including a **Help Desk**, **GBV Guidelines Knowledge Hub**, and **Revised Handbook for Coordinating GBV Interventions in Humanitarian Emergencies**. The Handbook is a vital resource for achieving the Road Map's Coordination Outcome. Other critical resources for taking the Call to Action forward include:

Resource Description This resource presents 16 Minimum Standards for GBV best practice on prevention and response programming in emergencies. The Standards define what agencies working on specialized GBV programming need to achieve to **Inter-Agency Minimum** prevent and respond to GBV and to deliver multisectoral services that are Standards for GBV in women- and girls-centered. The development of these Standards was a priority **Emergencies Programming** action under the first Road Map. The roll-out of the Standards under this Road (2019)Map presents a strategic opportunity to engage new actors and to address a continuing gap in the availability, quality, and impact of specialized GBV programming. The Framework was developed by a group of Call to Action partners. 15 lt **GBV Accountability** articulates what field-level humanitarian actors, especially leadership, must do **Framework** to prioritize GBV prevention and response. The Framework has informed the (2018)updating of this Road Map and will support more strategic implementation of the Call to Action at the leadership level in humanitarian operations. **IASC Revised Gender** The updated Gender Handbook provides practical guidance for humanitarian **Handbook for Humanitarian** workers to mainstream gender equality into humanitarian action across Action sectors—the third objective of the Call to Action Road Map. (2017)Other useful resources on gender in humanitarian action include the revised **IASC Gender Policy and** IASC Gender Policy and accompanying Accountability Framework. Annual **Accountability Framework** reports on the Accountability Framework are produced by UN Women on behalf (2017)of the IASC's Gender Reference Group.

The GBV Accountability Framework was developed by Call to Action members in the Real Time Accountability Partnership (RTAP). In 2019, these entities belonged to RTAP: CARE, International Organization for Migration, International Rescue Committee, Norwegian Refugee Council, OCHA, United Kingdom's Department for International Development, UNHCR, UNICEF, UNFPA, and USAID's Office of U.S. Foreign Disaster Assistance.

Resource	Description
IASC Guidelines for Integrating GBV Interventions in Humanitarian Action (2015)	This resource is primarily for non-GBV sectors. It aims to assist humanitarian actors and communities affected by humanitarian crises to coordinate, plan, implement, monitor, and evaluate essential actions for the prevention and mitigation of GBV across all sectors of humanitarian response. Outcome 6 of the Road Map is focused on effective utilization of the Guidelines.
Inter-Agency GBV Case Management Guidelines (2017)	The Guidelines were developed to build capacity on GBV case management and information management, and strengthen the links between these in order to improve services provided to GBV survivors as envisaged under the first objective of the Road Map.
What Works to Prevent Violence (2014-2019)	This research and innovation program has generated an extensive body of evidence on effective responses to violence against women and girls in conflict and humanitarian emergencies.
Guide to Developing a Field- Level Road Map (2019)	The Guide draws on learning from the Call to Action pilot projects in Northeast Nigeria and the Democratic Republic of the Congo. It provides step-by-step guidance for field-based Call to Action colleagues on developing a Road Map that is informed by the global Road Map but contextualized for their particular setting.
Minimum Initial Service Package (2016)	The Minimum Initial Service Package (MISP) is a series of priority actions required to address reproductive health needs at the onset of every humanitarian crisis. Prevention and management of the consequences of sexual violence is one of the MISP's five objectives.
Minimum Operating Standards for Protection from Sexual Exploitation and Abuse (2016)	The Minimum Operating Standards for Protection from Sexual Exploitation and Abuse (MOS-PSEA) are commitments made by IASC members to combat SEA within their organizations. It provides specific indicators on how organizations can set up internal structures to do so.
IASC Best Practice Guide Inter-Agency Community- Based Complaints Mechanisms (2016)	The Guide provides operational guidance on how to set up an inter-agency community-based complaint mechanism to handle reports of sexual abuse and exploitation by aid workers. It includes lessons learned, examples, and case studies, as well as additional guidance for PSEA networks.



The 2021-2025 Road Map

The 2021-2025 Road Map maintains a strategic focus on collective action and enhanced accountability. It reflects the essential components of an effective humanitarian response to GBV identified under the first Road Map, builds on the achievements and learning of the last five years, and addresses the ongoing gaps that require urgent action.

The updated Road Map largely retains the substance of the original Road Map's goal and objectives. In addition, this Road Map sets out core principles that are foundational to the collective efforts of the partnership and are critical to achieving the vision of the Call to Action. As members of the Call to Action, partners affirm the goal, objectives, and core principles of the initiative.

Core Principles

- Accountability to affected populations is paramount in implementing the Call to Action. The meaningful participation and leadership of affected populations, in particular women and girls, must be ensured.
- GBV and gender inequality are inextricably linked. To end GBV, systemic equality between women and men must be established.
- · Women and girls are a priority focus for the Call to Action because of their documented higher risk of GBV, the overarching discrimination they experience, and their lack of safe and equitable access to humanitarian assistance.
- An intersectional approach is key for effective survivor-centered programming. This requires an understanding of how aspects of a person's social and political identities might combine or intersect to heighten protection risks.
- The engagement, leadership, and participation of local organizations and local leaders, particularly women and women's organizations, is critical to effective humanitarian action.
- Sustained collective action and accountability by all partners in the humanitarian system at every level and across all sectors—are essential to achieve the goal of the Call to Action.

The Action Plan

The Action Plan is the central component of the Road Map. It lays out the priority outcomes and transformative action areas to meet the Call to Action's goal and objectives. Stakeholders make commitments to the Key Action Areas based on their roles, responsibilities, and capacities.

Goal

The goal of the Call to Action is to drive change and foster accountability within the humanitarian sphere so that every humanitarian effort, from the start, includes the policies, systems, and mechanisms necessary to provide safe and comprehensive services to those affected by GBV, to prevent GBV, and mitigate GBV risks, especially violence against women and girls.

Objectives

- 1. Establish specialized GBV services and programs that are accessible to anyone affected by GBV and are available from the onset of an emergency.
- 2. Integrate and implement actions to prevent GBV and to mitigate GBV risk across all levels and sectors of humanitarian response from the earliest stages of an emergency and throughout the program cycle.
- 3. Mainstream gender equality and the empowerment of women and girls throughout humanitarian action.

Outcomes

To achieve the goal and objectives of the Call to Action, the following Outcomes must be met. These Outcomes build on those in the 2016-2020 Road Map. They have been updated in consultation with Call to Action partners and other key stakeholders to reflect current realities.

Outcome 1. Policy Frameworks and Capacity

Actors working in humanitarian settings have the institutional and system-wide policies and capacity to address GBV, promote gender equality, and ensure accountability.

Outcome 2. Coordination

Effective coordination within the GBV sector, and between other relevant actors and the GBV sector, ensures action and accountability to prevent and respond to GBV at all levels of the response.

Outcome 3. Data, Assessment, and Analysis

Data on GBV and gender is collected, shared, stored, and analyzed safely and ethically in consultation with GBV and gender experts, and supports humanitarian planning, programming, and funding decisions.¹⁶

Outcome 4. Funding

Sufficient funding is provided for GBV and gender equality staffing, interventions, initiatives, and programs during every phase of emergency response.

Outcome 5. Specialized GBV Programming

GBV prevention and response programming, including specialized services, that meet the Inter-Agency Minimum Standards for GBV in Emergencies Programming are implemented in every phase of emergency response.

Outcome 6. GBV Risk Mitigation

GBV risk mitigation and promotion of gender equality are effectively integrated into program design, implementation, and monitoring and evaluation across all humanitarian sectors in line with the IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action.

Key Action Areas

Under each Outcome, there are Key Action Areas (KAAs). These are broad areas of action that are needed to achieve the Outcome. Partners make measurable commitments to specific KAAs (see Annex C: Commitments Guidance Note). Taken together, their commitments represent the collective action and accountability that are the hallmarks of the initiative. In the section that follows, each Outcome is presented with its associated KAAs.

In keeping with established inter-agency standards, actions to address GBV must be undertaken from the start of a humanitarian response regardless of the immediate availability of data. This reflects the reality that GBV occurs in every crisis, but there are multiple barriers to timely reporting.



Outcome 1: Policy Frameworks and Capacity

Actors working in humanitarian settings have the institutional and system-wide policies and capacity to address GBV, promote gender equality, and ensure accountability.

- 1-1 Accountability: Adopt, implement, evaluate, and report on policies and systems to ensure institutional accountability on GBV, PSEA, and gender equality.
- 1-2 Staffing: Build human resources and staff capacity to address GBV and advance gender equality.
- **1-3 Integration:** Integrate GBV and gender equality considerations into system-wide and institutional standards, guidelines, and tools.



- **1-4 Localization:** Support local actors, particularly women's organizations, in development of institutional policies and capacity to strengthen GBV response and prevention efforts, promote gender equality, and ensure accountability.
- **1-5 Resources:** Allocate financial and human resources for implementation of system-wide and institutional policies and capacity to address GBV, strengthen gender equality, and ensure accountability.
- **1-6 Advocacy:** Advocate for implementation of system-wide and institutional policies¹⁷ and capacity to address GBV, strengthen gender equality, and ensure accountability, including in key strategic humanitarian documents.¹⁸

Policies should reflect the IASC GBV Guidelines, https://gbvguidelines.org/en/, and the IASC Gender Handbook, https://www.gihahand-book.org

¹⁸ Key strategic documents include Refugee Response Plans and Strategies, Humanitarian Country Team Compacts, and Centrality of Protection Strategies and Work Plans.

Outcome 2: Coordination

Effective coordination within the GBV sector, and between other relevant actors and the GBV sector, ensures action and accountability to prevent and respond to GBV at all levels of the response.

- 2-1 GBV Sector Coordination: Institutionalize GBV coordination at global and field levels.
- 2-2 Coordination between GBV, PSEA, and Gender Equality
 Actors: Institutionalize and systematize coordination between
 humanitarian thematic/working groups on GBV, gender equality,
 and PSEA at global and field levels.
- 2-3 Coordination on Risk Mitigation: Strengthen coordination between GBV specialized actors and other clusters/sectors, and among clusters/sectors on their risk mitigation work.¹⁹



- **2-5 Localization:** Support local actors, particularly women's organizations, to lead and engage in GBV coordination and on gender equality coordination, and in Humanitarian Country Teams, pooled fund steering committees, and other relevant humanitarian architecture.
- **2-6 Resources:** Allocate financial and human resources for GBV coordination and for coordination between GBV and other relevant actors at all levels of the response.
- **2-7 Advocacy:** Advocate for effective and accountable coordination on GBV and on gender equality at all levels of the response, including at the inter-cluster level, and include GBV concerns and priorities in all advocacy efforts by leadership.



¹⁹ Also see Outcome 6 on GBV Risk Mitigation.

²⁰ Refers to refugee, IDP, and other crisis settings.

Outcome 3: Data, Assessment, and Analysis

Data on GBV and gender equality is collected, shared, stored, and analyzed safely and ethically in consultation with GBV and gender experts, and supports humanitarian planning, programming, and funding decisions.²¹

- 3-1 Integration: Integrate GBV and gender considerations into sector-specific and inter-sectoral tools and methodologies that govern humanitarian needs assessments, planning processes, response plans, reviews, and evaluations.
- **3-2 Consultation:** Conduct participatory consultations with women and girls²² and their organizations, and other at-risk populations and utilize the information to inform humanitarian needs assessments and planning of GBV and gender equality programming.



- **3-3 Localization:** Support local actors, particularly women's organizations, to integrate GBV and gender equality into ethical data collection and analysis that inform program and funding decisions.
- **3-4 Resources:** Allocate human and financial resources for safe and ethical GBV data collection and information management and assessments that include gender analysis and attention to GBV to inform program and funding decisions. Involve humanitarian GBV and gender equality experts—especially local experts—in these processes.
- **3-5 Advocacy:** Advocate for good practice in the integration of GBV and gender equality considerations into data collection and analysis to inform programming and funding, and for safe and ethical GBV information management in all interventions, including as part of humanitarian-development-peace nexus workstreams.

²¹ In keeping with established inter-agency standards, actions to address GBV must be undertaken from the start of a humanitarian response regardless of the immediate availability of data. This reflects the reality that GBV occurs in every crisis, but reliable data is often unavailable.

Participatory consultations with girls must be child friendly and conducted in line with established good practice. See The Alliance for Child Protection in Humanitarian Action: https://www.alliancecpha.org/en.

Outcome 4: **Funding**

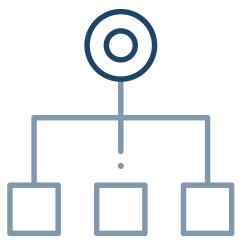
Sufficient funding is provided for GBV and gender equality staffing, interventions, initiatives, and programs during every phase of emergency response.23

- 4-1 Prioritization: Prioritize funding allocations to GBV and gender equality work in humanitarian settings, including from global and country-based pooled funds and unearmarked funds. Whenever possible, ensure flexible, multi-year funding for this work.
- 4-2 Tracking: Track and report on funding allocations for GBV and gender equality in humanitarian responses.
- **4-3 Localization:** Provide local actors, particularly women's organizations, with sufficient funding for GBV and gender equality work during every phase of emergency response.
- 4-4 Advocacy: Advocate for sufficient, flexible, multi-year funding for GBV and gender equality work during every phase of emergency response.
- 4-5 Nexus: Provide resources, including flexible, multi-year funding, for joined-up programming at the humanitarian-development-peace nexus that effectively addresses GBV prevention and response and gender equality, while ensuring that humanitarian action remains grounded in humanitarian principles.

Outcome 5: Specialized GBV Programming

GBV prevention and response programming, including specialized services, that meet the Inter-Agency Minimum Standards for GBV in Emergencies Programming are implemented in every phase of emergency response.

- 5-1 Implementation: Implement specialized GBV services and programming in line with the Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming.
- **5-2 Consultation:** Consult and work in partnership with women and girls and their organizations, and other at-risk populations, in the assessment, planning, implementation, monitoring, and evaluation of programs to prevent GBV and ensure survivors' safe access to quality services.



- **5-3 Evaluation:** Monitor, evaluate, and report on the implementation of specialized GBV services to improve the quality and accountability to women and girls.
- **5-4 Accountability:** Establish/strengthen accountability mechanisms for integration of GBV programming into the Humanitarian Program Cycle in line with inter-agency standards and frameworks, ²⁴ including in strategic objectives.
- **5-5 Localization:** Support local actors, particularly women's organizations, to design, implement, and evaluate gender-transformative, specialized GBV prevention and response services in every phase of emergency response, and ensure continuity of services post-emergency.
- **5-6 Resources:** Dedicate and allocate human and financial resources to establish safe, quality, specialized GBV services beginning in the preparedness phase; maintain or increase funding and staffing to meet evolving needs.
- **5-7 Advocacy:** Advocate for funding to implement specialized GBV prevention and response services that meet minimum standards in every phase of emergency response regardless of the presence or absence of GBV prevalence data.
- **5-8 Systems-strengthening:** Take measures to strengthen GBV prevention, risk mitigation, and response within national and local non-emergency services and systems, as part of emergency preparedness activities, ongoing development interventions, and/or as a component of humanitarian programming.

See the IASC GBV Guidelines, https://gbvguidelines.org/en/, Inter-Agency GBV Minimum Standards, https://www.unfpa.org/minimum-standards, and the GBV Accountability Framework, https://reliefweb.int/sites/reliefweb.int/files/resources/GBV%20Account-ability%20Framework.pdf.

Outcome 6: GBV Risk Mitigation

GBV risk mitigation and promotion of gender equality are effectively integrated into program design, implementation, and monitoring and evaluation across all humanitarian sectors in line with the IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action.

- 6-1 Institutionalization: Institutionalize GBV risk identification into sectoral and inter-sectoral tools, standards, processes, trainings, and other key materials for all phases of the program cycle across all sectors.
- **6-2 Implementation:** Implement, monitor, and report on the results of integration of GBV risk mitigation and sector-specific outcomes in humanitarian programming.



- **6-3 Gender Equality:** Integrate appropriate targeted action to promote gender equality and empowerment of women and girls into preparedness, response, and recovery activities across all humanitarian sectors.²⁵
- **6-4 Consultation:** Regularly consult with women and girls and other at-risk populations to understand their specific needs and priorities, as well as any barriers and/or risks they face in accessing services; work with them to design safe and effective interventions across all humanitarian sectors.
- **6-5 Localization:** Support local actors, particularly women's organizations, to lead on/integrate GBV risk mitigation into program design and implementation across all sectors.
- **6-6 Resources:** Allocate human and financial resources to support GBV risk mitigation activities in humanitarian programming across all sectors.
- **6-7 Advocacy:** Advocate for the integration of GBV risk mitigation actions as a standard component of humanitarian program design and implementation across all sectors.

(Note: Coordination of GBV Risk Mitigation within and across sectors/clusters is critical and addressed under Outcome 2 on humanitarian coordination.)



Gender Equality in the Context of GBV Risk Mitigation

Systemic gender inequality places women and girls at increased risk of GBV and can exclude them from participating in decision-making structures. As a result, humanitarian programming often does not adequately meet their needs. In some cases, the way the assistance is provided further exacerbates GBV risks.

Humanitarian actors across ALL sectors have a responsibility and are well-positioned to help promote gender equality through their work. Furthermore, effective GBV risk mitigation and the promotion of gender equality are mutually reinforcing. There are a number of basic GBV risk mitigation actions that help promote gender equality, but do not require significant expertise in gender or social norms work. Some basic examples include:

- Ensuring leadership and the active engagement of women and girls in community decision-making structures.
- Promoting gender balance in program staffing and leadership.
- Institutionalizing consultations with women and girls as a standard component of monitoring and evaluation systems.
- Identifying and proactively addressing barriers that women and girls face when attempting to access basic
 services that can over time contribute to gender equality. In the education sector, for example, if school
 environments are safe and menstrual hygiene needs are met, adolescent girls may stay in school longer. This in
 turn increases their access to opportunities alongside their male peers. Examples from other sectors can be
 found in the IASC GBV Guidelines, which provide practical guidance by humanitarian sector.

From Action Plan To Results

Commitment—Collective Action—Accountability

The strength of the Call to Action lies in the shared commitment of diverse stakeholders to the goal, objectives, and core principles of the initiative. Collective action and accountability are the drivers of success. It is about accountability for results, accountability to each other, and accountability to those most at risk of GBV, particularly women and girls. The Call to Action thrives on the inspiration, commitment, and expertise of each partner and the collective determination to transform humanitarian action on GBV, including through the promotion of gender equality. Membership in the initiative continues to grow. The Call to Action looks forward to welcoming many more partners, particularly governments, women's organizations, and other civil society groups from crisis-affected areas and settings that are prone to natural disasters.

Requirements of Membership

Global partners include states and donors, international organizations, and non-governmental organizations, including national and local civil society organizations. To join the Call to Action, a stakeholder agrees to:

- Affirm the goal, objectives, and core principles of the Call to Action.
- · Adopt and implement organizational policies on gender-based violence and gender equality in humanitarian action and on protection from sexual exploitation and abuse. Partners must either have these policies in place or agree to develop them upon joining the Call to Action.
- Make public commitments to at least two Key Action Areas (KAAs) of the Road Map.
- Submit an annual public report on progress in meeting the commitments.
- · Contribute to the collective work of the initiative, including participation in working group meetings and the annual partners meeting, as resources allow.

Additional information on becoming a Call to Action partner is on the website.

The Commitments Process

The collective impact of the Call to Action depends on the quality of partners' commitments and on their implementation. The number of commitments will depend on a partner's mission and capacities. Commitments must link directly to a Key Action Area of the Road Map. They will be released publicly on the Call to Action website. Commitments should be:

- Aspirational: Knowing that the Call to Action aims to transform humanitarian practice on GBV, commitments should be forward-looking and contribute to transformative change.
- Concrete and Measurable: To keep faith with the commitment to accountability and to allow the partnership to assess collective progress, partner commitments need to be actionable and measurable. Each commitment should be framed in such a way that it is clear how it contributes to progress on a KAA.
- Periodically Reviewed: Each partner should take stock of their commitments during the annual reporting process.
 The collective partnership should do so in conjunction with the annual partners meeting. This will help ensure that partners make individual and collective adjustments to their commitments in order to close gaps, respond to changing circumstances, and remain accountable to the Call to Action Road Map.

For additional guidance on commitments, see Annex C.

Leadership and Governance

The Call to Action's governance structure is intended to leverage the value of its multi-stakeholder membership, support coordinated action across the partnership, and promote mutual respect and collaboration among partners.

The **global Lead** of the Call to Action is a State actor. The role of the Lead is to help motivate and organize the partnership to keep the Call to Action focused and moving forward. The Lead should play a prominent role in humanitarian policy and funding, be a recognized champion of GBV and gender equality issues in humanitarian response, and serve as an active member of the Call to Action.

The Lead is supported by a **Steering Committee** composed of the co-chairs of the different Stakeholder Working Groups. There are three groups: States/Donors; International Organizations; and NGOs. Steering Committee members ensure that the perspectives of their respective groups are brought to leadership discussions on the work of the initiative, and they identify opportunities for cross-stakeholder collaboration on advocacy, funding, and program issues.

The three global **Stakeholder Working Groups** serve as a forum for partners to share their successes and challenges with their fellow stakeholders. The Working Groups identify activities they can undertake within the Group and/or in collaboration with other Working Groups. Each Stakeholder Working Group can also support new partners in their efforts to contribute to and benefit from the Call to Action.

Both the Steering Committee and the Stakeholder Working Group also have important roles to play in conducting outreach to potential new partners whose participation is vital to the sustainability and impact of Call to Action work.

For more information on the role and responsibilities of the Lead, Steering Committee, and Stakeholder Working Groups, see the Governance Section of the Call to Action website.

Monitoring for Results

The monitoring framework for this five-year Road Map measures progress by: (1) monitoring actions taken in the KAAs; (2) measuring specific indicators to monitor progress in achieving the Outcomes. Together, these monitoring systems will show how the partnership is doing as a collective to achieve the aims of this Road Map.

Partners monitor and publicly report on their commitments to take action under the KAAs through annual partner reports and discussions among partners during teleconferences and meetings. The annual partner reports contribute to the yearly Call to Action Progress Report, which highlights partners' overall progress and gaps that require further attention.

Annex B details the indicators for this Road Map, with benchmarks and targets. These will be measured annually to track progress at the Outcome level and findings included in the collective Progress Report.



Closing

This Road Map represents the Call to Action's shared vision for a humanitarian system that comprehensively addresses GBV and promotes gender equality in all phase of the response—from preparedness, through relief, to development. Every partner has their role to play individually and as a contributor to the collective, transformative goal of the initiative.

The 2021-2025 Road Map builds on progress made under the first Road Map. It seeks to address barriers that continue to block effective action, including partnership with and accountability to women and girls in decision-making and program implementation. As partners have said since the launch of the Call to Action, its success will be judged by the tangible difference the Call to Action makes in the lives of women, girls, families, and communities affected by crises. In extending the Call to Action for another five years, partners reaffirm their belief in the impact of joint action and collaboration, and invite others to join this groundbreaking effort.

Annex A: Definitions

GBV Specialist:

"A GBV specialist is someone who has received GBVspecific professional training and/or has considerable experience working on GBV programming." (Source: IASC GBV Guidelines) determines roles, responsibilities, power and access to resources. This is also affected by other diversity factors such as disability, social class, race, caste, ethnic or religious background, economic wealth, marital status, migrant status, displacement situation and urban/rural setting." (Source: IASC Gender Handbook 2017)

Gender-Based Violence:

"Gender-based violence" is an umbrella term for any harmful act that is perpetrated against a person's will and that is based on socially ascribed (i.e., gender) differences between males and females. It includes acts that inflict physical, sexual, or mental harm or suffering, threats of such acts, coercion, and other deprivations of liberty. These acts can occur in public or in private. The term "GBV" is most commonly used to underscore how systemic inequality between males and females, which exists in every society in the world, acts as a unifying and foundational characteristic of most forms of violence perpetrated against women and girls. The term "genderbased violence" also includes sexual violence committed with the explicit purpose of reinforcing gender inequitable norms of masculinity and femininity. (Source: GBV **Minimum Standards**)

Gender:

"Gender refers to the socially-constructed differences between females and males—and the relationships between and among them—throughout their life cycle. They are context- and time-specific and change over time, within and across cultures. Gender, together with age group, sexual orientation and gender identity,

Gender Equality:

"Gender equality, or equality between women and men, refers to the equal enjoyment by women and men, girls and boys, of rights, opportunities, resources and rewards. Equality does not mean that women, men, girls and boys are the same; but that their enjoyment of rights, opportunities and life chances are not governed or limited by whether they were born female or male." (Source: IASC Gender Handbook 2017)

Gender Transformative:

An approach that "attempts to promote gender equality as follows:

- By fostering critical examination of inequalities and gender roles, norms and dynamics.
- By recognizing and strengthening positive norms that support equality and an enabling environment.
- By promoting the relative position of women, girls and marginalized groups and transforming the underlying social structures, policies and broadly held social norms that perpetuate and legitimize gender inequalities." (Source: <u>UNICEF/UNFPA</u>)

Humanitarian Actors:

"In this Road Map, this term includes states, regional bodies, donors, international organizations, national/ international and local NGOs working in humanitarian settings. These actors may or may not self-identify as a humanitarian organization, but humanitarian programming to some degree is included in their portfolio." (Source: Call to Action Road Map 2016-2020)

Intersectionality:

"A framework for understanding that people experience overlapping (i.e., intersecting) forms of oppression, discrimination and marginalization based on their co-existing identities (e.g., inequality based on gender and/or ethnicity). Effective and accountable GBV programming must pay attention to diverse and intersecting forms of structural oppression, discrimination and inequality that women and girls experience in a given context." (Source: GBV Minimum Standards)26

Local Actors:

For the purposes of this document, this includes local civil society,²⁷ national and local government entities, and affected populations.

Nexus:

"The 'triple nexus' refers to the interlinkages between humanitarian, development and peace actors. In the UN's 'New Way of Working (NWoW),' these actors are expected to work towards collective outcomes over multiple years. when appropriate." (Source: ICVA definition)

Protection from Sexual Exploitation and Abuse (PSEA):

"The term 'sexual exploitation' means any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another." (Source: UN Secretary-General's Bulletin on protection from sexual exploitation and abuse (PSEA) (ST/SGB/2003/13))

"The term 'sexual abuse' means the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions." (Source: UN Secretary-General's Bulletin on protection from sexual exploitation and abuse (PSEA) (ST/SGB/2003/13))

"PSEA refers to the protection from sexual exploitation and abuse by humanitarian staff. Refer to the PSEA website for more information and tools." (Source: IASC **Gender Handbook 2017**)

Risk Mitigation:

"Mitigation refers to reducing the risk of exposure to GBV." (Source: **IASC GBV Guidelines**)

Women's Organizations:

Includes national, regional, and local civil society entities, including women-led and women-focused organizations, women's rights organizations, girls' groups, and feminist movements.

For additional resources on intersectionality, see work of Kimberlé Crenshaw: https://books.google.com/books/about/On_Intersectionality.html?id=zXp9jwEACAAJ.

²⁷ Including national non-governmental organizations (NNGOs), National Red Cross and Red Crescent Societies, business forums, faith-based associations, labor unions, community-based organizations (CBOs), local community groups, and youth groups.

Annex B: Monitoring Framework

The monitoring framework for this five-year Road Map measures progress by: (1) monitoring actions taken in the Key Action Areas (KAAs); (2) measuring specific indicators to monitor progress in achieving the Outcomes. Together, these monitoring systems will show how the partnership is doing as a collective to achieve the aims of this Road Map.

Partners monitor and publicly report on their commitments to take action under the KAAs through annual partner reports and discussions among partners during teleconferences and meetings. The annual partner reports contribute to the yearly Call to Action Progress Report, which highlights partners' overall progress and gaps that require further attention.

The indicators for the Road Map, with benchmarks and targets, will be measured annually. The indicators aim to show progress over time at the Outcome level. The Outcomes for the Call to Action Road Map are complex and interlinked. Proxy indicators are used for many of the Outcomes.

Outcome 1: Policy Frameworks and Capacity

Actors working in humanitarian settings have the institutional and systemwide policies and capacity to address GBV, promote gender equality, and ensure accountability.



Indicator 1A: Percentage of Call to Action partners that report having a current policy that guides their work on GBV in humanitarian contexts.

Definition: Number of Call to Action partners that report having a current policy that guides their work on GBV in humanitarian contexts divided by number of Call to Action partners x 100

Means of verification:

Partner reports

Measurement frequency:

Annual

Responsible for measurement and reporting:

Call to Action Lead

Targets and milestones:

60% by 2021, 80% by 2023, 100% by 2025

Indicator 1B: Percentage of Call to Action partners that report having a current policy that guides their work on gender equality in humanitarian contexts.

Definition: Number of Call to Action partners that report having a current policy that guides their work on gender equality in humanitarian contexts divided by number of Call to Action partners x 100

Means of verification:

Partner reports

Measurement frequency:

Annual

Responsible for measurement and reporting:

Call to Action Lead

Targets and milestones:

60% by 2021, 80% by 2023, 100% by 2025

Indicator 1C: Percentage of Call to Action partners that report having a current policy that guides their work on PSEA in humanitarian contexts.

Definition: Number of Call to Action partners that report having a current policy that guides their work on PSEA in humanitarian contexts divided by number of Call to Action partners x 100

Means of verification:

Partner reports

Measurement frequency:

Annual

Responsible for measurement and reporting:

Call to Action Lead

Targets and milestones:

60% by 2021, 80% by 2023, 100% by 2025

Outcome 2: Coordination

Effective coordination within the GBV sector, and between other relevant actors and the GBV sector, ensures action and accountability to prevent and respond to GBV at all levels of the response.



Indicator 2A: Percentage of countries with a Humanitarian Coordinator where leadership roles for national/subnational GBV coordination are coled/led by a national actor.

Definition: Number of countries with a Humanitarian Coordinator where leadership roles for national/ subnational humanitarian GBV coordination are co-led/ led by a national actor divided by number of countries with a Humanitarian Coordinator and national humanitarian GBV coordination x 100

Means of verification:

GBV AoR and UNHCR data collection

Measurement frequency:

Annual

Responsible for measurement and reporting:

GBV AoR and UNHCR

Targets and milestones:

40% by 2021, 50% by 2023, 60% by 2025

Indicator 2B: Percentage of countries with a national-level GBV coordinator that report coordination with PSEA or gender coordination mechanisms.

Definition: Number of countries with a national-level GBV coordinator that report coordination with PSEA or gender coordination mechanisms divided by number of countries with a national-level GBV coordinator x 100

Means of verification:

GBV AoR and UNHCR data collection

Measurement frequency:

Annual

Responsible for measurement and reporting:

GBV AoR and UNHCR

Targets and milestones:

60% by 2021, 80% by 2023, 100% by 2025

Indicator 2C: Percentage of countries with a Humanitarian Coordinator with dedicated GBV coordinators.

Definition: Number of countries with a Humanitarian Coordinator with dedicated GBV coordinators divided by number of countries with Humanitarian Coordinator and GBV coordination mechanism x 100

Means of verification:

GBV AoR data collection

Measurement frequency:

Annua

Responsible for measurement and reporting:

GBV AoR

Targets and milestones:

40% by 2021 50% by 2023, 60% by 2025

Outcome 3: Data, Assessment, and Analysis

Data on GBV and gender equality is collected, shared, stored, and analyzed safely and ethically in consultation with GBV and gender experts, and supports humanitarian planning, programming, and funding decisions.



Indicator 3A: Number of Humanitarian Needs Overviews (HNOs) that include GBV risk analysis in at least 4 sectors.

Definition: Number of HNOs that include GBV risk analysis in at least 4 sectors

Means of verification:

Review of HNOs

Measurement frequency:

Annual

Responsible for measurement and reporting:

Call to Action Lead with support from GBV AoR

Targets and milestones:

Target 100%

Indicator 3B: Number of HNOs that include sexand age-disaggregated data for all sectors.

Definition: Number of HNOs that include sex- and agedisaggregated data for all sectors

Means of verification:

Review of HNOs

Measurement frequency:

Annual

Responsible for measurement and reporting:

Call to Action Lead with support from OCHA

Targets and milestones:

Target 100%

Outcome 4: Funding

Sufficient funding is provided for GBV and gender equality staffing, interventions, initiatives, and programs during every phase of emergency response.



Indicator 4A: Amount (in USD) allocated by Call to Action partners to GBV in emergencies activities.

Definition: Total amount in USD allocated by Call to Action partners to GBV in emergencies activities as reported by Call to Action members

Means of verification:

Partner reports

Measurement frequency:

Annual

Responsible for measurement and reporting:

Call to Action Lead

Targets and milestones:

Annual increase

Indicator 4B: Percentage of funds (in USD) allocated by Call to Action partners to GBV in emergencies activities by local actors.

Definition: Total reported amount in USD allocated by Call to Action partners to GBV in emergencies activities by local actors divided by total reported amount in USD allocated by Call to Action partners to GBV in emergencies activities x 100

Means of verification:

Partner reports

Measurement frequency:

Annual

Responsible for measurement and reporting:

Call to Action Lead

Targets and milestones:

Annual increase

*Indicator 4C: Percentage of country-based pooled funds that integrate GBV into strategies, selection criteria, and funding decisions.

Definition: Number of OCHA-managed country-based pooled funds that integrate GBV into strategies and selection criteria and funding decisions divided by number of OCHA-managed country-based pooled funds x 100. **To be counted, the pooled fund would have to meet all criteria.**

Means of verification:

Pooled Fund documents (strategies, country level operational manuals, selection criteria, and funding decisions)

Measurement frequency:

Annua

Responsible for measurement and reporting:

OCHA

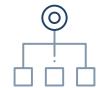
Targets and milestones:

100% by 2025

* Indicator 4C is derived from the GBV Accountability Framework.

Outcome 5: Specialized GBV Programming

GBV prevention and response programming, including specialized services that meet the Inter-Agency Minimum Standards for GBV in Emergencies Programming, are implemented in every phase of emergency response.



Indicator 5A: Number of Call to Action partners that report applying the Inter-Agency Minimum Standards in their humanitarian GBV prevention and response work.

Definition: Number of Call to Action partners that report applying the Inter-Agency Minimum Standards in their humanitarian GBV prevention and response work. [Note that for different actors, application could mean different things and this will be clarified in the reporting form.]

Means of verification:

Partner reports

Measurement frequency:

Annual

Responsible for measurement and reporting:

TBD

Targets and milestones:

60% by 2021, 70% by 2022, 80% by 2023, 90% by 2024, 100% by 2025

Indicator 5B: Number of Call to Action partners that report implementing specialized GBV services in humanitarian contexts.

Definition: Number of Call to Action partners that report implementing specialized GBV services in humanitarian contexts

Means of verification:

Partner reports

Measurement frequency:

Responsible for measurement and reporting:

Targets and milestones:

Sustained/increased numbers in self-reported implementation of specialized GBV services in line with the Minimum Standards annually*

* Only those actors with relevant capacity (including expertise, financial, and human resources) should undertake provision of specialized services

Outcome 6: GBV Risk Mitigation

GBV risk mitigation and promotion of gender equality are effectively integrated into program design, implementation, and monitoring and evaluation across all humanitarian sectors in line with the IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action.



Indicator 6A: Percentage of total cluster/sector plans in humanitarian plans that include GBV risk mitigation within the cluster/sector-specific objectives.

Definition: Number of cluster/sector plans (HRPs or RRPs) that include GBV risk mitigation within the cluster/sector-specific objectives divided by total cluster/sector plans (in HRPs or RRPs) x 100

Means of verification:

Guidelines Reference Group to provide checklist for review of HRPs/RRPs

Measurement frequency:

Annual

Responsible for measurement and reporting:

Cluster Lead Agencies responsible for data collection/ reporting; GBV Guidelines Reference Group, with support from OCHA as needed, responsible for compilation and overall analysis.

Targets and milestones:

Annual increase

Indicator 6B: Number of Call to Action partners that report integrating GBV risk mitigation in their humanitarian work.

Definition: Number of Call to Action partners that report integrating GBV risk mitigation in their humanitarian work

Means of verification:

Partner reports. The GBV Guidelines Reference Group will develop a short checklist to support partners' reporting against this indicator.

Measurement frequency:

Annual

Responsible for measurement and reporting:

Call to Action Lead with support from the GBV Guidelines Reference Group

Targets and milestones:

Annual increase; 100% by 2025

Annex C:

Commitments Guidance Note

This brief note is intended to guide partners in the Call to Action on Protection from Gender-Based Violence in Emergencies (Call to Action) as they make commitments to implement the initiative's 2021-2025 Road Map. Commitments will be published on the Call to Action website as part of the initiative's emphasis on accountability and transparency.

Partners' commitments to implement the Road Map are at the heart of the Call to Action. Partners make commitments to contribute to specific Key Action Areas (KAAs) based on their roles, missions, responsibilities, and capacities. The number of commitments will vary, but partners must make commitments to at least two KAAs of the Road Map.

As indicated in the 2021-2025 Road Map, commitments should be:

- Aspirational—commitments should be forward-looking and contribute to transformative change
- Concrete
- Measurable

Partners will report on progress against their commitments annually, and periodically review commitments for continued relevance.

Commitments should follow this template:

- 1. Partner name
- 2. Location of the planned work
- 3. Outcome and KAA in the 2021-2025 Road Map to which commitment is linked (be specific)
- 4. A clear, concise, and measurable commitment statement worded as an outcome or action²⁸
- 5. Additional narrative as relevant
- 6. Timeframe for completion and benchmarks over the life of the 2021-2025 Road Map
- 7. Information on how the partner will measure progress for annual reporting²⁹

Examples can be found on the Call to Action website and provided to potential new partners.

Partner should indicate how they will measure progress towards achievement of the commitment. This could include source of information about progress and/or more specific plans for measurement as appropriate/relevant.

The process of updating the Road Map creates opportunities for partners to recommit to working individually and collectively to transform the way in which GBV is addressed in humanitarian settings. It enables partners to further advance this work through new commitments that respond to current realities and are based on up-to-date information. It also allows partners to fill identified gaps and increase action in priority areas. A consistent approach to expressing these commitments and regularly reporting on progress are key to identifying areas for further focus, and to documenting the impact of the Call to Action.