Mainstreaming Gender in Integrated Water Resources Management (IWRM), Climate Change and Disaster Risk Reduction Policies in the Caribbean Region

Aurora Noguera-Ramkissoon, Liaison Officer
UNFPA’s Sub-regional Office for the Caribbean, Trinidad and Tobago

http://caribbean.unfpa.org
http://twitter.com/UNFPACaribbean
http://facebook.com/unfpa.caribbean
http://youtube.com/unfpacaribbean
Why is Mainstreaming Gender Important

• Humanitarian crises are not gender-neutral
• 60% of maternal deaths occur in humanitarian emergencies;
• All forms of violence against women and girls peak during disasters or conflicts;
• High proportion of households in the region are female headed (28.3 - 43.5%)
• LAC – a highly vulnerable region (Between 2003 – 2017, 300,000 persons lost their lives and 70 million were affected due to natural disasters).
International Frameworks

- CEDAW, 1979; Beijing Declaration and Platform of Action, 1995;
- 1994 ICPD PoA affirms the right to SRH and GBV prevention and mitigation services;

- Samoa Pathway, 2014, The Sendai Framework on Disaster Risk Reduction (2015-2030); the Paris Agreement on Climate Change, 2015 and the SDGs
Minimum Initial Service Package (MISP)

- Prevent and manage the consequences of sexual violence by:
  - Putting in place measures to protect affected populations, particularly women and girls, from sexual violence;
  - Making clinical care available for survivors of rape and treatment of STIs; and
  - Ensuring the community is aware of the available clinical services (IEC materials and outreach).
- Ensuring WASH facilities are adequate and meet the needs of men, women, girls and boys

- Reduce HIV transmission by:
  - Ensuring safe blood transfusion practice;
  - Facilitating and enforcing respect for standard precautions; and
  - Making free condoms available.
Minimum Initial Service Package (MISP)

- Prevent excess maternal and newborn morbidity and mortality by:
  - Ensuring availability of emergency obstetric care (EmOC) and newborn care services, including:
    - At health facilities: Ensure there are skilled birth attendants and supplies for normal births and management of obstetric and newborn complications;
    - At referral hospitals: Ensure there are skilled medical staff and supplies for management of obstetric and newborn emergencies;
  - Establishing a referral system to facilitate transport and communication from the community to the health center and between health center and hospital; and
  - Providing clean delivery kits to visibly pregnant women and birth attendants to promote clean home deliveries when access to a health facility is not possible.
Plan for comprehensive RH services, integrated into primary health care (PHC) as the situation permits. Support the health sector/cluster partners to:

- Coordinate ordering and distribution of RH equipment and supplies, including dignity kits to affected populations, based on estimated and observed consumption;
- Collect existing background data;
- Identify suitable sites for future service delivery of comprehensive RH services; and
- Assess staff capacity to provide comprehensive RH services and plan for training/retraining of staff.
Recommendations

• A multi-sectoral, well coordinated response is required when pulling in all key partners to ensure timely support (Government, Civil Society, UN, CEDEMA, IDPs);

• Ensure that SRH is integrated in natural disaster plans, focal points established to support clusters;

• Invest in GBV and SRH services and supplies, as part of an essential health package in emergencies;

• Allocate resources for emergency preparedness and response;
Recommendations

• Scale-up in emergency settings the implementation of the 2030 Agenda targets;

• Ensure First Responders have training, particularly in the MISP

• Ensure that financing for humanitarian action, including access to SRH Geographic mapping of vulnerable populations and/or populations with special needs;

• Ensure that you have disaggregated data before the emergency;
Thank you