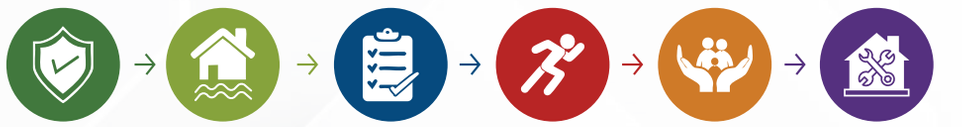
PDMA
Khyber Pakhtunkhwa

FUNCTIONAL
COORDINATION MECHANISM
For District Disaster Management Unit (DDMU),
NOWSHERA

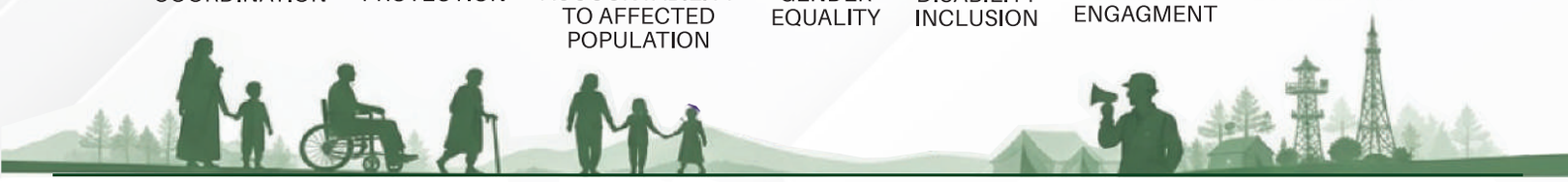
Strengthening Inclusive Humanitarian Action Across the

DISASTER MANAGEMENT SPECTRUM



LEAVE NO ONE BEHIND

COORDINATION | PROTECTION | ACCOUNTABILITY TO AFFECTED POPULATION | GENDER EQUALITY | DISABILITY INCLUSION | COMMUNITY ENGAGMENT | LOCALIZATION



Gender and Child Cell, PDMA Khyber Pakhtunkhwa.

SAFER COMMUNITIES | STRONGER INSTITUTIONS | RESILIENT KHYBER PAKHTUNKHWA


Khyber Pakhtunkhwa
PROVINCIAL DISASTER MANAGEMENT AUTHORITY
PDMA

LEAVE NO ONE BEHIND

FUNCTIONAL COORDINATION MECHANISM TO PREVENT & RESPOND TO GENDER BASED VOILENCE IN EMERGENCY AND OTHER PROTECTION CONCERNS IN HUMANITARIAN SETTINGS.

DISTRICT NOWSHERA, KHYBER PAKHTUNKHWA

Abbreviation:

ACC	Assessment Claim Committee
AoR	Area of Responsibility
CBOs	Community Based Organizations
CPiE	Child Protection in Emergencies
CPWG	Child Protection Working Group
CRC	Convention on the Right of Children
DDMU	District Disaster Management Unit
FATA	Federally Administered Tribal Area
FIR	First Information Report
GBV	Gender Based Violence
GBViE	Gender Based Violence in Emergencies
GCC	Gender and Child Cell
GDMA	Gilgit Baltistan Disaster Management Authority.
IASC	Inter-Agency Standing Committee
IDPs	Internally Displaced Peoples
MCP	Monsoon Contingency Plan
MHPSS	Mental Health & Psychosocial Support
MISP	Minimum Initial Service Package
MSCPHA	Minimum Standard for Child Protection in Humanitarian Action
NDMA	National Disaster Management Authority
NGO	Non-Governmental Organization
NMDs	Newly Merged Districts
Ops	Older Peoples
PDMA	Provincial Disaster Management Authority
PEOC	Provincial Emergency Operation Centre
PSEA	Protection against Sexual exploitation and Abuse
PTSD	Post-Traumatic Stress Disorder
PWD	Person With Disability
SDMA	State Disaster Management Authority
UNCRC	United Nation Convention on the Right of Children

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ACKNOWLEDGEMENT

The Gender and Child Cell (GCC), Provincial Disaster Management Authority (PDMA) Khyber Pakhtunkhwa, takes this opportunity to express its profound appreciation to all departments, humanitarian partners, and district stakeholders whose collective efforts and commitment contributed to the establishment of the Functional Coordination Mechanism for addressing Gender-Based Violence in Emergencies (GBViE), Prevention of Sexual Exploitation and Abuse (PSEA), and other Protection Concerns in Humanitarian Settings in District Nowshera.

The development of this coordination mechanism marks a significant step towards strengthening district-level protection systems and promoting an integrated and inclusive approach to disaster management. Functioning under the leadership of District Administration with Additional Deputy Commissioner (Relief and Human Rights), Nowshera, this platform is intended to enhance coordination among government departments, humanitarian organizations, and local civil society actors to ensure effective prevention, preparedness, response, referral, and follow-up mechanisms for vulnerable groups during emergencies and disasters.

I wish to convey special appreciation to the Additional Deputy Commissioner (Relief), Nowshera, and his team for their leadership, facilitation, and continued support in institutionalizing this district-level coordination platform. Their commitment has created an enabling environment for first responders and stakeholders to work collectively in addressing GBViE, PSEA, and other emerging protection concerns in humanitarian settings.

I also extend sincere gratitude to UNFPA Pakistan for its valuable technical and financial support in advancing GBViE interventions, Reproductive Health (RH), and protection mainstreaming within disaster risk management frameworks. In particular, I acknowledge the dedicated support and guidance of Ms. Mahjabeen Qazi, Provincial Program Coordinator, UNFPA Sub Office Peshawar, whose continued engagement greatly contributed to the successful completion of this initiative.
Special recognition is also extended to the Gender and Child Cell Team, PDMA Khyber Pakhtunkhwa, especially Mr. Muhammad Saddiq, Gender Specialist, for his technical contribution and coordination in designing this mechanism through consultative meetings with district stakeholders and mapping of available essential services and referral pathways.

It is envisaged that this Functional Coordination Mechanism will strengthen localized coordination arrangements and serve as a practical framework for safeguarding the rights and protection needs of women, children, persons with disabilities, and other vulnerable groups throughout all phases of the Disaster Management Cycle.

Syed Musaver Shah Gillani
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Provincial Disaster Management Authority (PDMA)
Khyber Pakhtunkhwa

1. Introduction and Background

Pakistan faces significant vulnerability to various natural disaster risks, including earthquake, flood, landslides, glacial lake outburst floods, cyclones, river erosion, tsunamis and pest invasions. Additionally, human-induced hazards pose serious threats, such as accidents in transportations, industrial, nuclear, and radiological sectors, oil spills, urban and forest fires, civil conflicts, and forced internal displacements. Historically, these disasters have resulted in extensive damage and losses. Before 2005, the West Pakistan National Calamity Act of 1958 was the primary legal framework in place, but it only addressed emergency responses reactively.

Given Pakistan's diverse topography and the escalating impacts of global climate change, there was an urgent need to shift from a reactive to a proactive disaster management approach. After the 2005 earthquake, the government initiated the development of a disaster management framework, culminating in the enactment of the National Disaster Management Act in 2010. This legislation established a comprehensive National Disaster Management System, and the Provincial Assembly of Khyber Pakhtunkhwa adopted a resolution to implement it for handling unforeseen crises effectively.

The Provincial Disaster Management Authority (PDMA) is the leading Authority in the province responsible for all disaster management operations. It collaborates with government departments, NGOs, INGOs, and UN agencies for a coordinated disaster response. PDMA oversees the full disaster management, including preparedness, mitigation, risk reduction, relief, and rehabilitation. It also prepares specialized plans, such as Monsoon Plan, Winter Plan, and Heatwave Plan, to better serve affected communities.
In 2022, severe flood highlighted Pakistan's vulnerability to climate change, with Khyber Pakhtunkhwa declaring emergencies in 17 districts. The flood resulted in 306 fatalities and 369 injuries. Additionally, the floods caused extensive damage to infrastructure, homes, crops, and livestock, with thousands of houses reported as either fully or partially damaged.

There is an urgent need to address the needs of affected populations through coordinated efforts. Coordination Mechanism for lodging complaints and taking corrective actions are vital, especially for issues related Gender Based Violence in Emergencies (GBViE), Protection from Sexual Exploitation and Abuse (PSEA), CPiE, other protection grievances.

The Gender and Child Cell, established in 2013, and mandated to look after the needs of vulnerable groups in all phases of disaster management cycle. The Cell has been working with stakeholders to enhance coordinated response mechanisms by developing policies, standards, and training manuals. District level coordination structures have been set up in several districts to address GBViE, Child Protection in Emergencies, Minimum Initial Services Package (MISP) and other protection issues, and this model is being replicated in District Nowshera.

In 2016, a protection assessment revealed that displaced women and girls from conflict-affected areas face heightened risks of abuse and gender -based violence. The destruction of livelihoods and traditional practices exacerbate these risks, leading to a need for psychosocial support life-skills training. Disasters have increased concerns about women's protection, as cultural practices and legal system gaps persist.
Gender Based Violence (GBV) is prevalent in humanitarian emergencies, cutting across regions and cultures. Evidence shows that sexual violence is often exacerbate in conflicts and natural disasters. Lack of access to services to report GBV and hold perpetrators accountable increases its prevalence. Globally, one in the three women has experienced GBV, with rates higher in humanitarian settings due to disrupted social structures and increased vulnerabilities.

The repeated disasters in Pakistan prompted the establishments of institutions like National Disaster Management Authority (NDMA), Provincial Disaster Management Authorities (PDMAs), and District Disaster Management Units (DDMUs) to streamline disaster response efforts. The PDMA Khyber Pakhtunkhwa played a key role in assisting displaced populations from former FATA areas, focusing on vulnerable groups, including women, children, and people with disabilities, to ensure their protection.

District Disaster Management Units are tasked with planning and coordinating disaster responses. District Nowshera took the lead in creating a coordination mechanism to address GBViE, PSEA, CPiE and other needs. Vulnerable groups such as women, children, and the elderly require special attention during disasters.

The Gender and Child Cell, in collaboration with stakeholders, has developed a functional coordination mechanism in Nowshera coordination mechanism in Nowshera to prevent and respond to GBViE, PSEA, CPiE, and other protection issues. This mechanism aims to enhance stakeholder competencies in gender mainstreaming, GBV, Child Protection, and overall protection, offering substantial support to vulnerable populations.

1.1 Geographical History of Nowshera

Nowshera, is situated in the Peshawar valley, bordered by Mardan/Swabi (North), Attock (East), Kohat (South), and Peshawar/Charsadda (West/Northwest). Lying on a sandy plain surrounded by hills, on the banks of the Kabul River (there bridged), Nowshera is a commercial and industrial center that is connected by rail and road with Dargai (Malakand Pass), Mardan, Peshawar, and Rawalpindi. The town's industries include cotton, wool, and paperboard mills and chemical and newsprint factories, powered by the Malakand-Dargai and Warsak hydroelectric projects. Nowshera has a government college affiliated with the University of Peshawar.

1.1.1 Geography and Location:

Total area is approximately 1748 Square Kilometers

1.1.2 Absolute Location:

33° 41′ to 34° 10′ North latitudes

71° 39′ to 72° 16′ East longitudes

1.1.3 Relative Location:

North: Swabi and Mardan districts

South: Kohat

East: Attock District (Punjab)

West: Peshawar District

1.1.4 Major Rivers:

District Nowshera is situated along the Kabul River, making it a fertile and agriculture significant areas.

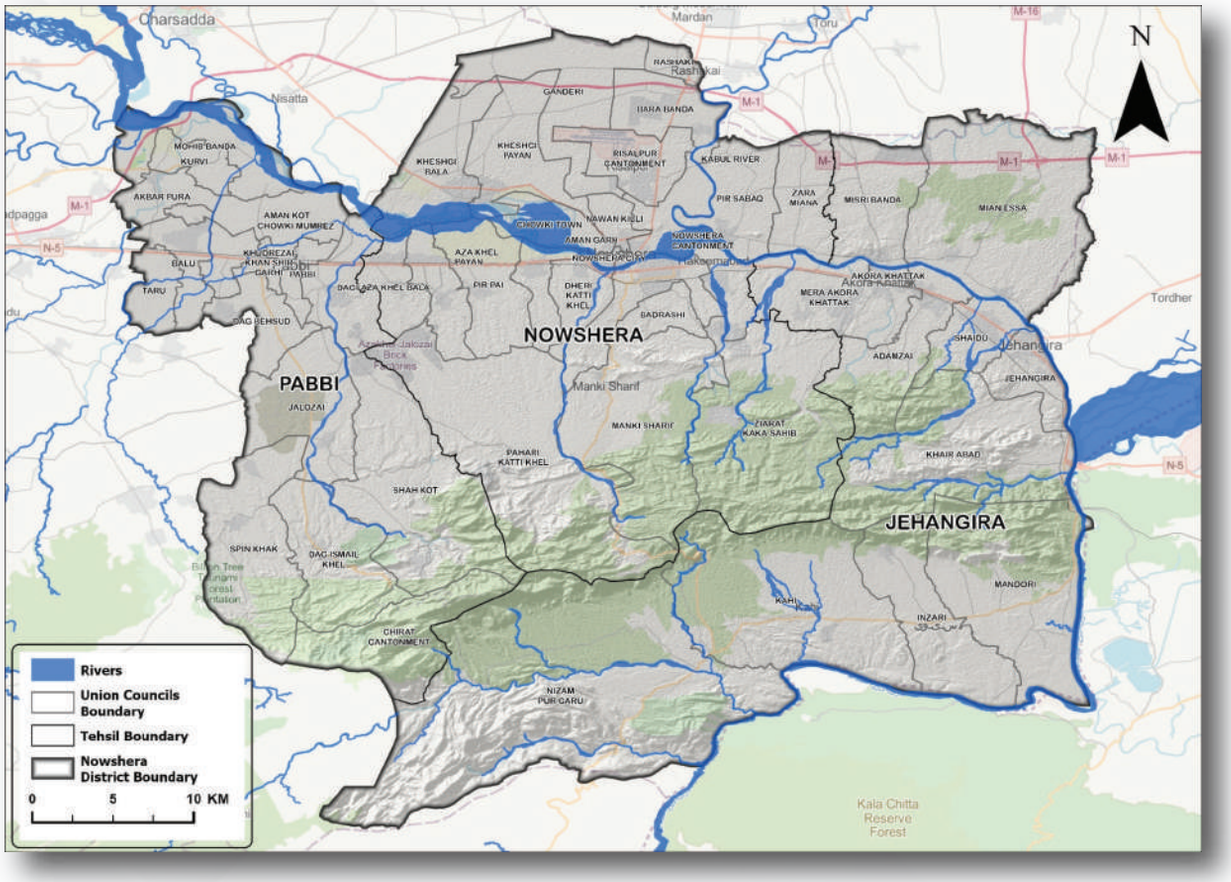
1.1.5 Population Statistic:

Total population (2023 estimates): Around 1.74 million people

Male: 886,471

Female: 854,184

Transgender: 50



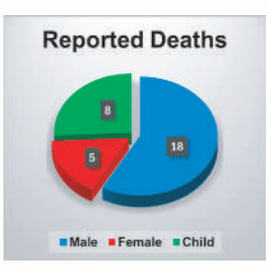
1.2 Demographics

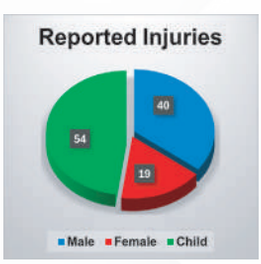
The Demographic profile of District Nowshera in Khyber Pakhtunkhwa, as per the 2023 census, indicates a total population of approximately 1.74 million. The district covers an area of 1,748 square kilometers, resulting in population density of about 608 persons per square kilometer. The region has a higher rural population compared to urban, with around 19.6% of the inhabitants residing in urban areas.

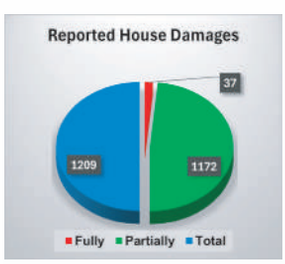
The literacy rate in Nowshera stands at 56.78%, with male literacy at 68.53% and female literacy at 44.49%. The dominant ethnics groups in the areas include the Khattak, Yousafzai, and Durrani Pashtun tribes. Pashto is the primary language spoken by 95% of the population. Islam is the predominant religion, accounting for over 99% of the residents.

1.3 Damage & Loss Data of District Nowshera

Gender Wise Segregated Data from 01-01-2018 to 31-12-2025																		
DISTRICT	HUMAN LOSSES/ INJURIES								CATTLE PERISHED	INFRASTRUCTURE DAMAGES								
	DEATH				INJURED					HOUSES			SCHOOLS			OTHERS		
	Male	Female	Child	Total	Male	Female	Child	Total	Total	Fully	Partially	Total	Fully	Partially	Total	Fully	Partially	Total
Nowshera	24	8	10	42	45	24	62	131	11	40	1177	1217	0	2	2	0	3	3
Total	**24**	**8**	**10**	**42**	**45**	**24**	**62**	**131**	**11**	**40**	**1177**	**1217**	**0**	**2**	**2**	**0**	**3**	**3**



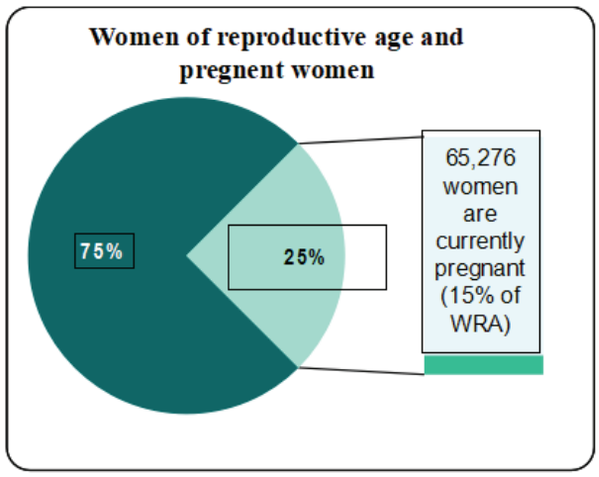


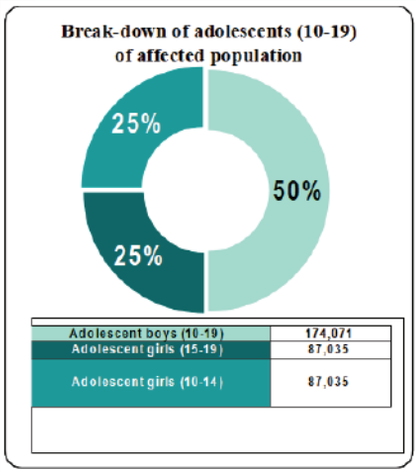


1.4 Hazard Risk Assessment

1.4.1 Human Vulnerability Risk and Reproductive Health Services Needs

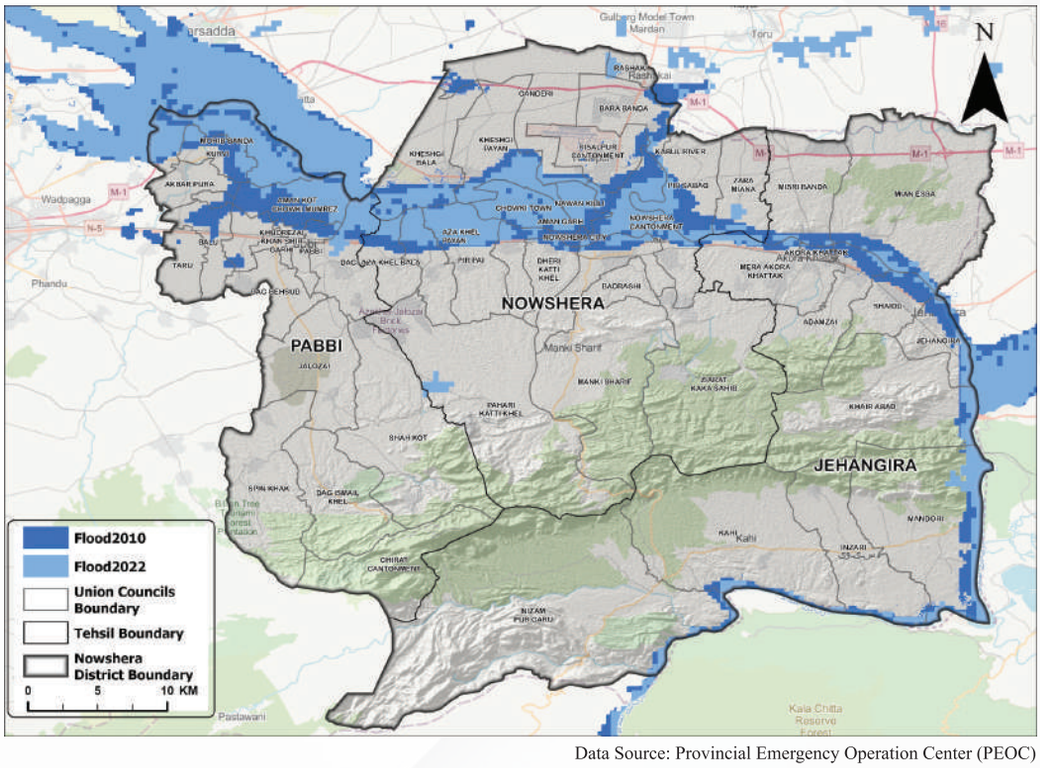
S. No	District	Index	Population	Gender wise segregation			Children population @53% of total	Person with disability @ 15%	Older Persons @ 7%	Women of Reproductive Age (25% of the total population)	Lactating and Pregnant women@ 15%
				Male	Female	Transgender					
	Nowshera	V. High	1,740,705	886,471	854,184	50	922,574	261,106	121,849	435,176	65,276





1.4.2 Flood

Flood Risk Ranking Exercise -District Wise for Monsoon Season								
S No.	Name of District	A: Likelihood of flood event	B: Impact on Population	C: Impact on livelihood	D: Impact on physical infrastructure	E: Accessibility of the area	Risk ranking of a district A*(B+C+D+E)	Risk level
		1 = None, 2 = Rare, 3 = Occasional 4 = Frequent 5 = Most Frequent	1 = Very Rare Impact 2 = Rare Impact 3 = Substantial 4 = Major 5 = Severe					Very High
1	Nowshera	4	3	5	4	2	56	



Data Source: Provincial Emergency Operation Center (PEOC)

2 Functional Coordination Mechanism

2.1 Legal Framework Provides Foundation for The Establishment of Functional Coordination Mechanism

The Aim of the establishment of coordination mechanism is to enhance and coordinate the capacity of the country to prepare for and respond to disasters by defining the measures to be considered necessary for disaster management and risk reduction in line with provision of the National Disaster Management Act, 2010 and National Disaster Management Plan 2012. The Act (2010) and Plan (2012) govern the whole spectrum of Disaster Risk Management through legal bodies and the establishment of an institutional system in all provinces and regions of Pakistan. I.e. NDMA, PDMA's, GBDMA and SDMA.

The Khyber Pakhtunkhwa Provincial Assembly incorporated certain amendment in the year 2012, 2014 and 2019 in NDMA Act 2010 for human induced disaster like militancy and terrorism incidents and made some other relevant changes in the context of Khyber Pakhtunkhwa.
Currently, the National Disaster Management (Khyber Pakhtunkhwa) (Amendment) Act, 2019 governs the institutional arrangements for Disaster Risk Management in the province by the Government of Khyber Pakhtunkhwa.

Some are other legal legislation which support DRM in Khyber Pakhtunkhwa are:
1.Civil Defense Act, 1952
2.Pakistan Environmental Protection Act, 1997
3.Pakistan Climate Change Act,2017.
4.Khyber Pakhtunkhwa Act, 2020.
5.Khyber Pakhtunkhwa climate change Policy & Action Plan 2022.

PDMA coordinates efforts of all stakeholders for effective disaster risk management. Its coordination mechanism is simple but effective for the dissemination of early warning, undertaking search and rescue activities and conducting relief operations to meet the needs of the vulnerable groups. For this purpose, PDMA entails coordination mechanism at two levels:

2.2 Horizontal coordination mechanism:

A functional horizontal coordination mechanism within PDMA brings together provincial departments and humanitarian partners in a clear, structured way, where each organization understands its role and responsibilities. Regular meetings, shared communication channels, and joint planning help ensure everyone stays informed and aligned. This collaborative approach makes it easier to share resources, respond quickly, and avoid duplication of efforts. Ultimately, it creates a more connected and people-centered system for effective preparedness, rescue, relief, and early recovery.

2.3 Vertical Coordination Mechanism:

A functional vertical coordination mechanism within PDMA connects provincial authorities with district administrations and disaster management units in a clear and structured way, ensuring defined roles and responsibilities at each level. Regular communication, reporting systems, and coordinated planning help maintain a smooth flow of information from province to district and vice versa. This alignment enables timely decision-making, efficient resource mobilization, and consistent implementation of strategies. Ultimately, it strengthens localized early warning, preparedness, rescue, and relief efforts in a more responsive and community-focused manner.

3. Gender Based Violence in Emergencies (GBViE)

The Inter Agency Standing Committee (IASC) defines “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(gender) differences between males and females.” It could be physical, mental, or sexual abuse – including acts, attempted or threatened, committed with force, manipulation, or coercion and without the informed consent of the survivor – directed against a person because of his or her gender in a society or culture.

The IASC Policy and GBV Area of Responsibility (GBV AoR), 2018 primary focus is on women and girls as those most disproportionately affected by violence stemming from gender inequality and the resulting differences in power, privilege, and opportunity that are often exacerbated in emergencies. GBV is known to be prevalent in all settings and is likely to increase in emergencies when social structures and protection mechanisms break down. It is a protection concern that requires specialized interventions to provide accessible, prompt, confidential and appropriate services to affected and vulnerable population groups, particularly women, girls and boys.

UNFPA Minimum Initial Standard Packages (MISP) says that in displacements (emergency situation) at least;

- 4% of the total population will be pregnant at a given time
- 15% of women are expected to have life threatening complications
- 5% of all pregnancies will require C- section
- At least 2% women have experienced some kind of Gender Based Violence in Humanitarian conditions

In this regard, the multi-sectorial response services and the implementation of mechanisms to prevent and respond to GBV can be facilitated through coordination and guiding principles and approaches (elaborated in annex). Coordinate and ensure multi sectorial services for prevention and response to women/girls and vulnerable groups such as direct or (tele) psychological well-being services and counseling, referral mechanism, provision of services for incident case management, health and reproductive health services, legal aid, and is possible linkages to livelihood programs in collaboration with UN agencies. As per IASC guidelines, GBV support should continue during stabilized phase while it needs to be mainstreamed in all other sectors as well such as legal assistance, socio-economic growth, water and sanitation, food security and livelihoods etc.

4. Protection From Sexual Exploitation in Emergencies

Protection from sexual exploitation in emergencies refers to the efforts made to prevent and mitigate instances of sexual exploitation and abuse during humanitarian crises or emergencies. These efforts are crucial as vulnerable populations, such as women, children, and marginalized groups, are particularly susceptible to exploitation in chaotic and unstable environments.

Here are some key strategies and approaches for protraction from sexual exploitation in emergencies:

1. **Establishing Safe Spaces:** Creating safe spaces within emergency shelters or refugee camps where survivors of sexual exploitation can seek refuge, receive support, and access essential services without fear of judgment or retaliation.
2. **Gender-Sensitive Programming:** Ensuring that humanitarian aid and response efforts are gender-sensitive and address the specific needs and vulnerabilities of women, girls, and other marginalized groups who are at higher risk of sexual exploitation.

3. **Community Engagement and Participation:** Engaging with affected communities to understand their needs, concerns, and cultural dynamics related to sexual exploitation. Involving community leaders and representatives in designing and implementing prevention strategies can help build trust and increase the effectiveness of interventions.
4. **Training and Capacity Building:** Providing training and capacity building for humanitarian workers, local authorities, and volunteers on recognizing, preventing, and responding to incidents of sexual exploitation. This includes training on survivor-centered approaches, confidentiality, and ethical reporting procedures.
5. **Strengthening Legal and Accountability Mechanisms:** Advocating for and supporting the implementation of laws and policies that protect survivors of sexual exploitation and hold perpetrators accountable. This may involve collaborating with local authorities, legal institutions, and international bodies to ensure justice and restitution for survivors.
6. **Psychosocial Support and Counseling:** Offering psychosocial support services and counseling to survivors of sexual exploitation to address trauma, promote healing, and empower them to rebuild their lives. This includes access to medical care, mental health services, and legal assistance.
7. **Monitoring and Reporting Mechanisms:** Establishing robust monitoring and reporting mechanisms to identify and respond to incidents of sexual exploitation promptly. This includes setting up hotlines, anonymous reporting channels, and complaint mechanisms accessible to affected individuals.
8. **Coordination and Collaboration:** Fostering coordination and collaboration among humanitarian agencies, local organizations, government authorities, and other stakeholders involved in the emergency response. This ensures a comprehensive and cohesive approach to protracting individuals from sexual exploitation.
9. **Awareness Raising and Education:** Conducting awareness-raising campaigns and educational initiatives within affected communities to promote understanding of sexual exploitation, consent, and rights. Empowering individuals with knowledge and information can help prevent exploitation and encourage reporting of incidents.
10. **Long-Term Prevention and Sustainable Solutions:** Addressing underlying factors contributing to vulnerability to sexual exploitation, such as poverty, inequality, and gender-based discrimination, through long-term development and empowerment programs. Building resilience and promoting sustainable solutions can reduce the risk of exploitation in emergencies and beyond.

5. Child Protection in Emergencies (CPiE's) Under the National and International Framework

Child Protection in Emergencies is the prevention of and response to abuse, neglect, exploitation of and violence against children in emergencies. Also includes addressing psychosocial wellbeing of children and caregivers.

The definition of Child Protection, as agreed by Child Protection Working Group, is "the prevention of and response to abuse, neglect, exploitation and violence against children". Thus, child protection is not the protection of all children's rights but refers instead to a subset of these rights. (Ref: "Minimum Standards for Child Protection in Humanitarian Action" by CPWG)
Child Protection in Emergency is guided by UNCRC, Child Protection Welfare Act 2010 Khyber Pakhtunkhwa, National disaster Act 2010, UNICEF Core Commitments and Minimum Standards of Child Protection in Humanitarian Action.

Pakistan signed the UNCRC on 20th November 1989 and ratified in 12 December 1990. Supporting articles of United Nations Convention on Rights of Children (UNCRC) include:

- **Art. 2 –** all rights guaranteed by the UNCRC available to all children without discrimination.
- **Art. 3 –**the best interests of the child must be a primary consideration in all actions.
- **Art. 6 –** every child has the right to life, survival and development.
- **Art. 12 –** children's view must be considered and taken into account.

Protection rights – ensure children are safeguarded against all forms of abuse, neglect and exploitation, including special care for refugee children; children in the criminal justice system; children in employment; and children who have suffered exploitation or abuse of any kind.

- **Art 22 –** Refugee children
- **Art. 38 –** Protection of Children Affected by Armed Conflict
- **Art. 39 –** Rehabilitation of Children Affected by Armed Conflict

- Hazards and injury prevention
- Physical violence and harmful practices
- Sexual Violence
- Psychosocial distress and mental disorder
- Children associated with armed forces or armed groups
- Child labour (boys/Girls)
- Separated and unaccompanied children
- Justice for children (girls/Boys)

Minimum Standards for Child Protection in Humanitarian Action-Standard 1 –Coordination, is stating that relevant and responsible authorities, humanitarian agencies, civil society organizations and representative of affected populations coordinate their child protection efforts in order to ensure full, efficient and timely response.

Right and timely coordination helps in assisting the related bodies in facilitating child protection and targeting the issues related to it. It brings all the relevant actors on one platform for achieving the better result.

5.1 Objectives of Coordination Mechanism:

The establishment of coordination mechanisms in any context, especially in humanitarian and emergency response efforts, serves several crucial objectives:

1. **Efficiency and Effectiveness:** Coordination mechanisms ensure that efforts are not duplicated and resources are utilized efficiently. By bringing together different actors, such as government agencies, non-governmental organizations (NGOs), international organizations, and local communities, coordination mechanisms help streamline activities and optimize the use of available resources.
2. **Information Sharing:** Coordination mechanisms facilitate the sharing of critical information among stakeholders. This includes sharing data on needs assessments, available resources, best practices, and emerging challenges. Timely and accurate information sharing enables better decision-making and enhances the overall response effort.
3. **Resource Mobilization:** Coordinated efforts can attract more resources, both financial and material, to address the needs of affected populations. By presenting a unified front, coordination mechanisms can better advocate for funding and support from donors, governments, and other stakeholders.
4. **Avoiding Gaps and Redundancies:** Coordination mechanisms help identify gaps in services or coverage areas and work to address them promptly. By mapping out the activities of various actors, coordination mechanisms can ensure that all essential needs are met and that no population is left underserved or overlooked.
5. **Harmonization of Standards and Approaches:** Different organizations and agencies may have their own standards, guidelines, and approaches to humanitarian assistance. Coordination mechanisms provide a platform for harmonizing these diverse approaches, ensuring consistency and coherence in the response effort. This helps maintain the quality and effectiveness of interventions.
6. **Accountability and Transparency:** Establishing coordination mechanisms enhances accountability among participating organizations and agencies. By clarifying roles, responsibilities, and reporting mechanisms, coordination mechanisms promote transparency and accountability in the use of resources and the delivery of services.
7. **Stakeholder Engagement and Participation:** Coordination mechanisms foster collaboration and engagement among diverse stakeholders, including government authorities, humanitarian agencies, civil society organizations, and affected communities. By involving stakeholders in decision-making processes, coordination mechanisms ensure that interventions are responsive to the needs and priorities of affected populations.
8. **Adaptability and Flexibility:** In dynamic and rapidly evolving situations, coordination mechanisms provide a platform for adapting and adjusting response strategies as needed. By facilitating regular coordination meetings, information exchange, and feedback mechanisms, coordination mechanisms enable stakeholders to respond effectively to changing circumstances and emerging challenges.

5.2 Major Role of Coordination

The major role of Gender-Based Violence (GBV) coordination in humanitarian and emergency response efforts includes:

1. GBV coordination mechanisms provide leadership and oversight for the integration of GBV prevention and response activities into broader humanitarian responses. They ensure that GBV is recognized as a priority issue and that comprehensive strategies are developed and implemented to address it effectively.
2. GBV coordination mechanisms facilitate the development of strategic plans, guidelines, and standard operating procedures (SOPs) for GBV prevention and response. They provide guidance on best practices, evidence-based interventions, and relevant international standards to ensure a coordinated and comprehensive approach.

3. GBV coordination mechanisms support capacity building and training initiatives for humanitarian actors, including staff from government agencies, NGOs, and UN agencies. They provide training on GBV prevention, survivor-centered response, and the integration of GBV considerations into various sectors, such as health, protection, and shelter.
4. GBV coordination mechanisms offer technical support and expertise to ensure the quality and effectiveness of GBV prevention and response interventions. They provide guidance on the design, implementation, and monitoring of GBV programs, as well as support for data collection, analysis, and reporting on GBV incidents.
5. GBV coordination mechanisms facilitate the collection, analysis, and sharing of data on GBV incidents and trends. They support the development and maintenance of information management systems for GBV, including databases, mapping tools, and reporting mechanisms, to inform decision-making and advocacy efforts.
6. GBV coordination mechanisms oversee the monitoring and evaluation of GBV prevention and response activities to assess their impact and effectiveness. They support the development of monitoring frameworks, indicators, and tools to track progress, identify challenges, and inform programmatic adjustments.
7. GBV coordination mechanisms promote coordination and collaboration with other sectors, such as health, protection, education, and livelihoods, to ensure a multi-sectoral approach to addressing GBV. They facilitate the integration of GBV considerations into sectoral assessments, planning, and programming to address the underlying causes and consequences of GBV.
8. Overall, GBV coordination plays a critical role in ensuring a comprehensive, coordinated, and effective response to GBV in humanitarian settings, with the ultimate goal of preventing and mitigating the impact of GBV on affected populations.

5.3 Multi-Level Model

Program experiences from the field reveal that no single sector or agency can adequately address GBV prevention, mitigation and response alone. The multi-sector model calls for holistic, interagency response and coordinate across sectors, including (not limited to) Health, mental health and psychosocial, legal/justice and security.

Survivors are linked to these different sectors of service through case management. This model builds on an understanding that survivors have political and socio-economic rights, which span a range of needs and services.

Another critical component of the multi-sector model is interred and intra-sector coordination including creation and monitoring of referral pathways, information sharing and participation in regular meetings with representatives from the various sectors, GBV Sub-working group and other coordination mechanism in place must work towards ensuring presence and quality of programing in each of these sectors of response in emergencies sittings.

(UNFPA's 2015 publication Minimum standards for prevention and Response to GBViE's)

6. Disabilities Inclusion in Gender Based Violence, PSEA and Other Protection Programing in Humanitarian Response

According to national guidelines on vulnerable groups in disasters issued by NDMA, "Persons with Disabilities are defined as those who have physical, sensory or emotional or learning difficulties that impede their access and use of standard disaster support services"

The following key inclusive standards have been developed by **"Humanitarian inclusion standards for older people and people with disabilities"**

1. **Identification:** Older people and people with disabilities are identified to ensure they access humanitarian assistance and protection that is participation, appropriate and relevant to their needs.
2. **Safe and Equitable Access:** Ops and PWDs have safe equitable access to humanitarian assistance.
3. **Resilience:** Ops and PWDs are not negatively affected, are more prepared and resilient, and are less at risk as a result of humanitarian action.
4. **Knowledge and Participation:** PWDs & Ops know their rights and entitlements and participate in decisions that affected their lives.
5. **Feedback and complaints:** Ops and PWDs have access to safe and responsive feedback and complaints mechanisms.
6. **Coordination:** PWDs and Ops access and participate in humanitarian assistance that is coordinated and complementary.
7. **Learning:** Organizations collect and apply learning to deliver more inclusive assistance.
8. **Human Resource:** Staff and volunteers have the appropriate skills and attitudes to implement inclusive humanitarian action, and Ops and PWDs have equal opportunities for employment and volunteering in humanitarian organization
9. Logical Fine Points of Gender Based Violence, Protection from Sexual Exploitation Abuse, Protection Coordination Mechanism and Facilitation Bodies.

6.1 Pre-Disaster

- Ensure that well defined Gender & Child protection coordination mechanism is in place;
- Activate the dissemination of important information in regard to Gender/GBV, children, People with Disabilities and Older Peoples effected during previous disasters and related issues;
- Promote awareness about protection concerns of vulnerable groups and welfare focused legislations, both national and international.
- Modify Child Protection Rapid Assessment in local context.
- Evaluate the existing Gender/GBV, child and Persons with Disabilities (PWDs) protection mechanisms and response procedures among different stakeholders.
- Develop/update service directory based on 5Ws tools in partnership with stakeholders.
- Ensure that expected human resource as actors in the coordination mechanism are gender sensitive, trained and prepared.
-

6.2 Response

- Bring the related actors on board and define roles and responsibilities according to the developed mechanism.
- Ensure the information management related to issues of Gender/GBV, child protection during disaster for prioritizing the response.
- Based on 5Ws and organizational capacities agree on line of action;
- Ensure protection of children and women, PWDs and Ops etc. by bringing in all the related actors in the coordination mechanism.
- Respond to GBV and violations of child rights.
- Maintained gender and age segregated database management.

7. Role & Responsibilities of Stakeholders (Terms of Reference)

As Coordination is the shared responsibilities, it is empirical for mapping of potential stakeholders to implement coordination mechanism. The development of Tor's will make the actors responsible for their role and will help them commit to the tasks that they are assigned. The determination of roles and responsibility clarifies and ensures timely response. The roles and responsibilities of main and related actors are documented below:

7.1 District Disaster Management Unit Nowshera

District Disaster Management Unit (DDMU) is working and functional at district level in Khyber Pakhtunkhwa. DDMU act as third tier of Disaster Management framework and perform as first responder before and after disaster within district. At District level, Additional Deputy Commissioner (Relief & Human Rights) or Assistant Commissioner (Head Quarter) is declared as District Disaster Management Officer (DDMO) in the district.

- DDMU is the focal point at district level for all humanitarian agencies, CBOs, communities and line departments.
- Mapping of service providers working in district Nowshera
- Chair district coordination meetings with stakeholders for fulfilling the gaps in relief operation.
- DDMO being the Head of Claim Assessment Committee (CAC) at district level, DDMU will ensure timely disbursement of compensation cheques to the affected population as per policy/rules
- Data management regarding affected population, Relief services, Distribution of items, GBVIE/PSEA, CPiEs cases and other protection concerns.
- Notification of district working groups on different thematic areas (GBViEs/ PSEA, CPiE, and Health/Nutrition) for addressing special needs of vulnerable groups.
- Maintain effective communication mechanism regarding early warning systems.
- Facilitating humanitarian organizations in resolving their challenges for smooth implementation of projects
- Forward urgent information related to GBV, women and child protection to all relevant agencies for immediate response.
- Assist the stakeholders in establishing temporary relief (crises centers), protective Spaces for women and child protection related cases.
- Establish women and child protection response mechanisms and services.
- Assist in rapid assessment, case identification and verification.
- Enhancing safety and wellbeing of women and children during emergencies.
- Information sharing and making referrals.
- Monitoring exercises

7.2 Social Welfare Department

The Department of Zakat, Usher, Social Welfare, Special Education & Women Empowerment Khyber Pakhtunkhwa is mandated to look after various marginalized segments of population such as poor, destitute women, persons with disabilities orphan, victims of violence and drugs addicted through established Institutions and Autonomous Bodies across the Province. District level stakeholders identified the following Role and Responsibilities as per mandate:

- To take care of general protection of vulnerable population in emergencies with a special focus on GBV/PSEA, women, children, PWDs and Transgender.
- To keep data all vulnerable groups effected in emergencies and their needs.
- To share the vulnerability data with line departments and NGOs for any special assistance.
- Make necessary arrangement for re-integration rehabilitation of survivors

- Ensure accessibility of PWDs and Ops to available relief services.
- Assist DDMU in conducting district coordination meeting in time of emergencies.
- Establish crises centers for women and child protection and refer cases to shelter homes
- Provide recreational facilities at women and child friendly centers.
- Creating awareness in public on Bolo Help line.
- Formulate services mapping at district level and referral pathway for referral mechanism to link vulnerable people with services
- Establish Panahgahs (shelters) with joint support of Baitul Mal for displaced people for shelter and food.

7.3 Tourism Department

Tourism is the mainstay of local economy for the Khyber Pakhtunkhwa. Tourism department has taken the proactive approach and identified the potential evacuation centers for the tourist destinations in wake of any utmost situation. The following responsibilities are hereby chalked out for tourism department for any emergency's situation.

- Coordination with DDMU/PDMA/PEOC and Pakistan Metrological Department for early warning about hazards and risks prevalent in tourist areas
- Enhance awareness of tour operators, hotel management, hotels and motel association, transporters and other stakeholders about risk areas, GBV, PSEA and the needs for Disaster preparedness strategies in tourism industry.
- Public awareness materials on GBV, PSEA. Protection guidelines, seasonal hazard and risks in tourist destinations.
- Displays of evacuation rout Map in the tourist areas in case of any disaster situation.

7.4 Education Department

- To maintain information on all the available education resources needed in time of emergencies.
- To make necessary educational arrangement for affected children including girls in time of emergencies
- Maintain school enrollment record during emergencies setting.
- Formation of parent teacher council for urgent matters.
- Create awareness about Disaster Risk Reduction.
- Training for teachers on Disaster Risk Reduction, Protection, Camp Management and Response.
- To maintain strong coordination and information sharing with DDMU, line departments and NGOs to better response to address educational issues especially related to girls.
- School Nutrition and feeding programs should be initiated with WFP for stay children in schools.

7.5 Police Department

- To provide overall security and launch FIR in case of missing and separated child, Gender based Violence and exploitation.
- Help in family tracing of unaccompanied child or separated women.
- To collect all information related to women and children that can help in family tracing.
- To provide protection support to women and children at risk or survivors of GBV
- Link to other related department for support of women and children in their custody, especially arrangement to be made for girl's children.
- Liaise with women shelter homes in case of violence against women.
- Provide security to the installation of Early Warning systems in the districts.

7.6 Health Department

- Create duty plans for doctors/lady doctors and paramedic staff in emergencies.
- Psycho-social support services to survivors of violence/affected by disaster.
- Ensure availability of pediatrician during emergency health services.
- Ensure availability of lady doctor and required medications for women/girls during emergency situations.
- Ensure availability of pediatric medicine during emergency health services.
- Facilitated vaccination process for children.
- Coordination with DDMU, line departments and NGOs for information sharing
- Establish a referral mechanism to linked people with other related services

7.7 Legal Support Services By Partners

- Establish referral mechanism with legal support services at the district level to provide women and children with the legal assistance specially to survivors of S/GBV
- Ensure provision of free of cost legal support to the S/GBV survivors

7.8 Rescue 1122 Services

- To establish stations in identified Disaster prone areas as per District administration/ DDMU/PDMA instructions.
- Mock exercise with local communities on FIRST AID, boating and swimming tactics etc.
- Ensure services to be linked with local communities as special focus on services for pregnant women, Ops and PWDs.
- To develop safer communities through establishment of an affective system for emergency preparedness, response and prevention.
- Special arrangements to be made to on air various radio program to educate local people to better utilized Rescue 1122 Services in case of emergencies.

7.9 Child Protection Unit

- Identify children who are at risk of abuse, neglect, exploitation, or violence.
- Assess the level of risk and immediate safety needs of children.
- Take urgent action to protect children from harm when necessary.
- Receive and investigate reports or complaints concerning child welfare.
- Monitor and follow up on cases until risks are reduced or eliminated.
- Refer children and families to appropriate support services, such as counseling, medical care, legal aid, or shelter.
- Maintain confidential records of child protection cases, prepare reports, assessments, and recommendations, Collect and analyze data to improve child protection services.
- Coordinated the submission of data on separated and unaccompanied children to PDMA through the ADC Relief to support child protection coordination and response efforts.

7.10 Civil Defense District Nowshera

- Civil Defense is the attached department of Relief, Rehabilitation & Settlement Department which is regulated under the Civil Defense Act 1952. The Civil Defense has a Razakar frontline force in large scale at district level for civil emergencies such as floods, earthquake, Invasion and Civil disorder. The RazaKar is numbering more than 42,000 across the province. The core responsibilities of Civil Defense are the following:
- Establishment of Emergency Control room and to be linked with DDMU and provincial Emergency Operation Center (PEOC)

7.11 Local FM Radio

- Creating awareness on GBV, PSEA, CPiE's, special needs of PWDs and other protection concerns.
- Collection and dissemination of information to and from communities including women/girls.
- Assisting in identification of women and child protection issues and its solution through collaborative approach while taking care of confidentiality of all cases.
- Development of harmonization on information gathered for protective environment.

8. Illustrative Functional Coordination Mechanism to Prevent and Respond to GBViE/ PSEA and Other Protection Concerns

8.1 Strategy for the Implementation of Coordination Mechanism

- With the consultations of line departments, DDMU, CBOs and humanitarian Agencies, implementation strategy has also been framed to better address the concerns of GBVIE, PSEA, CPIE, women, adolescent girls, PWDs and other protection concerns. They were agreed that there should be a District level committee for implementation of CM and oversight the progress and challenges in identification, Assessment, Referral, case management and follow up before and after disaster situation. The structure and functions of District Level Committee is given below.

8.2 Structure of District Level Committee

1.	(DC/DDMO/ADC Relief/Human Right)	(Chairman)
2.	District Education Officer (Male)	(Member)
3.	District Education Officer (Female)	(Member)
4.	District Social Welfare Officer	(Member)
5.	Child Protection Unit	(Member)
6.	District Health Officer	(Member)
7.	Chairman Safety Committee	(Member)
8.	In Charge Dar-ul- Aman	(Member)
9.	District Police Officer,	(Member)
10.	Local Government	(Member)
11.	Representative from Transgender's Community.	(Member)

8.3 Core Functions of the Committee

a. Committee may call Quarterly Meeting; however, it may also be called on need based.
b. Review of existing situation in regarding GBVIE, PSEA, CPiE and other protection Concerns
c. Conduct an analysis on case management, highlighting challenges and give directions for corrective actions/measures to fill up the gaps.
d. Maintaining Database at DDMU level
e. Develop progress tracking and complaint response mechanism
f. To in place Follow up mechanism

9. Service Mapping of District Nowshera for GBV, PSEA, Women Empowerment, CPIES, LEGAL AID, MHPSS, Health etc.

Nowshera District Administration			
S.No	**Name of Institution**	**Contact Information & Service Timings**	**Nature of Service Provided**
1	**Deputy Commissioner Nowshera**	Mr. Gohar Zaman Wazir 0333-5755069 0923-9220098-99 **Hours of Operation:** Monday-Friday 09:00am -5:00pm	This office is responsible for overall administration and control at district level
2.	**District Disaster Management Unit, Additional Deputy Commissioner**	**0923-9220099** **Arif Afridi: 0345-4455435**	

Government Bodies in District Nowshera			
S.No	**Name of Institution**	**Contact Information & Service Timings**	**Nature of Service Provided**
1	**District Social Welfare Department Nowshera**	DD Mr. Khalid 0334-9181242 **Hours of Operation:** Monday-Friday 09:00am -5:00pm	Provides assistance for Child Protection & Welfare, Women Welfare & Empowerment, Welfare & Rehabilitation of Persons with Disabilities (PWDs), Senior Citizens, professional guidance & Financial assistance
2	**Bolo Helpline - Social Welfare Directorate**	0800-22227 **Hours of Operation:** 24/7	Assist GBV Victims and persons with disabilities across Khyber Pakhtunkhwa for immediate psychological support, referral services, awareness on basic rights and legal aid in consultation with lawyers' panels
3	**Irrigation Department**	Mr. Mazhar 0345-9309089 Hours of Operation: Monday-Friday 09:00am -5:00pm	
4	**C&W Building Division**	Mr. Kamal Saab 0300-1222388	
5	**C & W Highway Division**	Mr. Shah Saud 0333-5876969	
6	**PHE Department**	Mr. Arsalan 0345-9025178	
7	**Education Department**	DEO: Mr. Shah Jehan 0336-9497453	
8	**Education Department (Female)**	Miss Safia Ameen 0333-9064886 9220105	
9	**TMA Nowshera**	TMO Mr. Almar Khan 0332-9739219	
10	**Livestock Department**	DD Livestock Dr. Iqbal 0333-9136274	
11	**Food Department**	DFC: Mr. Jamshed Afridi 0332-9959122	
12	**Forest Department**	DFO Mr. Ishfaq 0334-5584452	
13	**NHA**	DD: Mr.: Naveed Ahmad 0923-580220	
14	**DPO Nowshera**	DPO Mr. Muhammad Azhar Khan 0923-9220102 **Hours of Operation**: 24/7	Responsible for the registration of FIR for cases of violence, theft, murder, kidnapping, rape and other similar offences. One Each in every Police Station 1. Legal aid 2. Help in awareness campaigns 3. Share detail of cases involving child at risk
15	**Police Station Nowshera Cantt**	Contact: 0923-9220113 **Hours of Operation:** 24/7	
16	**Police Station Akbar Pura**	Contact: 0923-590253 **Hours of Operation:** 24/7	
17	**Police Station Akora**	Contact: 0923-561603 **Hours of Operation:** 24/7	
18	**Police Station Aza Khel**	**Contact: 0923-580424** **Hours of Operation:** 24/7	
19	**Police Station Jalozai**	Contact: 0343-9186925/03119232841 **Hours of Operation:** 24/7	
20	**Police Station Kala**	Contact: 0923-9220114 **Hours of Operation:** 24/7	
21	**Police Station Misri Banda**	Contact: 0300-4461973/03468391039 **Hours of Operation:** 24/7	
22	**Police Station Nizam Poor**	Contact: 0923-923087 **Hours of Operation:** 24/7	
23	**Police Station Pabbi**	Contact: 0923-529223 Hours of Operation: 24/7	
24	**RESCUE 1122**	Contact: Mr. Awais Babar. 0923-9220299 **Hours of Operation: 24/7**	
25	**RESCUE 1122**	Contact. Asad Zaman. 0333-9339388. 0923-9220312. Hours of Operation: 24/7	
26	**District Central Jail**	Contact: 0923-9220017 Hours of Operation: 24/7	
27	**District Public Prosecutor**	District Public Prosecutor Mr. Afrasyab Yousafzai Contact: 0923-9220016	
28	**District Bar Nowshera**	Syed Mukhtar Ali Shah General Secretary Contact: 03452947376	Providing legal aids

Shelter Homes in District Nowshera			
S. No	**Name of Institution**	**Contact Information & Service Timings**	**Nature of Service Provided**
1	**Dar-ul-Aman**	Mr. Ikram 0923-644379 Contact: 0943412055 **Hours of Operation:** 24/7	Boarding and Lodging facility 1. Counselling, 2. Healthcare provision 3. Food, 4. Clothing, 5. Women specific essentials, 6. Communication, 7. Referral assistance

Economic Empowerment/Skills Development Support Providers in District Nowshera			
S. No	**Name of Institution**	**Contact Information & Service Timings**	**Nature of Service Provided**
1	**Social welfare, Special Education and Women Empowerment Department**	Contact 0333-9101263 **Hours of Operation:** 8:00am - 2:00pm	1.Report Cases 2. Issues disability certificate 3.Special Education
2	**District Social Welfare Office Nowshera**	Shumaila 03149030426 **Hours of Operation:** 9:00am - 4:30pm	Vocational training in stitching, embroidery, knitting
3	**BISP Nowshera**	(0923) 528597	financial support
4	**District Zakat Office**	**Mr. Sabir Saab** **0923-9220461** **0311-9194000"** **Hours of Operation:** 9:00am - 2:00pm	Give money to needy Person
5	**Govt Degree College for Girls**	Contact: 0923-9220143 **Hours of Operation**: 9:00am -5:00pm	providing higher education to female students in Chitral.
6	**Information office Nowshera**	Contact: 0923-9220098 **Hours of Operation**: 9:00am -5:00pm	Official responsible for disseminating information and maintaining public relations
7	**NADRA**	AD Mr. Qaiser Contact: 0345-9353534 **Hours of Operation:** 9am to 1 pm	Issuing NIC Form B
8	**District Khateeb**	**Mr. Hamid** **Contact: 0300-9055572** **Hours of Operation:** 9am to 1 pm/ 6 days	Religious leader provide awareness in community on different issues

10. Annex

10.1 GBV Guiding Principles

- GBV guiding principles and approaches the following guiding approaches and principles15 underpin all standards, and are referred to throughout the Minimum Standards as the 'GBV guiding principles':

10.2 Survivor-centered Approach

- A survivor-centered approach creates a supportive environment in which the survivor's rights and wishes are respected, their safety is ensured, and they are treated with dignity and respect. A survivor-centered approach is based on the following guiding principles
- Safety: The safety and security of the survivor and her/his children is the primary consideration.
- Confidentiality: Survivors have the right to choose to whom they will or will not tell their story, and information should only be shared with the informed consent of the survivor.
- Respect: All actions taken should be guided by respect for the choices, wishes, rights and dignity of the survivor. The role of helpers is to facilitate recovery and provide resources to aid the survivor.
- Non-discrimination: Survivors should receive equal and fair treatment regardless of their age, gender, race, religion, nationality, ethnicity, sexual orientation or any other characteristic.

10.3 Rights-based Approach

- A rights-based approach seeks to analyze and address the root causes of discrimination and inequality to ensure that everyone has the right to live with freedom and dignity, safe from violence, exploitation and abuse, in accordance with principles of human rights law.

10.4 Community-based Approach

A community-based approach ensures that affected populations are engaged actively as partners in developing strategies related to their protection and the provision of humanitarian assistance. This approach involves direct involvement of women, girls and other at-risk groups at all stages in the humanitarian response, to identify protection risks and solutions, and build on existing community-based protection mechanisms. Humanitarian principles: The humanitarian principles of humanity, impartiality, independence and neutrality should underpin the implementation of the Minimum Standards and are essential to maintaining access to affected populations and ensuring an effective humanitarian response.

10.5 "Do no harm" Approach

A "do no harm" approach involves taking all measures necessary to avoid exposing people to further harm as a result of the actions of humanitarian actors.

10.6 Principles of Partnership

The Principles of Partnership comprise a framework for all actors in the humanitarian space to follow principles of equality, transparency, a results-oriented approach, responsibility and complementarity. The principles strive to highlight the role of local and national humanitarian response capacity, and enhance the effectiveness of humanitarian action based on accountability to affected populations.

10.7 Best Interests of The Child

Child and adolescent girl and boy survivors of sexual abuse have the right to have their best interests assessed and determined and taken as a primary consideration in all decisions that affect them.

The above guiding principles and approaches are linked to the overarching humanitarian responsibility to provide protection and assistance to those affected by crisis. They serve as the foundation for all humanitarian actors when planning and implementing GBV-related programming. It is important to underscore that:

GBV encompasses a wide range of human rights violations. Preventing and mitigating GBV involves promoting gender equality, and beliefs and norms that are respectful and non-violent.
Safety, respect, confidentiality and non-discrimination in relation to survivors and those at risk are vital considerations at all times.
GBV-related interventions should be context-specific in order to enhance outcomes and **"do no harm".**
Participation and partnership are cornerstones of effective GBV response and prevention.

11. Annex 2

The table presents various types of GBV in humanitarian settings, with an example of its impact. These impacts are magnified in humanitarian settings.

GBV IN HUMANITARIAN CONTEXTS	EXAMPLES OF IMPACT
GBV (child marriage) and mortality	Seven out of the 20 countries with the highest rates of child marriage are affected by large-scale humanitarian crises, including Chad, Ethiopia, Mali, Nigeria, Somalia and South Sudan. Yemen and Syria are also severely affected by child marriage. Child brides are more likely to experience frequent and early pregnancies, which may cause a range of long-term health complications and, in some cases, death. Complications in pregnancy and childbirth are the leading cause of death in girls aged 15 to 19 globally (for more information see the inter-agency initiative Girls Not Brides).
GBV (forced abortion) and women's reproductive health	Many women in Colombia have been subject to forced abortions and births, especially within guerrilla groups. Moreover, many abortion procedures were inadequate and took place very late in the pregnancy, resulting in high risks of health complications.
GBV (conflict-related sexual violence), fistula and post-traumatic stress disorder (PTSD)	A 2016 study conducted in Goma in the Democratic Republic of Congo (DRC) found that women who had survived conflict-related sexual violence (CRSV) were significantly more likely to have fistula and chronic pelvic pain compared with survivors of other types of sexual violence. Survivors of CRSV also experienced more severe forms of depression and PTSD, compared with those who also had fistula, and scored highest among the respondents on PTSD and other mental health severity scales.3
GBV (domestic violence and sexual harassment) and mental health	In Indonesia (following Pidie Jaya earthquake and Bima floods in 2016), 13 per cent of respondents reported that women and girls felt distressed by the rise in domestic violence after the disasters. Adolescent boys and girls reported that unsafe temporary housing arrangements during the disasters triggered an increase in sexual harassment

About The Author

Muhammad Saddiq is a Ph.D. scholar in Sociology with extensive academic and professional expertise in Disaster Management, Social Protection, and Gender Integration. He holds an M.Phil. in Sociology from Bacha Khan University, a Master's degree in Political Science from University of Peshawar, and a Postgraduate Diploma in Climate Change from Institute of Management Sciences (IMSciences).

With significant experience in humanitarian response and disaster management, he has worked extensively in the areas of Education in Emergencies (EiE), Camp Management, Child Protection in Emergencies (CPiE), Prevention of Sexual Exploitation and Abuse (PSEA), and Gender-Based Violence in Emergencies (GBViE). His professional contributions focus on integrating gender and protection perspectives into Disaster Risk Management (DRM) and Disaster Risk Reduction (DRR), while promoting the inclusion of vulnerable and marginalized populations in policies, contingency planning, and standard operating procedures for monsoon, winter, and heatwave responses.

As a skilled trainer and facilitator, Muhammad Saddiq has designed and conducted numerous capacity-building trainings and workshops on protection and emergency response themes, including CPiE, Gender in Emergencies (GiE), case management, referral mechanisms, mine risk education, and child-centered disaster risk reduction. His work consistently advocates for inclusive, rights-based disaster management approaches that prioritize women, children, persons with disabilities, and other at-risk communities.

He is also the author of the booklet Functional Coordination Mechanism to Address GBViE and Other Protection Concerns in Humanitarian Settings at District Disaster Management Unit, which presents a practical coordination framework to strengthen stakeholder collaboration in addressing GBViE and broader protection concerns during humanitarian emergencies.

GENDER AND CHILD CELL

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