

14-18 April 2019

Documentation of the Work of the United Nations Entity for
Gender Equality and the Empowerment of Women



Conference B

United Nations Entity for Gender Equality and the Empowerment of Women

Committee Staff

Director	Mariam Bojang
Assistant Director	Anisa Ricci
Chair	Josephine Jung
Rapporteur	Jessie White

Agenda

- I. Addressing Gender-Based Violence in Emergencies and Post-Disaster Recovery
- II. Supporting the Involvement of Women in Governance and Decision-Making
- III. Eliminating Child, Early, and Forced Marriage by 2030

Resolutions adopted by the Committee

Code	Topic	Vote
UN-WOMEN/1/1	Addressing Gender-Based Violence in Emergencies and Post-Disaster Recovery	Adopted without a vote
UN-WOMEN/1/2	Addressing Gender-Based Violence in Emergencies and Post-Disaster Recovery	16 votes in favor, 1 vote against, 5 abstentions

Summary Report

The United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women) held its annual session to consider the following agenda items:

- I. Eliminating Child, Early, and Forced Marriage by 2030
- II. Addressing Gender-Based Violence in Emergencies and Post-Disaster Recovery
- III. Supporting the Involvement of Women in Governance and Decision-Making

The session was attended by representatives of 22 Member States;

On Sunday, the committee adopted the agenda of II, III, I, beginning discussion on the topic of “Addressing Gender-Based Violence in Emergencies and Post-Disaster Recovery.” By Tuesday, the Dais received a total of 4 proposals covering a wide range of sub-topics including suggestions for training for peacekeepers that respond during emergencies and after disasters, disseminating information about women’s health care, and access to medical services. The atmosphere in the committee was very positive and delegates worked diligently to exchange their ideas. The successful collaboration of the delegates resulted in merging 4 working papers into 2.

On Wednesday, 2 draft resolutions had been approved by the Dais, none of which had amendments. The committee adopted the 2 resolutions following voting procedure, one of which received unanimous support by the body. The resolutions represented a wide range of issues, including training first responders on issues related to gender-based violence (GBV), suggesting counseling and mental health resources for victims and survivors of GBV, community education surrounding GBV, economic reintegration of women who have been affected by GBV, and data collection and sharing of information. The delegates worked passionately towards finding solutions to help women who have experienced GBV. The delegates demonstrated thoughtfulness and diplomacy throughout the week.



Code: UN-Women/1/1

Committee: United Nations Entity for Gender Equality and the Empowerment of Women

Topic: Addressing Gender-Based Violence in Emergencies and Post-Disaster Recovery

1 *The United Nations Entity for Gender Equality and the Empowerment of Women,*
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3 *Guided by the United Nations mission to reaffirm faith in fundamental human rights through the equal*
4 *rights of men and women, as stated in Line 2 of the Preamble of the *Charter of the United Nations* (1945),*
5
6 *Recognizing the United Nations Sustainable Development Goal (SDG) 5, target 5.2, which aims to*
7 *“eliminate all forms of violence against all women and girls,”*
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9 *Taking into consideration the different challenges each region faces with concern to gender-based*
10 *violence (GBV) as a result of conflict and natural disasters in emergencies and after disasters,*
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12 *Fully aware of the importance of protecting women and girls, as the majority of civilians directly affected*
13 *by emergencies and disasters and are disproportionately affected by GBV, as stated in Security Council*
14 *resolution 1325 (2000) on “Women and peace and security,”*
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16 *Deeply alarmed by the psychological impact and vicarious trauma of GBV on female survivors,*
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18 *Concerned by the lack of cultural awareness and inclusivity in existing GBV frameworks in emergencies*
19 *and disaster recovery,*
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21 *Recalling Security Council resolutions 1325 (2000), 1820 (2009), 1888 (2009), and 1889 (2010), which*
22 *emphasize the importance of female participation and the inclusion of gender perspectives in*
23 *humanitarian planning,*
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25 *Concerned with the lack of reporting and best practice sharing of efforts to address GBV during times of*
26 *emergencies and after disasters,*
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28 *Conscious of the *Sendai Framework for Disaster Risk Reduction 2015-2030* (2015), which provides a*
29 *framework to implement a gender perspective in disaster risk reduction efforts, and asserts that GBV will*
30 *be reduced if an “equitable and accessible” response, recovery, rehabilitation, and reconstruction process*
31 *is made with female perspectives and participation,*
32
33 *Supporting fully the United Nations Office for Disaster Risk Reduction (UNISDR) and its *United Nations**
34 **Plan of Action on Disaster Risk Reduction for Resilience: Towards a Risk-Informed and Integrated**
35 **Approach to Sustainable Development* (2017), in order to ensure the implementation and effectiveness of*
36 *said frameworks,*
37
38 *Confident in Member States acting to address GBV in emergencies and post-disaster recovery, as*
39 *demonstrated in Brazil’s “Step It Up” campaign which created a plan for the formation and integration of*
40 *care given to victims of sexual violence by public safety and health professionals,*
41
42 *Acknowledging the success of Rwanda’s “Umugoraba w’ababyeyi” village forums that meet to discuss*
43 *community issues including, but not limited to, child abuse, domestic violence, financial problems and*
44 *family planning,*
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46 *Taking into account the work that the UN Theme Group on Gender and UN-Women’s Advocacy for*
47 *Gender Awareness in Disaster Management has completed in Zhejiang, Hubei, and Gansu Province,*
48 *China,*

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Noting the success of the National Police of Mali who created a hotline to provide support to women and girls experiencing GBV through mechanisms such as reporting, legal assistance, and economic reintegration,

Recognizing the achievements of Turkey's Edirne Municipality in economically empowering female victims of GBV by implementing gender-responsive budgeting and hiring female bus drivers within the private sector,

1. *Appeals* to the United Nations Theme Group on Gender and UN-Women's Advocacy for Gender Awareness in Disaster Management to provide Member States with a comprehensive assessment to determine the gender gaps in the existing policies and to identify factors preventing women's participation and perspectives;
2. *Encourages* Member States to include a gender perspective and female participation in creating disaster risk reduction and humanitarian relief plans by utilizing the framework provided in the *Sendai Framework for Disaster Risk Reduction*;
3. *Requests* Member States prioritize and implement the *Sendai Framework for Disaster Risk Reduction* in cooperation with the United Nations Office for Disaster Risk Reduction (UNISDR) to improve funding for gender-based risk reduction plans;
4. *Encourages* Member States to share knowledge and skills from qualified authorities on how to minimize the consequences of emergencies or disasters to improve national and local action plans for natural disaster management, risk-assessment, prevention and preparedness;
5. *Further invites* Member States to utilize a cross-cultural competency model to combat GBV that emphasizes attitude, skills, and knowledge when interacting with local governments, and involves local institutions instead of outside actors;
6. *Further requests* more research be collected by Member States to facilitate effective information and best practice sharing regarding violence against women and girls and, risk warning detection systems through working with ethnologists specialized in areas of concern, creating stakeholder awareness of GBV, statisticians to gather data, and volunteers;
7. *Encourages* Member States to implement programs modeled after Rwanda's "Umugoraba w'ababyeyi," which translates to "Parent's Evenings," that uses community actors to identify and solve local societal issues that specifically target GBV through conducting community forums led by local leaders, raising awareness of GBV in emergencies and post-disaster recovery;
8. *Recommends* Member States implement local and national call center programs for GBV victims named "Call2Live" in local communities that are susceptible to conflict and disasters;
9. *Expresses its hope* for Member States to prepare for emergencies by utilizing regional cooperation through public-private partnerships that create both fixed and flexible safe spaces, including shelter buildings (such as schools) and pop-up tents, for victims of GBV to seek medical and psychological help through,
 - a. Coordinating with local communities to determine the number and location of safe spaces based on Member State-specific needs;
 - b. Collaborating with local governments to draft emergency plans to build the infrastructure needed to transport people to safe spaces, and sharing this information in community forums;
 - c. Providing supplies and basic necessities to GBV victims in safe spaces with help from healthcare professionals and volunteers;

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10. *Affirms* that victims of GBV in post-disaster recovery should receive access to medical care by ensuring that medical officials are adequately trained in crisis-response training, health care services, Sexual Assault Evidence Collection Kits, sexually transmitted infection testing, and sensitivity training sessions for women and girls that have experienced GBV:
11. *Expresses its hope* for the organization of a training course seminar by Member States for local volunteers to be adequately trained to work with victims of GBV in safe spaces in the event of an emergency or disaster through:
 - a. Receiving funding from the Fund for Gender Equality (FGE);
 - b. Coordinating with local governments to design seminars that protect cultural sensitivity and promote empowerment as to the wishes of each specific Member State;
 - c. Encouraging both men and women to attend training initiatives to be able to identify GBV in order to further ensure cultural sensitivity;
 - d. Recommending local professionals, volunteers, NGOs members, humanitarian aid workers and local stakeholders to attend training seminars in order to optimally allocate tasks within camps/safe spaces;
12. *Suggests* the creation of the Worship Our Women Program, which works to send trained teams of ethnologists specialized in topics related to women to remote areas after disasters to ensure the safeguarding of women rebuilding their communities;
13. *Recommends* that Member States integrate women that have experienced violence in the private sector, in order to successfully reintegrate victims into society through its economy by:
 - a. Employing more women employees, especially in disadvantaged areas that are more prone to disaster, such as bus drivers of the Edirne Municipality in Turkey;
 - b. Offering free market places for women to sell their products, such as the Buy From Women Enterprise Platform that aims to connect women to finance information and markets.



Code: UN-Women/1/2

Committee: United Nations Entity for Gender Equality and the Empowerment of Women

Topic: Eliminating Gender-Based Violence in Emergency and Post-Disaster Recovery

1 *The United Nations Entity for Gender Equality and the Empowerment of Women,*
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3 *Realizing* what is affirmed in Article 1, 2 and 5 of the *Universal Declaration of Human Rights* (1948),
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5 *Expressing deep concern* on distorted perceptions on women's' sexual integrity, self-love, and self-care,
6 the claim that the woman is passive, and the fact that a sexual act comes to an end according to the man,
7 which directly influence the prevalence of gender-based violence (GBV),
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9 *Aware* of the fact that information concerning GBV is only provided in UN Official Languages which limits
10 the access of this information for people who do not speak Arabic, Chinese, English, French, Russian,
11 and Spanish,
12
13 *Supporting* fully the United Nation Trust Fund to End Violence Against Women adopted by the *General*
14 *Assembly resolution 50/166* of 1996 which incentivizes Member States to finance community safety
15 initiatives,
16
17 *Noting* the positive effects of education on women's empowerment and their prosperity within gender
18 equality and sexual health, as seen through the Right to Education Initiative, passed in 2000, that has
19 contributed significantly to synergizing national, state, and local institutions with one another,
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21 *Keeping in mind* that signs of GBV may be difficult to identify and training for humanitarian workers may
22 not be standardized in accordance with the *Humanitarian Charter and Minimum Standards in Disaster*
23 *Response* (2000),
24
25 *Acknowledging* the insufficiency of female representation amongst UN peacekeeping contingents despite
26 the positive effect of gender diversity in creating a more inclusive and understanding environment as
27 victims of GBV may be more comfortable to address their concerns with females' peacekeepers,
28
29 *Considering* the *Convention on the Elimination of All Forms of Discrimination against Women* (CEDAW)
30 of 1979 and distressed by the lack of research that has been done the effect of emergencies on women
31 as stressed in the *United Nations Statistic Division World Women 2015*,
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33 *Recalling* the General recommendation No. 35 on GBV against women, in particular article 34 in data
34 collection and statistic reporting, which states the importance of the establishment of a system to regularly
35 collect, analyze and publish statistical data on the number of complaints about all forms of GBV against
36 women,
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38 *Noting with deep concern* the lack of facilities such as, shelters and hospitals for emergencies and post-
39 disaster recovery, especially for discriminated people groups, including but not limited to women, ethnic
40 minority groups, and other vulnerable populations,
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42 *Dismayed* by the ambiguous definition of consent and capacity to consent emanating from Member State
43 legislation, and its effects on the physical and psychological integrities of women of all ages,
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45 *Bearing in mind* the influx of transactional sex in areas in which disasters are prominent and noting the
46 root causes of transactional sex such as, but not limited to, access to food and other necessary supplies,
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48 *Having considered* the Call to Action in Protection from GBV in Emergencies of 2015 and sharing its
49 goals, specifically establishing specialized GBV services and programs accessible to anyone and

50 available from the onset of an emergency, in particular creating specialized GBV prevention and
51 response services in each phase of emergency and collaborating with humanitarian actors to adopt
52 institutional policies that ensure gender equality and protection from GBV within their programming,
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54 *Realizing* the need of special centers for women as an indispensable first step in protecting women in
55 emergencies and post-disaster recovery as shown by the Isange One Stop Centre's implemented in
56 Rwanda, which provides free medical, psychosocial and legal services for victims of GBV and referring to
57 the National Institute of Statistics of Rwanda Service Charter, which highlights the services which must be
58 accessible in centers,
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- 60 1. *Acknowledges* the need for increased lighting in shelters as low lighting can reduce the security of
61 vulnerable populations thus resulting in increased rates of GBV;
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- 63 2. *Recognizes* that facilitating the access to first-response centers are a satisfactory response to
64 confronting the broad spectrum of GBV, in order to ensure cost-free medical attention for victims of
65 abuse, provide mental health counseling and therapy services, implement legal advice for women
66 seeking refuge from unsafe domestic conditions and encourage and guide in professional
67 development;
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- 69 3. *Encourages* the UN Development Programme with Member States to ensure physical security in
70 shelters through providing better logistical development assistance within shelters by addressing the
71 issue of inadequate lighting in buildings thus reducing the prevalence of GBV;
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- 73 4. *Stresses* the importance of women's engagement in their communities as a way to streamline
74 reintegration into victims' everyday lives after emergency and post-disaster situations by:
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 - 76 a. Providing opportunities for women to volunteer in the sector of their choosing in order to
77 equip them with the needed career skills for better job opportunities;
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 - 79 b. Facilitating training opportunities which aid in the development of these centers to better
80 integrate crisis specialists;
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 - 82 c. Supporting these local communities through these volunteer services to promote a safe
83 environment for victims;
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- 85 5. *Advise*s Member States to cooperate with financial initiatives through the UN Trust Fund to End
86 Violence against Women by:
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 - 88 a. Understanding that not all Member States are in a state of financial readiness to readily
89 contribute finances or resources to the UN Trust Fund;
90
 - 91 b. Improving access to services, such as legal assistance, psychosocial counseling and health
92 care by providing these services effectively to the needs of young women;
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- 94 6. *Endorses* the call that Member States ministries of health and other relevant stakeholders pursue
95 data collection and statistical reporting and realizing that:
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 - 97 a. The creation of a new, universal index that seeks to combine all existing databases to serve
98 as a new resource in recognizing and categorizing GBV;
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 - 100 b. Through simplified and independent data collection, Member States will be better informed on
101 the realities of GBV crime and will be able to respond more effectively;
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 - 103 c. Gives greater attention to independent research regarding the status of women and updating
104 databases based on the information collection can prove effective to ensure that there is
105 more corroborated about the instances of GBV;

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- d. Improving data reliability through direct reporting from medical professionals to enhance data transparency;
 - 7. *Recommends* further cooperation to work with the World Health Organization (WHO) and invites non-governmental organizations (NGOs), such as Doctors without Borders and Nurses without Borders, to assist Member States currently affected by disasters and emergencies who face the necessity of personalized and adaptable healthcare to women through:
 - a. Booklets in each kit explaining women's or reproductive health, the danger of unprotected sex and safe sexual methods with information to prevent further transmission of sexually transmitted infections (STIs);
 - b. Providing sanitary products and other healthcare necessities designed for feminine hygiene;
 - c. This healthcare can be at the lower cost or free thanks to a calling for partnership with local or regional companies;
 - d. Treatment of infected populations, in the context of STIs, by administering proper drugs necessary for the restoration of health;
 - 8. *Suggests* the creation and implementation of the Focus on the Good program, which will promote mental health services by creating an outlet for individuals to vent their frustration regarding their circumstances, rather than to vent those frustrations on others through the implementation of:
 - a. Counseling programs to address the psychological effects of emergency situations and GBV through:
 - i. Separated counseling services to protect the needs of discriminated groups, such as but not limited to women, girls, ethnic minorities, migrants and vulnerable populations as defined by the WHO;
 - ii. Ensuring access to one-on-one and group counseling led by a community leader alongside experts in mental health;
 - b. Recreational activities for those affected by crisis, so as to release pressure and provide occupational opportunities during the time of crisis:
 - i. Such as, but not limited to, sports, artistic activities, relaxation activities like shiatsu and yoga, and educated workshop;
 - ii. Led by personal reconstruction coaches, activity leaders, and local representatives or even members of the shelters if they so choose;
 - 9. *Emphasizes* the importance of women's engagement in their communities as a way to streamline reintegration into victims' everyday lives after emergency and post-disaster situations by:
 - a. Providing opportunities for women to volunteer in the sector of their choosing in order to equip them with the needed career skills for better job opportunities;
 - b. Facilitating training opportunities which aid in the development of these centers to better integrate crisis specialists;
 - c. Supporting these local communities through these volunteer services to promote a safe environment for victims;
 - 10. *Further encourages* the World Food Programme and the Food and Agricultural Organization to cooperate with regional institutions and non-governmental organizations, such as the International

162 Committee of the Red Cross, to provide easy access and security to aid convoys supplying medicine
163 and food to women and their families in order to address the root causes of transactional sex;
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165 11. *Recommends* that Member States adopt and create the Specific, Age, Unambiguous, Freedom,
166 Informed definition of consent around five fundamental criteria:

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- 168 a. Specific: consent must respond to a single interaction independent from what happened
169 before and what will happen after;
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 - 171 b. Age: the decision must be taken at an age from which a person is able to give informed
172 consent according to states;
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 - 174 c. Unambiguous: the consent must be transparent about the purpose and the answer;
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 - 176 d. Freedom: the decision must be taken without any pressure or influence, blackmail, or threat
177 of reprisals;
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 - 179 e. Informed: the decision must be valid according to a certain amount of information obtained by
180 both parts;
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182 12. *Promotes* the implementation of educational programs, such as the UN Girls' Education Initiative,
183 which sets standards to prevent and respond to GBV to raise awareness of GBV for the purpose of:

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- 185 a. Training volunteers to face emergency situations and aid disadvantaged victims, as well as
186 enhancing cross-training for medical staff to better respond to emergency situations and post-
187 disaster recovery;
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 - 189 b. Providing safe spaces for all GBV victims, without regard to their extenuating circumstances;
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 - 191 c. Arranging activities, such as workshops, book clubs, cooking classes, physical therapy,
192 during which young women and girls are better engaged during times of turmoil and protect
193 them from harmful environments;
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195 13. *Encourages* the UN Department of Peacekeeping Operations (DPO) to partner with Member States in
196 order to increase employment of female peacekeepers from social services, military backgrounds,
197 medical professionals and other fields relevant to humanitarian aid, to bridge support between
198 peacekeepers and the community;

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200 14. *Encourages* the DPO and UN Office on the Coordination of Humanitarian Affairs (UN-OCHA) partner
201 with Member States to provide quality training to humanitarian workers and peacekeepers focusing
202 on the signs and premises of GBV, adequate response and treatment to GBV and cultural knowledge
203 relevant to the country in emergencies, disasters or conflict;

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205 15. *Advocates* for UN entities and Member States to translate and disseminate on a regional basis
206 already existing information, programs and data regarding GBV to a larger proportion of languages
207 through best practices recite sharing to ensure that such information is accessible to all women;

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209 16. *Recommends* conducting a series of conferences, titled the Conferences on Liberation of the
210 International Taboo Over Women Sexuality which:

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- 212 a. Aim at helping women to change their perspective on sex after suffering GBV by empowering
213 them to be fulfilled and self-confident;
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 - 215 b. Educate people on sexuality to combat gender stereotypes;
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- c. Take place in shelters and centers in time of crisis but also in states which wish to welcome them;
- d. Would be led by experts such as, relationship therapists and psychologists, and local representatives based on the culture of the region.