INTER-AGENCY STANDING COMMITTEE IASC WEEKLY MEETING

Summary Note

10 October 2007 Geneva

I Gender in Humanitarian Action

In advance of the annual face-to-face meeting of the IASC Sub-Working Group on Gender and Humanitarian Action (SWG), Dr. Claudia Garcia Moreno (WHO, Coordinator, Department of Gender and Women's Health, Co-Chair of the SWG), updated participants on the work of the SWG and reviewed progress on activities and products.

The SWG has the objective of integrating gender as a cross-cutting issue into the cluster approach and into other elements of the humanitarian reform. In order to assess gaps in addressing gender issues, the Gender Standby Capacity (GenCap) was established, currently consisting of 17 senior gender advisors who are deployed to emergency situations. They support the HC/RC, Humanitarian Country Teams and gender networks in building capacity to ensure the integration of gender issues in emergency response. Dr. Moreno pointed out that the high number of requests for GenCap assistance is likely to outstrip the availability of resources soon. Through regional workshops and the work of the GenCap Advisors, the SWG ensures the roll-out of the Gender Handbook "Women, Girls, Boys and Men: Different Needs - Equal Opportunities", which identifies key gender issues in humanitarian action providing sector-by-sector guidance on programming, and practical tips on mainstreaming gender equality in humanitarian action. Furthermore, the SWG is rolling out the IASC "Guidelines on Gender-Based Violence Interventions in Humanitarian Settings", which are addressed to communities, governments and humanitarian organisations, and provide guidance on the prevention of and response to sexual violence in emergency settings. The main challenge faced is the need to go beyond the handbook and the guidelines and to integrate them into the humanitarian response at country level, hence to strengthen monitoring and learning capacities and coordination across sectors.

In addition to continuing capacity building, the SWG is currently working on the disaggregation of data in emergencies by sex and age, on revising the IASC gender policy and on strengthening the integration of gender in the cluster system. The face-to-face meeting of the SWG, which is scheduled to take place at WHO (Salle B) in Geneva on 18-19 October 2007, will feature discussions on achievements in 2007 and the development of the work plan for 2008. For more information on the work of the SWG, please consult www.humanitarianinfo.org/iasc/gender.

II Briefing on OCHA-WHO Mission to Chad to Support the Integration of HIV into the Humanitarian Response

Ms. Loretta Hieber-Girardet (OCHA, Senior Advisor on HIV and AIDS, Office of the Director, Policy Development Section) and Dr. Nevio Zagaria (WHO, Coordinator, Recovery and Transition Programmes, Health Action in Crises) briefed participants on the recent OCHA/WHO joint mission to Chad. The objective of the mission was to strengthen the integration of HIV into

the humanitarian response, in particular by ensuring that HIV was a key component of the 2008 CAP planning process. As part of the 2008 CAP workshop, OCHA, WHO and UNAIDS led a strategic planning process to support partners in identifying HIV program needs in the east and south of Chad, and determining priority HIV interventions to fill the gaps in the humanitarian response. The mission included site-visits in N'djamena and the Gaga refugee camp, and extensive consultations with national authorities, the national AIDS programme, the UN Theme Group on HIV, and humanitarian actors, both UN agencies and NGOs.

The populations of humanitarian concern in the east of Chad suffer from a generalised HIV epidemic, affecting over 3% of the adult population, while the areas near the border with the Central African Republic in the south of Chad are burdened by a significantly higher HIV prevalence, of approximately 10%, and a severe lack of HIV services. The government has reiterated HIV control as a priority and provides free AIDS treatment. However, health services tend to be centralized in urban areas, and are consequently not easily accessible to the populations of humanitarian concern. Preliminary modelling done by UNHCR, UNAIDS and WHO estimate that approximately 3,000 people are in immediate need of life-prolonging AIDS treatment in the east and south of Chad.

As an outcome of the workshop, participants identified the overall strategic priorities for inclusion in the 2008 CAP, including to decentralise and expand HIV services, particularly in the South, and to build human resource capacity in Chad. Workshop participants also suggested that HIV focal points should be nominated within the clusters in Chad, and a monitoring and evaluation pilot project will be carried out to track progress on integrating HIV into the humanitarian response.

Next steps include an assessment of both the HIV prevalence and the coverage of the HIV response in the South among the refugee populations and host communities, as well as further joint planning for scaling up interventions according to the priorities identified during the HIV workshop.

Participants

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