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**Guidelines and Checklist for Disaster Management Responsive to
Fundamental Rights and Gender Equality**

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Ankara



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List of Abbreviations

AFAD	Disaster and Emergency Management Authority
CEDAW	Declaration on the Elimination of Discrimination against Women
CRC	Convention on the Rights of the Child
CRPD	Convention on the Rights of Persons with Disabilities
IASC	Inter-Agency Standing Committee
IFRC	International Federation of Red Cross and Red Crescent Societies
IRAP	Provincial Disaster Risk Reduction Plan
NGO	Non-Governmental Organisation
PwD's	Person with Disabilities
TAMP	Disaster Response Plan of Türkiye
TARAP	Disaster Risk Reduction Plan of Türkiye
UN	United Nations
UNDRR	United Nations Office for Disaster Risk Reduction
UNICEF	United Nations International Children's Emergency Fund



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Definitions

Community-Based Approach: Participatory and inclusive process that encourages both children and adults in society to express their own needs, decide their own future and be empowered to meet these needs independently (IFRC Roadmap to Community Resilience)

Community Resilience: The ability of individuals, communities, organisations or countries exposed to disasters, crises and underlying vulnerabilities to anticipate, prepare for, reduce the impact of, cope with and recover from the effects of shocks and stresses without compromising their long-term prospects (IFRC Framework of Community Resilience)

Disaster: The result of nature, technology and human-induced events that cause physical, economic and social losses for the whole or certain segments of the society, stop or interrupt normal life and human activities, and for which the affected society has insufficient coping capacity (AFAD Annotated Disaster Management Dictionary)

Disaster Risk Reduction: The concept and practice of reducing disaster risks through systematic efforts to analyse and manage the causal factors of disasters, including through reduced exposure to hazards, lessened vulnerability of people and property, wise management of land and the environment, and improved preparedness for adverse events. (UNISDR-DRR Terminology)

Disaster Risk Management: The process of identifying and analysing hazards and risks at the scale of a country, region, city or settlement, determining opportunities, resources and priorities to reduce the risk, preparing and implementing policy and strategic plans and action plans (AFAD Annotated Disaster Management Dictionary)

Disaster Management: An all-out response process that must be carried out by society in order to prevent disasters and reduce their damage, to intervene in timely, fast and effective events that result in disasters, and to create a safer and more developed new living environment for communities affected by disasters (AFAD Annotated Disaster Management Dictionary)

Emergency: A state of crisis caused by events that are large, but usually manageable with local means, that stop or interrupt the normal life and activities of the whole or certain segments of the society and require urgent intervention (AFAD Annotated Disaster Management Dictionary)

Fundamental Rights: Indispensable rights such as the right to life, personal immunity, freedom to seek justice, which individuals have from birth, which are recognised and protected by the state, and which are necessary for a humane life (Human Rights and Equality Institution of Türkiye)

Hazard: Physical events and phenomena of natural, technological or human origin that occur at a certain time or geography and threaten life and affect the socioeconomic order and activities of the society, the natural environment, natural, historical and cultural resources (AFAD Annotated Disaster Management Dictionary)

Humanitarian Aid: Aid or assistance such as search and rescue, emergency health services, nutrition and shelter provided independently of political, economic and military purposes to ensure the stability of the international community for regions facing needs such as life safety, hunger, thirst, famine and shelter problems as a result of natural disasters, human-caused wars, drought and social conflicts (AFAD Annotated Disaster Management Dictionary)

Early Recovery: Short-term recovery activities initiated immediately after the event to correct the deteriorating living conditions caused by disasters and emergencies (AFAD Annotated Disaster Management Dictionary)

Mitigation: All of the structural or non-structural measures and activities that must be taken before, during and after the disaster in order to prevent natural, technological and human-induced hazards and environmental degradation from resulting in disasters or to reduce their effects (AFAD Annotated Disaster Management Dictionary)

Mitigation can be part of risk reduction strategies, but the two have different focuses.

Recovery: Process that covers all the legal, institutional, physical, social and economic activities that need to be carried out for disaster management to meet the needs of communities affected by disasters in the most rational ways and methods, to ensure that life returns to normal as soon as possible, to improve the ability to cope with possible disasters and to create a safer living environment that will minimise damage (AFAD Annotated Disaster Management Dictionary)

Risk: The probability of loss of life, property, economic and environmental values in a certain event, under certain conditions and settings. (AFAD Annotated Disaster Management Dictionary)

Stakeholder: Persons, institutions, or organisations directly or indirectly involved in, interested in, and affected directly or indirectly by the outcomes of humanitarian interventions

Vulnerable Groups: Certain population segments that are at risk of adverse outcomes or harm due to various factors such as socio-economic status, age, disability, health status, geographical location or minority status (AFAD Annotated Disaster Management Dictionary)



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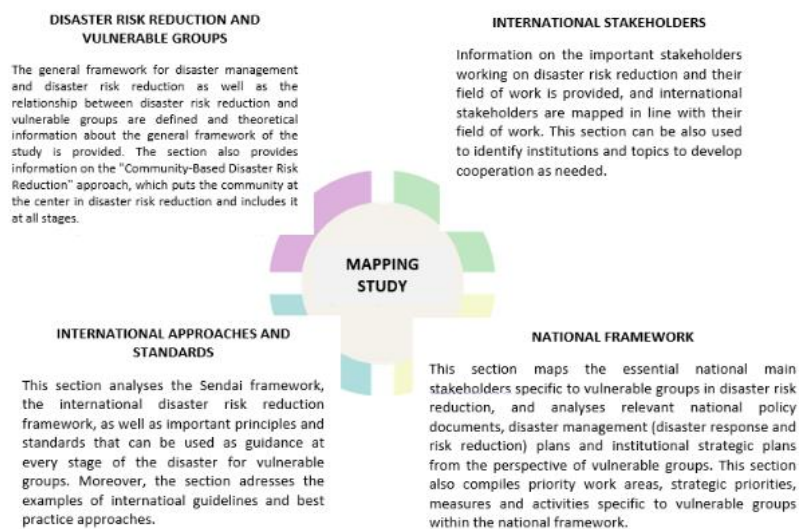
ABOUT THE GUIDELINES

Disaster risk reduction aims to ensure community preparedness for disasters, minimise the risks arising from disasters, and increase community resilience to reduce the negative effects of disasters and emergencies. In the disaster risk reduction, it is essential that the risks and challenges affecting different groups of society are addressed equally. The integration of the vulnerable groups' fundamental rights perspective in disaster risk reduction is crucial for ethical and fair disaster management. This integration is a basic approach used for ensuring the community resilience development and disaster preparedness.

'The Guidelines and Checklist for Disaster Management responsive to Fundamental Rights and Gender Equality' are developed under the "Technical Assistance for Strengthening Fundamental Rights Sector Coordination" Project carried out by the Directorate for EU Affairs. The guidelines aim to help national disaster management stakeholders integrate the fundamental rights of vulnerable groups into disaster risk reduction processes and develop their own policies and practices while adopting a perspective based on fundamental rights and gender equality. The use of these guidelines by national disaster management and risk mitigation stakeholders will support an ethical and fair disaster management that protects the rights to life and human dignity of all members of society. Thus, the guidelines aim to make the basic needs of vulnerable groups visible and secure in disaster management processes and to support equal and inclusive access.

The preparation phase of the guidelines included a detailed mapping study to compile secondary data on the following headings to create a basis for the guidelines.

Figure 1 Mapping Study Content



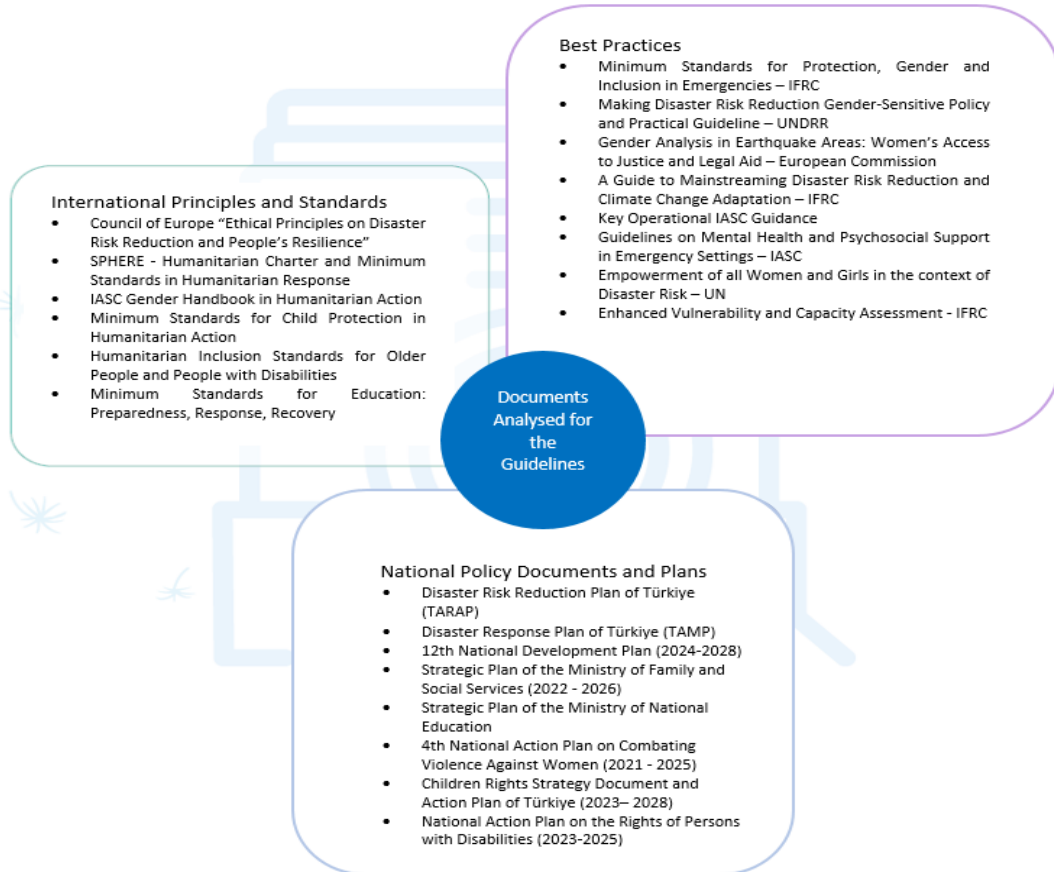


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The documents analysed for the mapping study to form the basis of this guidelines are:

Table 1 Documents Analysed for the Guidelines



Following the above-mentioned Mapping Study and within the scope of the general framework outlined above, the Guidelines and Checklist provide a comprehensive structure that covers priority issues, examples of key activities and verification questions. The guidelines are prepared by examining international humanitarian aid standards, national strategies and action plans and taking into account the priority issues and the feedback provided by national disaster and emergency stakeholders in the focus group meetings held under the project.

Moreover, taking into account international standards, the guidelines serve as a transformation tool for the establishment of national standards, their more effective implementation, raising the awareness of institutions on such standards ensuring effective coordination among institutions. Thus, the guidelines are a living document that will constantly evolve to reflect the knowledge and experience of all disaster risk reduction stakeholders.



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The first section of the Guidelines defines the process flows for the integration of the vulnerable groups' perspective in the fields of **Policy Development and Data Management**, explains critical activities and provides information on *essential issues* that need to be taken into consideration. Moreover, it proposes a coordination framework for **Fundamental Rights Coordination** in disaster management.

The following sections of the Guidelines answer "Why" and "How" questions regarding the integration of the perspective of each vulnerable group (women, children, elderly people and persons with disabilities) into the working areas at every stage of disaster management. In addition to why the vulnerable group perspective is important in work areas, the sections also cover **critical elements, key activities and verification questions** specific to each working area for integration of the fundamental rights perspective.

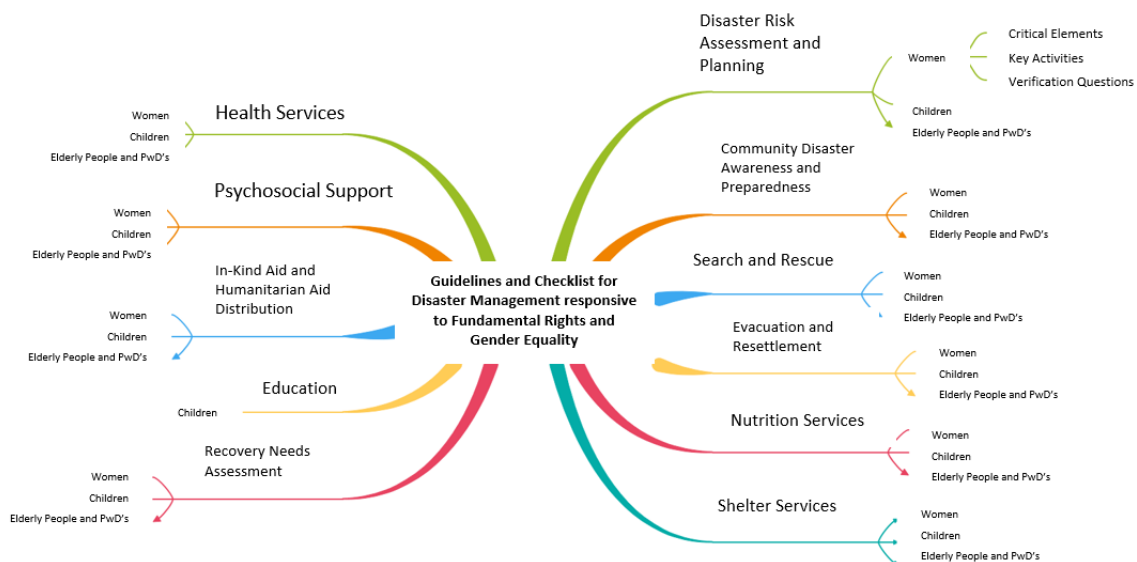


Figure 2 Working Areas and Headings Covered in the Guidelines



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DISASTER MANAGEMENT AND VULNERABLE GROUPS

CORE PRINCIPLES

Humanitarian aid aims to meet the basic needs of people affected by disasters and emergencies and to ensure their access to rights and services such as the right to life, access to food, security and shelter, protect adequate physical and mental health standards and support their right to work. The core humanitarian principles define the core principles and the main framework of humanitarian aid adopted for protecting and supporting these rights. Although the core humanitarian principles are not legally binding, they are considered as the fundamental guide for humanitarian actors and organisations operating in crisis and conflict situations. These principles are based on the human rights legal framework,¹ international humanitarian law and ethical standards, and provide guidance for humanitarian aid activities.

The common core humanitarian principles recognised by states and humanitarian sector stakeholders, including the United Nations, the International Federation of Red Cross and Red Crescent Societies, and the International Committee of the Red Cross, are:

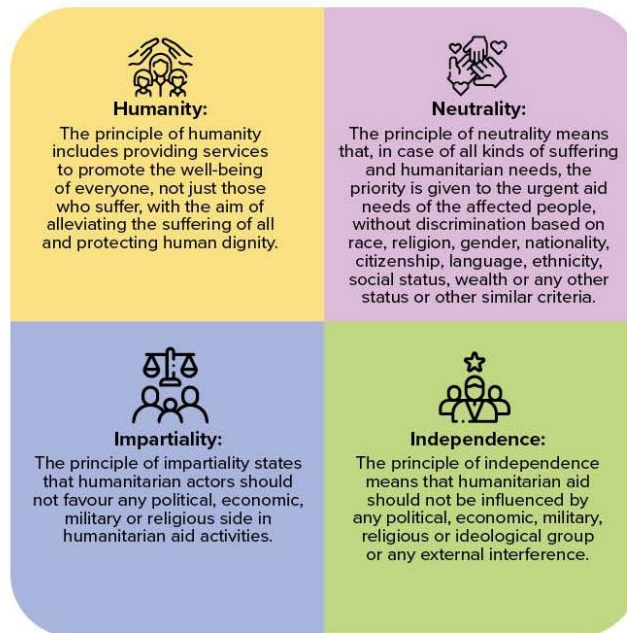


Figure 3 Core Humanitarian Aid Principles

¹ It covers Universal Declaration of Human Rights, Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), Convention on the Rights of the Child (CRC), and Convention on the Rights of Persons with Disabilities (CRPD).



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The relevant international standards², in line with the core principles, state the necessity of the following issues need to be taken into consideration in humanitarian aid efforts, specifically for vulnerable groups:

- √ **Inclusivity:** It refers to taking into account the special needs, vulnerabilities and capacities of all individuals, including vulnerable groups. It aims to provide equal access to all members of the society and to prevent discrimination for any individual while providing aid and support in disasters or emergencies.
- √ **Participation:** The principle of participation refers to the active participation of vulnerable individuals and groups in planning, decision-making and implementation processes. The effective and meaningful participation of vulnerable groups ensures that their perspectives, needs and priorities are reflected in planning, decision-making and implementation processes, and that more inclusive strategies and practices are developed. Participation must be inclusive while ensuring the representation of all differences.
- √ **Accessibility:** The principle of accessibility means that everyone can access aid at every stage of humanitarian aid in line with their needs. In the most general sense, this includes the elimination of physical, economic, social and communication barriers.
- √ **Developing specific strategies and interventions for vulnerable groups:** It involves developing specific programmes, policies and strategies for groups whose vulnerabilities increases during disasters. These interventions aim to mitigate the specific challenges faced by vulnerable groups and to increase their capacities, resilience and ability to cope with disasters.
- √ **Protection and security:** It refers to ensure and sustain the well-being, security and enjoyment of fundamental rights of every individual, including vulnerable groups. It aims to protect human rights and dignity, especially in emergencies.

INTEGRATION OF VULNERABLE GROUPS AT THE POLICY LEVEL

Policies serve as a binding bridge in the implementation of core principles in disaster management. In order to ensure equality, social justice and effective risk reduction in disaster management, it is essential to integrate the rights-based approach that protects the dignity and rights of all individuals, especially vulnerable groups, into institutional policies in line with the core principles. Institutional policies should adopt rights-based approach to protect the rights and dignity of vulnerable groups.

² The above-mentioned principles are compiled from the following sources: Sphere Humanitarian Charter and Minimum Standards in Humanitarian Response, Core Humanitarian Standard on Quality and Accountability, Ethical Principles on Disaster Risk Reduction and People's Resilience, Minimum Standards for Child Protection in Humanitarian Action, Humanitarian Inclusion Standards for Older People and People with Disabilities, Minimum Standards for Education: Preparedness, Response, Recovery, and Gender Handbook in Humanitarian Action.



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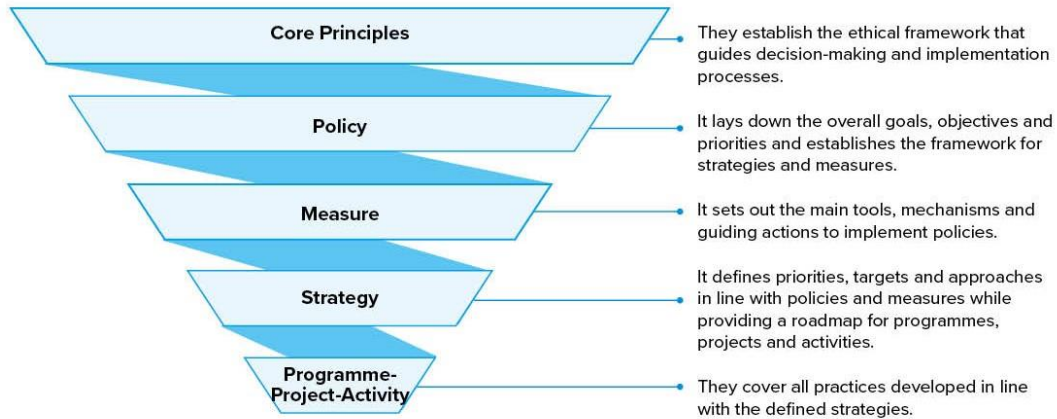


Figure 4 Relationship among core Principles, Policy, Measures and Strategy

The rights-based policies to be designed in line with the core principles ensure that the rights, needs and perspectives of vulnerable groups are taken into account at all stages of disaster management. This allows for developing special interventions that recognise the special needs, sensitivities and capacities of vulnerable groups and protect and empower them. Along with the integration of the vulnerable groups perspective at the policy level, the compliance with international human rights standards is ensured while paving the way for more inclusive, effective, and sustainable disaster management practices that protect the dignity and rights of all individuals, especially vulnerable groups.

Key activities and verification questions regarding the integration of the rights-based approach from the perspective of vulnerable groups during the development of high-level policies and strategies are shown in the figure below.



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INTEGRATION OF HUMAN RIGHTS-BASED APPROACH FROM THE PERSPECTIVE OF VULNERABLE GROUPS IN DISASTER RISK REDUCTION POLICY DEVELOPMENT

<p>Identifying disaster risks of the vulnerable groups</p>	<p>Who are the vulnerable groups? – Defining the vulnerable groups clearly, plainly and explicitly</p> <p>What are the vulnerability criteria? - Determining vulnerability criteria both common to all vulnerable groups and specific to each vulnerable group</p> <p>What are their current and expandable capacities? - Defining the capacities specific to each vulnerable group at a high level</p> <p>What are the disaster risks regarding vulnerable groups? – Identifying the disaster risks both common to all vulnerable groups and specific to each vulnerable group</p>
<p>Determining the impact of disaster risks on fundamental rights</p>	<p>Which rights do the identified risks directly affect? - Addressing the relevant rights for each vulnerable group and risk (right to life, right to housing, right to security, right to food, etc.)</p> <p>How do those risks affect the continuity of access to rights? - Defining how rights will be affected if the risks realised</p> <p>What are the possible challenges in accessing rights? - Determining the possible challenges in accessing the specified rights in case the relevant risks realised</p> <p>What is the likelihood of challenges in accessing rights? - Conducting a probability assessment and determining priority areas for measures</p>
<p>Determining and developing policies</p>	<p>What are the gaps in current policies? Identifying the areas that need to be improved regarding the rights of vulnerable groups in existing disaster management policies</p> <p>What are the root causes of challenges in accessing rights? Defining the root causes that will affect the continuity of rights and prevent access to rights in case risks arise</p> <p>What is the policy need to protect fundamental rights and address challenges? Determining the policies to protect rights and eliminate the root causes that will cause challenges to access to the rights</p> <p>What are the requirements for empowering vulnerable groups? Determining the requirements for the empowerment of vulnerable groups to protect and maintain access to their rights in disasters</p>
<p>Defining duties and responsibilities</p>	<p>What are the main measures to be taken? Defining the measures that need to be taken to implement policies</p>



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	<p>Who is responsible/in charge? Determining the organisational structure responsible for each main measure</p> <p>What are the required authorities for the implementation? Defining the authorities required to fulfil responsibilities and assign new authorities (if necessary)</p> <p>What is the institutional capacity and support needed? Determining the supporting structure and capacity needs for implementation, and (if any) identifying additional supporting needs</p>
Effective integration Checks	<p>Are the policies developed within the framework of core principles?</p> <p>Is effective participation of the target groups ensured during the policy development process?</p> <p>Are vulnerable groups and their specific risks defined in a clear, understandable and inclusive manner?</p> <p>Are there realistic policies for the defined risks of each vulnerable group to protect the rights of vulnerable groups and ensure continuity of access to the rights in disaster management?</p> <p>Are policies defined to empower vulnerable groups?</p> <p>Are the policies rights-based and inclusive?</p> <p>Are the duties and responsibilities, as well as the responsible authorities and supporting elements required to fulfil these responsibilities, determined?</p> <p>Are there monitoring and evaluation systems functioning for protecting and ensuring the continuity of fundamental rights in disaster management?</p>

Table 2 Verification Questions for Disaster Risk Reduction Policy Development Phases from the Perspective of Vulnerable Groups

COORDINATION FOR FUNDAMENTAL RIGHTS IN DISASTER MANAGEMENT

Disaster management inherently has a complex management approach that covers various crosscutting working areas. Due to its multi-sectoral structure, disaster management must be conducted by several organisations with varying responsibilities. In this regard, effective disaster management is only possible through the coordinated efforts of all sectors and a high level of coordination and cooperation.

All stages of disaster management and all working areas should be planned and implemented to include all individuals affected by the disaster. However, as explained in detail in the relevant sections of these guidelines, vulnerable groups may not have equal access to services provided as part of the disaster management due to their varying vulnerabilities and lack of capacity. Therefore, additional coordination efforts specific to vulnerable groups should be integrated into disaster



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management coordination to ensure the equal access of fundamental rights and services for vulnerable groups during disasters and emergencies. These guidelines discuss the special issues that need to be considered to ensure that vulnerable groups enjoy their fundamental rights and services before, during and after disasters. Priority should be given to effective coordination for planning and implementation of critical activities for special issues addressed to vulnerable groups, and establishing a dedicated fundamental rights coordination mechanism integrated into the existing disaster management coordination structure at national and local levels.

Vulnerabilities and capacities of vulnerable groups vary according to local dynamics. In disaster risk reduction, understanding local risks in advance and identifying the needs and capacities of vulnerable groups, that vary according to the local context, play a critical role in enabling vulnerable groups to have access to fundamental rights during and after disasters. Moreover, initial and long-term response and recovery during and after disasters can only be sustained with the effective use of local capacities. To this end, it is important to establish a local coordination mechanism³ that will work in coordination with the national coordination structure. The coordination mechanism to be established plays an active role in determining the special risks of vulnerable groups at the stage of identifying provincial disaster risks and carrying out disaster risk reduction interventions accordingly. In response to disasters, the mechanism contributes to identify and constantly monitor the varying needs of vulnerable groups on a sectoral basis.

The following important issues should be considered during the coordination of fundamental rights in disaster management:

- √ Ensuring coordination at national and local levels,
- √ Establishing working groups to ensure fundamental rights coordination for each vulnerable group⁴ and to enable vertical and horizontal coordination⁵ in all areas of disaster management,

³ The issues raised by stakeholders were systematically laid down by experts to ensure coordination before, during and after disasters and to conduct a preparedness and response study that respects the fundamental rights of vulnerable groups. Although not binding, it includes the compiled coordination structure and method recommendations to guide the institutions.

National Coordination Mechanism Proposal

To ensure coordination at the national level, it is recommended to establish special working groups for vulnerable groups under the leadership of the main responsible institution for disaster fundamental rights coordination (recommended institution is the Ministry of Family and Social Services). In special working groups established for vulnerable groups, at least one focal person is assigned to the Disaster and Emergency Board structure.

It is recommended that under the leadership of the main responsible institution (relevant Directorate General of the Ministry of Family and Social Services), AFAD, Ministry of Justice, relevant NGOs, universities and Presidency of Strategy and Budget, based on the thematic area as well as the main disaster sector responsible and support organisations under the **Disaster Risk Reduction Plan of Türkiye (TARAP)** and **Disaster Response Plan of Türkiye (TAMP)** participate in the national working groups.

Special working groups for vulnerable groups convene at regular annual and periodic meetings. In addition to regular meetings, disaster sectoral thematic meetings are organised with the participation of the relevant sector stakeholders at least twice a year. Moreover, meetings for advocacy and awareness-raising activities are held in line with the needs and schedule identified by the working groups.

The representative of each working group is appointed to the Disaster and Emergency Board as the focal person. In line with the duties and responsibilities of the board, the focal persons, in their own work areas, contribute to the preparation of recommendations for protective and preventive activities to be conducted before disasters and the activities to be carried out during and after disasters from the perspective of vulnerable groups.

Local Coordination Mechanism Proposal

It is recommended that under the leadership of the İRAP secretariat, the Provincial Directorate of Family and Social Services and its affiliated organisations, AFAD Provincial Directorate, Municipalities, relevant local NGOs, universities, provincial disaster sector representatives, based on the thematic area, and mukhtars of high-risk neighborhoods participate in the local working groups.

⁴ To this end, it is recommended to establish separate disaster working groups for each vulnerable group (Women, Children, Persons with Disabilities and Older People).

⁵ Vertical coordination refers to the coordination within working groups among national and local mechanisms, the main responsible organisation and the supporting organisations. Horizontal coordination means the coordination of relevant stakeholders among working groups at the national and local levels.



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- √ Raising the awareness of all stakeholders responsible for disaster management on the fundamental rights of vulnerable groups,
- √ Developing the institutional capacities of all stakeholders responsible for disaster management regarding vulnerable groups and fundamental rights,
- √ Advocating for the fundamental rights of vulnerable groups in disaster management,
- √ Ensuring that the disaggregated data of the vulnerable groups is collected and analysed and that the relevant stakeholders have timely and effective access to such data,
- √ Regularly monitoring and evaluating activities in disaster management from the perspective of fundamental rights for vulnerable groups, and conducting regular reporting and information sharing activities,
- √ Mapping all stakeholders working for vulnerable groups before, during and after disasters and ensuring regular communication among them.



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Table 3 Coordination in Disaster Management from the Perspective of Vulnerable Groups

COORDINATION LEVEL ⁶	COORDINATION TOOLS	ACTIVITIES		
		Prior to disasters	During disasters	After disasters
National Level	<ul style="list-style-type: none"> - National Working Groups for each Vulnerable Group - Annual Regular Meetings - Regular Sectoral Meetings for each Working Area - Monitoring and Evaluation Reports - Recommendations - Special/Thematic Meetings in line with Advocacy Plans (as needed) - Capacity Building Activities/Trainings (as needed) 	<ul style="list-style-type: none"> • Establish national and local working groups for each vulnerable group and ensure their effective functioning, • Review the existing national disaster legal framework from the perspective of vulnerable groups, • Analyse the strategic plans of relevant institutions from the perspective of disaster management and vulnerable groups, • Develop policies, strategies and measure recommendations regarding the integration of the fundamental rights of vulnerable groups into the relevant legislation and submit them to the relevant institutions, • Develop detailed implementation guidelines⁷ to integrate the relevant vulnerable groups' perspective before, during and after disasters in collaboration with the representatives of the relevant disaster sector working groups (nutrition, shelter, health, etc.).⁸ 	<ul style="list-style-type: none"> • Contribute to the inclusion of the perspective of vulnerable groups in the recommendations and decisions taken by the Disaster and Emergency Board (recommended structure), • Compile disaggregated data on vulnerable groups provided by various stakeholders and ensure effective data sharing with relevant stakeholders, • Communicate the response-related needs of vulnerable groups to national and international coordination mechanisms in disaster governance, • Participate in international disaster management coordination group, cluster meetings and provide relevant information for vulnerable 	<ul style="list-style-type: none"> • Regularly monitor and evaluate the vulnerable groups' access to fundamental rights after disasters, • Guide local stakeholders to take necessary measures in line with the results of the monitoring and evaluation activities, • Provide support for reviewing and implementing national decision-making processes and legislative or structural changes regarding the special needs of vulnerable groups, • Gather all types of research, analysis, information and documents conducted and prepared for vulnerable groups at the national level and share them with relevant stakeholders, • Map the special national programmes and projects

⁶ Based on the recommendations given in footnote 3.

⁷ It is recommended to prepare detailed guidelines for each work area in line with the current Implementation Guidelines, and to constantly improve and keep them up to date.

⁸ Basis: 12th Development Plan – 841.1. Detailed guidelines will be prepared and trainings will be provided for the disabled, elderly, women, children and their relatives to demonstrate what needs to be done before, during and after disasters in different disaster situations. (841.1)



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		<ul style="list-style-type: none"> • Identify fundamental rights crosscutting areas in disaster governance work areas and plan interventions to strengthen the communication and coordination among sector stakeholders in these areas from the perspective of fundamental rights, • Conduct awareness-raising and capacity building activities for relevant institutions regarding the fundamental rights perspective of vulnerable groups in disaster management, • Map the relevant stakeholders (civil society, international organisations) that support public institutions in Disaster Governance and ensure regular communication and coordination among them in terms of fundamental rights. 	<p>groups,</p> <ul style="list-style-type: none"> • Monitor and evaluate disaster response activities from the perspective of vulnerable groups, • Offer recommendations and provide support to relevant institutions regarding improvement areas in line with the results of the monitoring and evaluation activities. 	<p>implemented for vulnerable groups and provide support for coordination among projects regarding the fundamental rights perspective,</p> <ul style="list-style-type: none"> • Advocate the inclusion of the special needs of vulnerable groups and special measures regarding these needs in recovery analyses.
<p>Local Level</p>	<ul style="list-style-type: none"> - Local Working Groups for each Vulnerable Group - Annual Regular Meetings - Local Sector/Thematic Regular Meetings for Working Areas 	<ul style="list-style-type: none"> • Determine the local vulnerabilities and capacities specific to each vulnerable group, • Ensure regular communication and coordination with relevant local stakeholders, • Participate in İRAP workshops and technical working group meetings, • Contribute to the inclusion of special risks and needs of vulnerable groups into the İRAP, • Contribute to the integration of special interventions for vulnerable groups into the provincial disaster response plans and disaster preparedness scenarios, 	<ul style="list-style-type: none"> • Participate regularly at provincial disaster and emergency coordination meetings, • Guide relevant sector stakeholders in line with special intervention requirements for the varying needs of vulnerable groups, • Monitor and evaluate the access of vulnerable groups to fundamental rights during disaster response, • Guide local stakeholders to take necessary measures in line with the results of the monitoring and evaluation activities, 	<ul style="list-style-type: none"> • Regularly monitor and evaluate the access of vulnerable groups to fundamental rights at the local level after disasters • Gather all types of research, analysis, information and documents conducted and prepared for vulnerable groups at the local level and share them with relevant stakeholders, • Guide local stakeholders to take necessary measures in line with the results of the monitoring and evaluation activities,



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		<ul style="list-style-type: none"> • Identify local stakeholders regarding fundamental rights in disaster governance, • Ensure awareness raising and capacity building among local stakeholders regarding the fundamental rights of vulnerable groups, • Monitor and evaluate the regular access to fundamental rights of vulnerable groups before disasters, identify possible risks of rights violations and inform relevant stakeholders, • Advocate for the fundamental rights of vulnerable groups at local level. 	<ul style="list-style-type: none"> • Increase the awareness of stakeholders on the special needs of vulnerable groups during and after disaster response, • Ensure the regular communication with relevant stakeholders during and after disaster response and advocate for vulnerable groups' fundamental rights. 	<ul style="list-style-type: none"> • Define/implement interventions for the establishment and effective operation of referral mechanisms for fundamental rights and services, • Map special local programmes and projects implemented for vulnerable groups and providing support for coordination among projects, • Ensure that the special needs of vulnerable groups are considered and special measures regarding these needs are included in recovery assessments.
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** The above-mentioned activities are only indicates the activities regarding the fundamental rights perspective of vulnerable groups. It does not represent the activities regarding the entire scope of disaster governance coordination. (For example, monitoring and evaluation refers to monitoring and evaluation of fundamental rights only for the relevant vulnerable group.)*



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Increasing the Institutional Capacities

It is essential that the management and implementation level professionals working at every stage of disasters are competent in their areas of duty and responsibility, and have the necessary knowledge and experience in national disaster preparedness and response plans and international humanitarian aid standards. Such professionals of all public and private institutions that have responsibility in the preparedness, response and recovery stages of disasters should have the necessary capacity specifically on the rights and needs of vulnerable groups (according to their field of work).

The institutional capacities (materials, equipment, vehicles, etc.) of institutions regarding disasters in their areas of responsibility should be increased according to the disaster scenarios prepared before disasters. Rapid allocation/readiness of institutional resources especially regarding the fundamental rights of vulnerable groups ensures quick and effective response to the needs of vulnerable groups during and after disasters. Moreover, the resources allocated/used during and after disasters should be considered as permanent capacities for institutions as much as possible, thus contributing to the preparedness for subsequent disasters.

Special coordination working groups to be established for vulnerable groups play an active role in increasing the capacity of disaster management stakeholders on fundamental rights. These working groups provide coordination for determining the development areas regarding the varying needs of vulnerable groups as well as training, collaboration and capacity sharing opportunities for these areas.

Monitoring and Evaluation

Monitoring refers to the collection of data during the operational phase to ensure that activities are carried out in accordance with the goals, while evaluation is the set of methods used to analyse whether the goals are achieved as a result of the activities. Monitoring and evaluation ensure the effectiveness of interventions, effective use of resources in line with needs, evidence-based decision-making, and continuous improvement of interventions based on lessons learned. Monitoring and evaluation also bring transparency and accountability for the affected population, donors, and society at large.

It will become possible to observe compliance with human rights and take corrective measures (if necessary) by integrating the monitoring of vulnerable groups' access to the rights and services into the disaster management monitoring and evaluation mechanisms. The special working groups established for vulnerable groups are responsible for monitoring and evaluating the effective integration of the fundamental rights perspective in disaster risk reduction in line with the implementation guidelines. Based on the monitoring and evaluation results, the working groups can introduce new strategy and policy recommendations for decision-makers when necessary and ensure that implementation activities are improved in terms of the rights based approach.



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DATA MANAGEMENT AND VULNERABLE GROUPS

In the broadest sense, data management covers collecting, storing, analysing, sharing the up-to-date data while ensuring data security. At all stages of disaster management, effective data management is the most crucial element for the effective use of resources according to needs and the successful interventions.

Effective data management in disaster management ensures:

- Making evidence-based decisions in policy development, programme/intervention planning and implementation,
- Evaluating risks before disasters, providing accurate evaluations on possible disaster damages and potential impacts, and establishing effective early warning systems and risk reduction plans,
- Effective resource planning,
- Developing and implementing programmes and interventions in line with the actual needs,
- Monitoring, evaluating and measuring the effectiveness of the interventions,
- Establishing effective coordination and cooperation,
- Continuously improving disaster management efforts based on good practices and lessons learned, and
- Increasing transparency and accountability.

Data Collection	Data Retention	Data Analysis	Data Sharing
<ul style="list-style-type: none"> • Determining the data fields and criteria needed for each stage of the disaster (vulnerabilities, capacities, affected population, needs, etc.) • Collecting disaggregated data in accordance with age, gender and disability criteria at each stage • Collecting personal data together with the contextual data (socio-economic status of the region and community, cultural characteristics, etc.) • Ensuring the participation of the affected population in the data collection 	<ul style="list-style-type: none"> • Keeping and updating data in a secure and structured/grouped manner • Designing storage systems so as to ensure the data integrity, the access by approved users and security • Ensuring the integration all disaster management data storage systems containing different data fields in line with needs • Ensuring the up-to-dateness and reliability of data 	<ul style="list-style-type: none"> • Establishing data-based decision-making mechanisms • Defining the data evaluation requirements (risk assessment, programme design, response, etc.) • Confirming the accuracy and relevance of the data used in the analysis • Establishing data correlations with the existing context • Presenting data analysis results in a clear, simple and explicit manner in accordance with the objectives (using data visualization tools) 	<ul style="list-style-type: none"> • Determining data needs specific to each stakeholder • Establishing data sharing standards and mechanisms necessary for coordination and cooperation • Determining effective data sharing tools • Establishing data sharing and access principles and providing the necessary infrastructure (legislative regulation, establishment of technical infrastructure, etc.)



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Data Security	<ul style="list-style-type: none"> • Protecting data in compliance with legal and ethical standards • Establishing protocols for access criteria and permissions to ensure the data security • Considering the sensitivities regarding the personal data of the affected population in data storing, analysis and sharing
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Table 4 Important Steps in Data Management Stages

It is vital to establish data management processes that integrate the perspective of vulnerable groups to ensure equality, inclusion and prevent discrimination in disaster risk reduction efforts. This ensures, through data management integrating the perspective of vulnerable groups, that the correct risk assessment is conducted, that their specific vulnerabilities and capacities are taken into account and that response strategies addressing the specific needs of vulnerable groups are developed and implemented.

The following factors should be considered in Data Management from the perspective of all vulnerable groups:

- ✓ Classifying data collection for vulnerable groups and setting data security criteria,
- ✓ Considering multiple vulnerabilities in data management (women with disabilities, children with disabilities, elderly women with disabilities, etc.),
- ✓ Making specific classifications for vulnerable groups in databases,
- ✓ Setting transparency and accountability criteria for data sharing,
- ✓ Establishing flexible data sharing mechanisms that will facilitate vulnerable groups' access to services and not pose a security risk in a delicate balance,
- ✓ Collecting contextual data (social, cultural, economic, environmental for target regions and communities),
- ✓ Continuously updating and tracking data,
- ✓ Ensuring access to reflect all vulnerable groups in data collection and keeping inclusive data,
- ✓ Informing people involved in data management about the sensitivities and rights of vulnerable groups,
- ✓ Maintaining personal consent for the collection and processing of data,
- ✓ Ensuring optimum participation at every stage of data management.

In addition to these factors, the following should also be considered for each vulnerable group:

Women:

- ✓ Conducting a comprehensive needs analysis to assess the risk on women's exposure to violence and the needs for protection from violence,
- ✓ Identifying specific data sources regarding violence against women (police reports, court records, data from health institutions, records of women's shelters/women's guest houses and counselling centres, data from social service organisations, etc.),



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- ✓ Ensuring a safe environment during the data collection process where women can express themselves openly without feeling under pressure and that their identities can be protected throughout the entire process.

Children:

- ✓ Considering the best interests of children at every stage of data management,
- ✓ Informing persons involved in data management about child protection risks and children's rights,
- ✓ Preparing question sets and methods suitable for children in data collection,
- ✓ Establishing special mechanisms for child participation.

Elderly People and Persons with Disabilities:

- ✓ Establishing special methods and mechanisms for the accessibility of the elderly people and persons with disabilities,
- ✓ Defining and implementing data collection methods for disability types and levels (one-on-one interviews, meetings that involve families, focus group interviews, collection from databases, etc.)

Integrating the perspective of vulnerable groups in data management

Examples of Verification Questions

Collection and retention of data	<p>Are the data fields to be collected identified separately from the perspective of all vulnerable groups?</p> <p>Are data collection methods designed and implemented in an inclusive manner?</p> <p>Are data collected through participatory methods?</p> <p>Are disaggregated data collected in line with the pre-defined criteria?</p> <p>Are the people responsible for data collection informed about the sensitivity of vulnerable groups?</p> <p>Is the privacy of vulnerable groups taken into account during data collection?</p> <p>Are mechanisms established regarding protection risks that may occur during data collection for vulnerable groups and are vulnerable groups informed about such mechanisms?</p> <p>Is explicit consent obtained during data collection?</p> <p>Is there continuous monitoring to ensure the data is up-to-date?</p> <p>Are contextual data (regional and community-oriented social, cultural, economic, etc.) collected?</p>
Data analysis and reporting	<p>Are methods used to include contextual data on fundamental rights during data analysis?</p>



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	<p>Are special data analysis usage needs for vulnerable groups determined?</p> <p>Do the analysed data adequately reflect the specific needs, risks and capacities of the vulnerable groups?</p> <p>Are vulnerable groups' data categorised in accordance with their subgroups, needs and priorities during data analysis?</p> <p>Are specific analysis reports developed for vulnerable groups?</p> <p>Do data analyses consider the needs and experiences of vulnerable groups?</p> <p>Do data analyses reveal inequalities, differences and discrimination among vulnerable groups?</p> <p>Are analyses and reports communicated in an open and transparent manner that is accessible to vulnerable groups?</p>
<p>Data sharing</p>	<p>Are quality control processes defined to ensure the accuracy (consistency) and reliability of data?</p> <p>Are accountability mechanisms established for transparency and fair management of data sharing processes?</p> <p>Are policies developed to prevent data sharing and use from causing a risk of discrimination?</p> <p>Can data sharing processes be monitored and are they open to user feedback?</p> <p>Are there mechanisms available to enable users to submit complaints about data sharing and use?</p>
<p>Data security</p>	<p>Is information such as how the data is collected, who collects the data, what methods are used and where it is stored transparent?</p> <p>Are privacy policies in place to protect sensitive information?</p> <p>Are vulnerable groups clearly informed and their consent received for the collection, retention, and analysis of data?</p> <p>Are access controls available to restrict unauthorized access to sensitive data, which may include data related to vulnerable groups?</p> <p>Are necessary measures taken to protect the confidentiality and privacy of data regarding vulnerable groups? (encryption, anonymisation, coding, etc.)?</p> <p>Are legal and ethical standards for the protection of personal data taken into account at every stage of data management?</p>

Table 5 Examples of Data Management Verification Questions from the Perspective of Vulnerable Groups



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DISASTER RISK ASSESSMENT AND PLANNING

Vulnerable groups are generally at higher risk in disasters due to social, economic and environmental factors. The integration of the perspective of vulnerable groups into disaster risk assessment and planning allows elimination of structural inequalities and discrimination that prevent access to resources and assistance and increase vulnerability during and after disasters. Thus, it becomes possible to establish a basis for more equitable and inclusive practices in line with core principles and policies.

The following factors should be considered in disaster risk assessment and planning from the perspective of vulnerable groups (subheadings and important points are not limited to the following):

- ✓ *Disaster Risk Planning and Preparedness:* Developing necessary disaster risk plans for the continuity of basic services for fundamental rights.
- ✓ *Risk Assessment and Vulnerable Groups:*
 - Establishing special vulnerability and capacity criteria for vulnerable groups during risk assessment,
 - Conducting specific risk analyses specific for vulnerable groups during risk planning,
 - Considering the habits, cultural codes, regional needs, etc. of vulnerable groups living in the target region in risk analyses.
- ✓ *Defining Service Capacity and Preparing Support Plans:* Identification of the current service capacity and preparing support plans to ensure the access of vulnerable groups to fundamental rights.
- ✓ *Participation and Education:*
 - Establishing participation mechanisms for vulnerable groups,
 - Ensuring the participation of vulnerable groups in risk reduction analyses.
- ✓ *Disaster Scenarios and Special Needs:* Reflecting the special needs and capacities of vulnerable groups in disaster scenarios prepared for urban risk analyses.

Risk reduction activities conducted with community participation increase community resilience and are a priority for disaster-resilient communities.



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Disaster Risk Assessment and Planning from the Perspective of Women's Rights

Women are among the groups most affected by disasters due to socio-economic difficulties, limited access to resources and gender-based roles. At the disaster risk assessment and planning phase, addressing vulnerabilities specific to women and developing special strategies to this end is essential for eliminating inequalities and maintaining an inclusive disaster management.

Women besides their vulnerabilities should be considered an important capacity/resource for disaster risk reduction with their unique perspectives and abilities. Considering and including women's special experience, knowledge and competencies in risk assessment contribute to a more comprehensive and holistic disaster risk assessment and planning. Women also play an important role in increasing the resilience of communities to disasters with their special position on family and community resilience and well-being.

Risk assessment and planning that integrates a women's rights perspective should focus on women protection while prioritising women's empowerment and the prevention of gender-based violence and abuse. Moreover, at this stage, ensuring women's active participation in all processes, including decision-making mechanisms, supports the gender equality and ensure the effective social justice mechanisms are in place.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of women's fundamental rights in disaster risk assessment and planning, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 5 Disaster Risk Assessment and Planning from the Perspective of Women's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Ensure that gender-based risk assessment is conducted.

- Consider women's varying vulnerabilities and crosscutting areas of vulnerability in analyses.
- Ensure that women's specific capacities are considered during analyses.



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- Ensure that gender-based data and information are gathered in data collection and analysis.
- Conduct gender-sensitive analyses and assessments that address women's needs and vulnerabilities.

Incorporate specific gender-sensitive interventions into risk planning.

- Determine strategies that consider existing and expandable capacities to address risks and needs specific to women.
- Define interventions and activities that address risks and needs specific to women.
- Ensure that identified interventions are included in disaster risk reduction plans in an accessible and inclusive manner for women.
- Include female expert resources in response resource planning in line with an equitable approach.

Plan and implement measures to ensure the continuity of basic services regarding fundamental rights and women's access to them.

- Determine the fundamental rights affected by disaster risks and rights-related services specific to women.
- Identify structural and non-structural risks that affect the continuity of basic services for women in disasters, and plan and implement relevant measures.
- Define the barriers that may prevent women's access to justice during and after disasters, and include measures to remove these barriers in planning.

Plan prevention and response measures regarding violence against women, women's safety and women protection in disasters.

- Address safety and gender-based violence risks specific to women.
- Include specific strategies in planning to ensure the safety of women and protect them from violence before, during and after disasters.
- Ensure that plans include preventive strategies regarding protection risks for women.
- Design accessible and appropriate interventions for women's protection risks.

Ensure women's active and effective participation and representation in risk assessment and planning.

- Inform and increase the capacities of women on disaster risk assessment and planning.
- Establish participation mechanisms to ensure the perspective of women and changing gender roles are considered in risk analyses and risk mitigation plans.
- Enable the participation of women in structures that conduct risk assessment and planning, such as decision-making mechanisms, working groups, etc.
- Ensure the equal representation of women in risk assessment and planning efforts.



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Conduct advocacy and awareness raising activities for stakeholders in risk assessment and planning processes.

- Advocate for the participation of women in risk assessment and planning, women specific impacts of disasters, gender equality in disaster governance, and women's access to rights in disasters.
- Integrate public awareness raising interventions on women's special risks and women protection in risk plans.
- Ensure that women are equally represented in risk assessment and planning efforts.

Examples of Verification Questions

<p>Risk assessment and planning with a focus on women</p>	<p>Are gender-based data and information collected for risk analyses?</p> <p>Are vulnerabilities specific to women and crosscutting areas included in risk assessment and planning?</p> <p>Are varying risks and needs of women carefully identified and included in planning?</p> <p>Are risk analyses carried out in an inclusive manner with the participation of different groups of women?</p> <p>Are women's habits, cultural codes and regional needs considered?</p> <p>Are participation mechanisms planned at local and national levels to ensure the assessments are conducted from the perspective of changing gender roles?</p>
<p>Disaster risk plans required for the continuity of basic services</p>	<p>Are the risks on women's access to justice in disasters included in the planning?</p> <p>Are necessary measures taken to ensure the safety of women and their protection from violence during disasters?</p> <p>Are emergency planning and safe spaces for women included in the risk planning process?</p> <p>Are the structural and non-structural risks of institutions providing basic services for women identified and are the mitigation measures included in the scenarios?</p> <p>Is the active participation of women in assessment and planning processes ensured?</p>
<p>Women's perspective in disaster scenarios</p>	<p>Are the different roles of women considered in the preparation of disaster scenarios?</p> <p>Are women's safety and protection risks taken into account in the scenarios?</p> <p>Do the scenarios aim to ensure gender equality and protect women's rights?</p> <p>Are varying and/or crosscutting vulnerabilities of women included in the</p>



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	<p>scenarios?</p> <p>Are women, women communities and women organisations included in the preparation of the scenarios?</p>
<p>Disaster preparedness plans of organisations managing and intervene risks</p>	<p>Are stakeholders working in the field of women's rights and basic services for women mapped?</p> <p>Are coordination plans prepared for these stakeholders before disasters?</p> <p>Do women organisations participate in the preparation of disaster plans?</p> <p>Is a roadmap developed to ensure effective coordination among relevant institutions for risks that may occur after disasters?</p>

Table 6 Examples of Verification Questions regarding Disaster Risk Assessment and Planning from the Perspective of Women's Rights

For detailed verification questions, see ANNEX 1 Disaster Risk Assessment and Planning Checklist

Disaster Risk Assessment and Planning from the Perspective of Children's Rights

Children are at higher risk in disasters due to their physical, emotional, social and economic dependency, care needs and vulnerability compared to adults. Due to the long-term psychological effects of disasters on children, their special security needs, deprivation of education and insufficient capacity to meet their needs and vulnerabilities, special approaches for children are needed in risk assessment and planning. The best interests of the child and the child protection principles should be prioritised at every stage of the disaster.

In order to reduce the children specific disaster risks, the children rights perspective should be integrated in the risk assessment and planning phase to safeguard children's fundamental rights (life, nutrition, education, health, development). It is required to focus on strengthening preventive and protective measures for the protection and safety of children in emergencies, especially for the unaccompanied children.

Moreover, ensuring child participation during the disaster risk assessment and planning should not be ignored. The active participation of children should be ensured with a child-appropriate participation mechanism to perform an effective child-centred disaster management.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of children's fundamental rights in disaster risk assessment and planning, a table detailing the breakdown of activities for the critical elements, and a table containing examples of verification questions regarding the sub-breakdowns.



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Figure 6 Disaster Risk Assessment and Planning from the Perspective of Children's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Conduct child-centred disaster risk assessment.

- Collect age and gender disaggregated data and information for risk analysis.
- Identify children's specific vulnerabilities, hazards and risks before, during and after disasters.
- Prioritise interventions that will support the best interests of the child in planning.
- Integrate specific risk reduction strategies into planning that consider the best interests of the child.

Integrate child protection and safety measures in disaster risk plans.

- Strengthen safeguarding mechanisms that aim to protect children against maltreatment, abuse, neglect, violence and discrimination and guarantee children rights.
- Plan child focus protection strategies.
- Design special strategies and protection mechanisms for children who are at risk of being separated from their families in disasters in a child-friendly and accessible manner.
- Include special measures to increase community knowledge and awareness on child protection in disasters.

Develop plans for the continuity of the basic services for children's fundamental rights.

- Integrate activates to inform and empower children about their fundamental rights in plans.
- Design child-centred strategies for structural and non-structural risks to ensure children's continuous access to basic services and justice.

Focus on risks and measures for children's psychological and physical well-being in disasters.

- Define specific risks that may threaten children's psychological and physical well-being and develop specific response plans.



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- Prioritise children's psychological and physical well-being in the plans, including access to basic needs.

Integrate specific interventions for children's educational and developmental needs in risk plans.

- Focus on the special education and development needs of children during disasters.
- Identify risks to continuity and accessibility of education. Prioritise measures to reduce these risks in planning.

Encourage the participation of the children in disaster risk assessment and planning.

- Establish proper mechanisms to ensure children's active participation in decision-making processes.
- Consider children's specific needs and concerns and ensure children's experiences and perspectives are integrated into plans.

Examples of Verification Questions

<p>Child-focused risk assessment and planning</p>	<p>Are age and gender disaggregated data and information collected for risk analyses?</p> <p>Are vulnerabilities specific to children and crosscutting vulnerability areas included in risk assessment and planning?</p> <p>Are children's varying risks and needs carefully identified and included in planning?</p> <p>Are children and relevant stakeholders working on children enabled to participate in the processes with appropriate mechanisms during risk assessment and planning?</p> <p>Is the specific approach defined to ensure coordination with local NGOs for humanitarian child protection interventions?</p>
<p>Disaster risk plans required for the continuity of basic services</p>	<p>Are emergency planning and safe spaces for children included in the risk planning?</p> <p>Are the structural and non-structural risks of institutions providing basic services for children identified and are the mitigation measures included in the scenarios?</p> <p>Is it planned to ensure the continuity of services for children's psychological and physical well-being?</p> <p>Do risk plans include interventions for children's development and educational needs?</p> <p>Are coordination mechanisms established for the continuity of services for children?</p>
<p>Children's perspective</p>	<p>Are children's needs varying according to age and gender considered when</p>



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<p>in disaster scenarios</p>	<p>designing scenarios?</p> <p>Is there diversity in the representation of children from different educational, cultural, economic, etc. levels in the scenarios?</p> <p>Are children’s safety and protection needs incorporated in the scenarios?</p> <p>Are differing and/or crosscutting vulnerabilities of children included in the scenarios?</p> <p>Are children enabled to participate in the processes through children's communities and NGOs?</p> <p>Do the scenarios include the provision of child-specific emergency services?</p>
<p>Disaster preparedness plans of institutions that manage risks against children and take necessary measures</p>	<p>Are stakeholders working in the field of basic services for children mapped?</p> <p>Are coordination plans prepared for these stakeholders before disasters?</p> <p>Are children, caregivers and educators enabled to participate in the preparation of disaster plans?</p> <p>Is a roadmap prepared to ensure coordination among different institutions for all the risks after disasters?</p>

Table 7 Examples of Verification Questions regarding Disaster Risk Assessment and Planning from the Perspective of Children’s Rights

For detailed verification questions, see *ANNEX 1 Disaster Risk Assessment and Planning Checklist*

Disaster Risk Assessment and Planning from the Perspective of the Rights of Persons with Disabilities and Elderly People

The elderly people and the persons with disabilities are vulnerable groups at risk of disasters due to their physical limitations, chronic diseases, mobility problems and communication barriers.

The integration of the perspective of the elderly people and the persons with disabilities in disaster risk assessment and planning ensures that the special needs and vulnerabilities of these people are taken into account in disaster risk reduction planning. The planning of responses appropriate to the special needs of the elderly people and the persons with disabilities before, during and after disasters is essential for an inclusive disaster management. Moreover, the elderly people can be considered as an important capacity in disaster risk assessment and planning with their experiences.

It is crucial to develop strategies specific to the special needs and sensitivities of the elderly people and the persons with disabilities to conduct an inclusive disaster management. Inclusion aims to eliminate physical access barriers and to ensure the access of the elderly people and the persons with disabilities to rights and services without discrimination before, during and after disasters.

Moreover, the integration of special experiences, knowledge and competencies of the elderly people and the persons with disabilities in the assessment and planning processes is critical for more inclusive, holistic and effective disaster risk assessment and planning. The establishment of participation mechanisms specific to the elderly people and the persons with disabilities and the development of



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sensitive strategies in assessment and planning processes are essential to address the varying risks and needs and to include their capacities in disaster risk reduction interventions.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of fundamental rights of the elderly people and the persons with disabilities in disaster risk assessment and planning, a table detailing the breakdown of activities for the critical elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 7 Disaster Risk Assessment and Planning from the Perspective of the Rights of Elderly People and Persons with Disabilities - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Conduct inclusive risk assessment for persons with disabilities and elderly people.

- Assess the risks specific to the elderly people and the persons with disabilities, including areas of multiple vulnerabilities.
- Ensure the developed risk plans, include customised interventions for specific needs and risks of persons with disabilities and elderly people.

Prioritise the accessible risks faced by the elderly people and persons with disabilities to health services in disasters and include special interventions in planning.

- Ensure that service and equipment plans are prepared regarding health risks for the persons with disabilities and the elderly people especially with health problems.
- Prioritise the inclusion of vital health services in planning.
- Define the barriers on access to health together with the target group and ensure the inclusion of specific measures to remove them in the plans.

Develop plans for the continuity of services for the fundamental rights of the elderly people and persons with disabilities.

- Define structural and non-structural risks to ensure continuity and accessibility to basic services and justice for persons with disabilities and elderly people.
- Incorporate in planning measures and risk reduction interventions for continued access to services for fundamental rights.



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Develop plans for the safety and protection of the elderly people and the persons with disabilities in disasters and take the necessary measures.

- Ensure that the necessary measures for the safety and protection of the elderly people and the persons with disabilities to prevent violence in disasters are included in the plans.
- Strengthen the application mechanisms in case such situations arise.

Remove barriers to access to information for the elderly people and persons with disabilities.

- Ensure accessible information, communication channels and warning systems formats (e.g. Braille, large print, audio, light information and technological developments, etc.) are in place for the elderly people and the persons with disabilities.
- Prioritise removing barriers to access information through communication tools that address varying needs.

Encourage the participation of the elderly people and persons with disabilities in disaster risk assessment and planning.

- Establish proper participation mechanisms for risk assessment and planning that are accessible to the persons with disabilities and the elderly people.
- Remove physical barriers to ensure the participation of the elderly people and the persons with disabilities in structures such as decision-making mechanisms and working groups that carry out risk assessment and planning.
- Design measures to remove access barriers to participation, including physical and information access, particularly for the persons with disabilities.

Examples of Verification Questions

<p>Inclusive risk assessment and planning</p>	<p>Are age- and disability-based disaggregated data and information collected for risk analyses?</p> <p>Are the risks for each different disability and crosscutting areas identified and are risk-specific interventions planned?</p> <p>Are varying risks and needs regarding elderly people carefully identified and included in planning?</p> <p>Are interventions for health risks included in the planning?</p> <p>Is the participation of elderly people and persons with disabilities and relevant stakeholders working for these target groups ensured with appropriate mechanisms in risk analysis and planning?</p> <p>Is the approach for the coordination for interventions regarding the elderly people and the persons with disabilities with local NGOs defined?</p>
<p>Access and the continuity of basic services</p>	<p>Is a service map prepared for the persons with disabilities and elderly people for basic services?</p> <p>Are the structural and non-structural risks of institutions providing basic</p>



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	<p>services for the persons with disabilities and the elderly people identified and are the measures included in the scenarios?</p> <p>Are the risks related to the access of the persons with disabilities and the elderly people to services identified and necessary measures taken?</p> <p>Is inclusive and effective participation ensured for each group and sub-groups (different levels of disability, etc.) of persons with disabilities and the elderly people?</p> <p>Are interinstitutional coordination mechanisms established for the continuity of services for the elderly people and the persons with disabilities?</p>
<p>Elderly people and persons with disabilities perspective in disaster scenarios</p>	<p>Are the varying needs of the persons with disabilities according to their age, gender, disability type and cognitive capacity considered while preparing disaster scenarios?</p> <p>Are the varying needs of the elderly people according to their age, gender and health status considered while preparing disaster scenarios?</p> <p>Do the scenarios include the provision of emergency services specific to elderly people and persons with disabilities?</p> <p>Are persons with disabilities, elderly people, broader communities and NGOs targeting elderly people and persons with disabilities enabled to participate in disaster scenario development and implementation?</p>
<p>Disaster preparedness plans of institutions that manage disaster risks for elderly people and persons with disabilities</p>	<p>Are stakeholders working in the field of basic services for the elderly people and the persons with disabilities mapped?</p> <p>Are coordination plans prepared for these stakeholders before disasters?</p> <p>Are persons with disabilities, elderly people, caregivers and other relevant stakeholders enabled to participate in the development of disaster preparedness plans?</p> <p>Is a roadmap prepared to ensure coordination among different institutions for all risks identified?</p>

Table 8 Examples of Verification Questions regarding Disaster Risk Assessment and Planning from the Perspective of the Rights of Elderly People and Persons with Disabilities

For detailed verification questions, see ANNEX 1 Disaster Risk Assessment and Planning Checklist



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COMMUNITY DISASTER AWARENESS AND PREPAREDNESS

The inclusion of vulnerable groups in efforts to raise community disaster awareness before disasters increases the overall community resilience during and after disasters, while the exclusion of vulnerable groups may lead to a decrease in community resilience. Thanks to inclusion, along with vulnerable groups, every member of society will be prepared to reduce risks before, during and after disasters. The preparation of vulnerable groups for disasters is only possible with disaster awareness training programmes and awareness activities developed appropriate to the required learning methods of these groups. International principles emphasise that everyone has the right to access to appropriate trainings that can increase resilience to disasters. Educational materials and practices should consider the special needs and sensitivities of different groups based on gender, age, disability and ethnicity. Disaster awareness training programmes should focus on the special needs of these groups and the challenges they encounter in daily life. Educational materials should be accessible to the persons with visual and auditory disabilities and be sensitive to language and cultural differences.

The following factors should be considered in social disaster awareness studies from the perspective of vulnerable groups (subheadings and important points are not limited to the following):

- √ *Customised Training Materials:* Preparing specialised information and awareness training content and materials for disaster risks tailored to vulnerable groups.
- √ *Participation of the Vulnerable Groups:* Ensuring access and appropriate participation mechanisms for the special needs of vulnerable groups for training and awareness activities and drills.
- √ *Inclusion:* Ensuring that everyone, including vulnerable groups, actively participate in disaster preparedness process through an inclusive approach.
- √ *Appropriate Content for Different Age Groups:* Integrating special content regarding disasters and disaster risk reduction appropriate to age groups into education curricula.
- √ *Trainings Focusing on Regional Risks:* Providing disaster awareness and preparedness trainings reflecting regional differences and risks to vulnerable groups at the local level.
- √ *Continuous Evaluation and Improvement:* Continuously improving training and awareness programmes in line with the feedback of the target audience.

Community disaster awareness starts from the household and neighborhood and spreads locally and nationally. Under the community disaster awareness raising activities, it is essential that the relevant actors carry out a participatory and inclusive approach that excludes no one.



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Enhancing Community Disaster Awareness and Preparedness from the Perspective of Women's Rights

Raising awareness of and training women on disaster risk reduction form the basis for reducing their vulnerability. It also enables women to take leadership roles in disaster response and recovery efforts, thus contributing to their empowerment. Increasing women's disaster awareness is vital in reducing the protection risks women face due to disasters and ensuring gender equality.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of women's fundamental rights in enhancing community disaster awareness and preparedness, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 8 *Enhancing Community Disaster Awareness and Preparedness from the Perspective of Women's Rights - Critical Elements*

Table of key activities (including but not limited to sub-breakdowns)

Develop gender-sensitive training and awareness programmes.

- Design training programmes with a focus on women's rights.
- Prepare training programmes with the participation of women to integrate the perspective of women and their special needs.
- Emphasise the risks on women protection and measures to reduce such risks in training content.
- Include the special risks on women protection, especially violence and abuse, in training programmes.
- Provide clear information on the protective and preventive measures for such risks during and after disasters and about application mechanisms for women.

Create women-friendly training environments and ensure women's safe access to them.

- Design training environments which are safe for women with a women-friendly approach, and appropriate for women with the participation of women.
- Take the necessary measures to ensure the access of women to training environments and choose training environments suitable for the access of women.



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Include topics on women empowerment in training and awareness programmes.

- Include women's rights into training content. Ensure that women have adequate information about their rights and services.
- Include topics on women's socio-economic empowerment in training content.

Use gender-sensitive communication methods and tools.

- Ensure that the language used in trainings and awareness programmes is appropriate for women.
- Ensure that the language used in awareness raising communication activities is gender-sensitive.
- Identify the communication channels used by women and consult with women while determining communication channels.
- Use different communication channels to ensure women's access to information on disaster risks and risk reduction measures.

Raise community awareness on gender equality and gender-based violence.

- Endeavour to raise awareness among all segments of society about gender equality and gender-based violence in disasters.
- Include information on gender equality and gender-based violence in disaster information and awareness activities for all segments of society.

Examples of Verification Questions

Disaster awareness programmes	<p>Is gender-sensitive content included in disaster awareness training for women?</p> <p>Is there special emphasis on disaster risks and safety measures for women in awareness programmes?</p> <p>Do training materials and activities consider specific needs and gender roles of women?</p> <p>Are disaster awareness trainings prepared with the participation of women professionals and field practitioners?</p> <p>Do disaster awareness trainings address basic information on post-disaster context, risks and measures specific to women?</p> <p>Are basic humanitarian aid standards, women's rights and protection principles in disasters addressed in trainings with appropriate content?</p> <p>Are issues such as violence, harassment and discrimination against women included in the training content?</p> <p>Is the training programme developed appropriate to local needs and disaster risks?</p> <p>Are the appropriate gender-sensitive environment, communication and multilingual requirements met to enable women to access training programmes?</p>
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<p>Disaster awareness and preparedness volunteer trainers</p>	<p>Are there training of trainers programmes on these issues and post-disaster risks for women?</p> <p>Are efforts in place to encourage female volunteers and organise basic disaster awareness training of trainers?</p> <p>Are the trainings provided by women volunteer trainers at the local level?</p> <p>Are networks of women volunteers established at the local level for the sustainability of the programme?</p>
<p>Participation in programmes and drills</p>	<p>Is the participation of women in disaster preparedness drills ensured?</p> <p>Is the women's participation inclusive? Are different communities of women included?</p> <p>Are supportive areas established and incentives provided for women during drills?</p> <p>Are the training hours organised to increase women's participation?</p> <p>Are necessary measures taken to ensure that the care burden of women does not become an obstacle to participate in trainings?</p>

Table 9 Examples of Verification Questions regarding Enhancing Community Disaster Awareness and Preparedness from the Perspective of Women's Rights

For detailed questions, see ANNEX 2 Enhancing Community Disaster Awareness and Preparedness Checklist.

Enhancing Community Disaster Awareness and Preparedness from the Perspective of Children's Rights

One of the most critical elements in disaster awareness programmes is using content and materials appropriate to children's age and developmental needs from an early age. Public disaster awareness trainings should be designed in a manner to prevent the presentation of scientific information that is traumatizing for children. Explaining children's rights and emphasising the measures to be taken during and after disasters will help prevent the effects of disasters on children and avoid possible child protection risks. By incorporating social awareness programmes in formal education curricula, programmes for children can be disseminated. Disaster awareness programmes should respect child protection principles and children's rights and enable children to actively participate in the programmes and obtain information in a safe environment.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of children's fundamental rights in enhancing community disaster awareness and preparedness, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



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Figure 9 Enhancing Community Disaster Awareness and Preparedness from the Perspective of Children's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Design child-centred disaster awareness programmes.

- Develop basic disaster awareness trainings and programmes appropriate for age groups that support participation.
- Ensure the adaptation of the visual contents which contains appropriate information for children and the materials that are suitable for children.
- Ensure the participation of children in designing and implementing awareness programmes.
- Provide education and awareness-raising information with sensitivity to prevent traumatising of children in accordance with age groups.

Include children's rights and child protection in trainings and awareness activities.

- Ensure that trainings and awareness programmes include clear information about children's rights before, during and after disasters.
- Ensure the participation of child protection experts and psychologists in the preparation of trainings and awareness programme content.
- Ensure that information on child protection risks, violence against children, abuse and maltreatment is included in all community trainings and awareness programmes.

Create child-friendly and safe training environments that promote learning.

- Ensure that training programmes are provided in safe and child-friendly spaces.
- Ensure that the training environment supports the child's learning and participation

Integrate disaster risk and awareness trainings into formal education curricula.

- Integrate disaster risk training programmes into formal education curricula.
- Ensure that education curricula include content and methods that are appropriate to the learning needs of different age groups.



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Ensure the participation of parents, caregivers and teachers in trainings and awareness programmes.

- Increase the capacity of teachers and education staff working with children in training and awareness programmes for children.
- Encourage the participation of parents and caregivers in training programmes.
- Raise the parents' and caregivers' awareness on disaster risks affecting children and ensure that they support children in developing safe behaviours regarding disaster risks.

Examples of Verification Questions

<p>Disaster awareness raising programmes</p>	<p>Are original contents suitable for different learning levels of children's age groups prepared for basic disaster awareness trainings?</p> <p>Are easy to understand and interesting training materials designed for children?</p> <p>Do teachers with pedagogical formation, psychologists and disaster experts work together during the preparation of the materials?</p> <p>Are appropriate approaches used that encourage learning with games and activities?</p> <p>Do disaster awareness trainings include content that is suitable for children and empowers them?</p> <p>Is information given to children in a scientific manner so as not to traumatize them?</p>
<p>Participation in programmes and drills</p>	<p>Are comprehensive disaster awareness trainings planned in schools?</p> <p>Are disaster awareness trainings planned at the local level for out-of-school children?</p> <p>Is the training environment of programmes implemented for out-of-school children safe and accessible for children?</p> <p>Is the participation of caregivers and parents in disaster awareness trainings for children ensured?</p> <p>Do children take part not only in schools but also in other drills planned for adults at the neighbourhood or local level in a way that their vulnerabilities are visible in the scenario?</p> <p>Do officials and volunteer teams have the opportunity to practice theoretical learning on the issues required to be monitored regarding children's vulnerabilities during the drills?</p>
<p>Inclusion of disaster awareness programmes into the official curriculum and</p>	<p>Are advocacy activities conducted with solution partners and key stakeholders to increase children's safety?</p>



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<p>implementation in relevant public spaces (child care centres, child-friendly venues, youth clubs, etc.)</p>	<p>Are the necessary training programmes integrated to the curriculum to raise children risk awareness?</p> <p>Are there arrangements in training programmes to ensure the participation of children in local risk assessment processes through schools, especially to identify local risks?</p> <p>Do both educators and children receive regular trainings and practices on risk awareness in kindergartens, day care centres and youth clubs?</p> <p>Are there any awareness-raising activities on the measures against non-structural risks in schools, kindergartens and child-friendly spaces?</p> <p>Is the participation of children and teachers ensured in the process of taking these measures?</p>
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Table 10 Examples of Verification Questions regarding Enhancing Community Disaster Awareness and Preparedness from the Perspective of Children’s Rights

For detailed questions, see ANNEX 2 Enhancing Community Disaster Awareness and Preparedness Checklist.

Enhancing Community Disaster Awareness and Preparedness from the Perspective of the Rights of Elderly People and Persons with Disabilities

The elderly people and the persons with disabilities have different needs than other vulnerable groups in disasters due to their physical limitations and caregiving needs. The high risks of social isolation and mobility barriers make their access even more difficult. In this regard, it is vital to plan and implement accessible and inclusive programmes. Moreover, the elderly people and the persons with disabilities need customised learning methods due to their cognitive and physical conditions. Implementation of awareness programmes with content and methods suitable for each type of disability and the elderly people is critical for the success of the programmes. Disaster awareness programmes should be inclusive and accessible regarding the fundamental rights and special protection risks of the elderly people and the persons with disabilities.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of the fundamental rights of elderly people and persons with disabilities in enhancing community disaster awareness and preparedness, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



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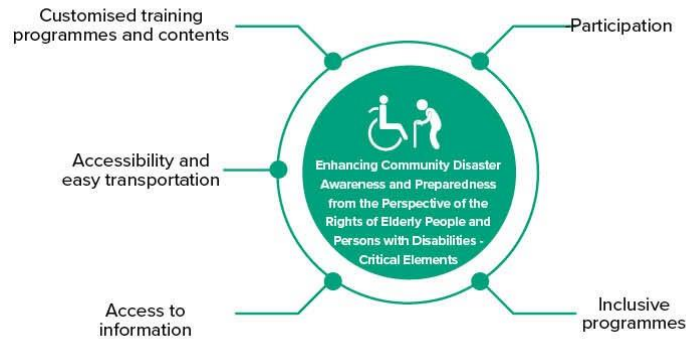


Figure 10 Enhancing Community Disaster Awareness and Preparedness from the Perspective of the Rights of Elderly People and Persons with Disabilities - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Prepare customised training programmes and content.

- Develop the content of training and awareness programmes suitable for the needs of the elderly people and the persons with disabilities in different disability groups.
- Ensure the participation of the target audience during the preparation of training programmes.
- Consider the different needs of elderly people and individuals with various types of disabilities, including physical, sensory, cognitive and psychosocial disabilities.
- Ensure that programme materials are accessible and inclusive.

Ensure that programmes are accessible and inclusive.

- For face-to-face trainings, choose venues that the target group already uses and can easily access.
- Consider the physical needs of the target group in training environments and design plan accordingly.
- Ensure caregivers' participation in awareness raising and training programmes.

Ensure that information is presented according to the specific needs of the elderly people and persons with disabilities.

- Prepare customised content in alternative communication formats to ensure that the elderly people and the persons with disabilities can access and understand information (For example, materials in Braille, large print, easy-to-read formats, sign language translation, audio descriptions and subtitles for videos).
- Choose communication channels in line with the communication preferences of the elderly people and the persons with disabilities and get feedback from the target audience.



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Establish participation mechanisms for the preparation and implementation of programmes.

- Create appropriate environments and mechanisms to ensure the participation of elderly people and persons with disabilities in the design of trainings and awareness programmes.
- Ensure the effective participation of the target audience by taking measures to remove barriers to participation.
- Ensure that training programmes are inclusive to address the varying vulnerabilities and needs of all elderly people and persons with disabilities.
- Ensure that all community training and awareness-raising programs cover risks and awareness-raising for persons with disabilities and elderly persons.
- Ensure that trainings and awareness programmes are designed and implemented so as to cover fundamental rights and to empower the target audience.

Examples of Verification Questions

<p>Disaster awareness programmes</p>	<p>Are contents prepared for disaster awareness trainings for different types of disabilities and for the elderly people?</p> <p>Are the training materials and content developed with appropriate language and expression tools for persons with disabilities?</p> <p>Are the training materials prepared with appropriate language and methods for the elderly people? (font size, videos with audio, etc.)</p> <p>Are different materials, games and videos prepared for the persons with disabilities?</p> <p>Is the participation of groups and NGOs for persons with disabilities ensured during the preparation of trainings?</p> <p>Does the training content include topics for different disabilities?</p> <p>Are humanitarian ethics, protection principles and basic humanitarian aid standards part of disaster awareness trainings?</p>
<p>Accessibility</p>	<p>Are disaster awareness trainings provided in accessible and safe areas with appropriate language and expression tools and taking into account different ages and genders?</p> <p>Is the participation of communities and NGOs during the preparation of disaster awareness trainings ensured?</p> <p>Are the trainings given in safe areas accessible by persons with different disabilities?</p>
<p>Participation in programmes and drills</p>	<p>Are training programmes planned at places and times accessible to persons with disabilities?</p> <p>Is the participation of persons with disabilities in drill scenarios and drills with varying vulnerabilities ensured?</p> <p>Are different disability situations taken into account in scenarios and drills?</p>



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	<p>Do officials and volunteer teams have the opportunity to practice theoretical learning on the issues required to be monitored regarding the vulnerabilities of persons with disabilities during the drills?</p> <p>Are training programmes planned at appropriate places and times by taking into account the elderly people who are in public institutions or live with their families?</p> <p>Are topics for caregivers of the elderly people and the persons with disabilities included in the training programmes?</p> <p>Is the active participation of caregivers in training programmes ensured?</p>
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Table 11 Examples of Verification Questions regarding Raising Enhancing Community Disaster Awareness and Preparedness from the Perspective of the Rights of Elderly People and Persons with Disabilities

For detailed questions, see *ANNEX 2 Enhancing Community Disaster Awareness and Preparedness Checklist*.



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SEARCH AND RESCUE

For vulnerable groups who become much more vulnerable in disaster situations, search and rescue activities are of vital importance for these groups. Vulnerable groups such as elderly people, persons with disabilities, children and pregnant women may not be able to move easily or may be at risk of harm during disasters due to physical limitations, mobility difficulties or dependency.

During search and rescue activities, special attention should be paid to these specific groups and appropriate measures should be taken to remove them away from hazards and protect them. Search and rescue activities, prepared by considering their limitations, needs and capacities, play a critical role in saving lives and preventing harm, and constitute a fundamental step in the post-disaster recovery process.

The following points should be considered in search and rescue activities from the perspective of vulnerable groups (subheadings and important points are not limited to the following):

- ✓ *Needs and Sensitivities of Vulnerable Groups:*
 - Considering the special needs and sensitivities of vulnerable groups during search and rescue activities,
 - Ensuring that search and rescue teams are sensitive to the special situations of vulnerable groups.
- ✓ *Compliance with Ethical and Humanitarian Principles:*
 - Conducting search and rescue activities in accordance with national and international ethical and human rights principles,
 - Prioritising issues such as respect for human dignity, security and privacy.
- ✓ *Training and Communication Rules:* Ensuring that search and rescue teams receive special trainings on the principles of working with vulnerable groups, communication and rules of conduct.
- ✓ *Measures against Media Abuse:* Taking necessary measures to ensure that the presence of the media does not lead to abuse during response.
- ✓ *Gender Balance and Employment of Female Staff:* Encouraging the assignment of more female staff in search and rescue teams.
- ✓ *Encouraging Special Teams Working with Vulnerable Groups:* Encouraging and supporting teams working especially with vulnerable groups during accreditation processes.

Everyone affected by a disaster has the right to receive search and rescue services, provided by specialised teams with competent and sufficient equipment, at the right time and without any discrimination.

Ethical principles during disasters, European and Mediterranean Major Hazards Agreement (EUR-OPA)



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Search and Rescue from the Perspective of Women's Rights

During search and rescue operations, the fundamental rights of women, especially right to life, must be respected. The search and rescue staff need to be aware of humanitarian aid principles and standards, which helps ensure that human rights and human values are respected during the operations.

Policies and practices that promote gender equality in search and rescue organisations should be developed, which ensure women's equal participation in operations. It is crucial to deploy female observers or consultants and female staff in search and rescue teams to help better understand and meet the needs of women.

Moreover, it is important that the search and rescue staff have knowledge and awareness of the special risks and needs that women are exposed to in disasters and have the skills to communicate effectively with women and provide support to them. The safety and privacy of women during search and rescue operations must be ensured and the presence of the media should not lead to rights violations during search and rescue interventions.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of women's fundamental rights in search and rescue, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 11 *Search and Rescue from the Perspective of Women's Rights - Critical Elements*

Table of key activities (including but not limited to sub-breakdowns)

Develop the capacity of search and rescue staff and volunteers.

- Ensure that the search and rescue staff are informed about fundamental rights and women's rights.
- Monitor the implementation of policies that promote gender equality among teams.
- Ensure the participation of female staff in teams.



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Communicate transparently and appropriately with women during search and rescue activities.

- Inform women accurately and clearly about search and rescue activities.
- Ensure the participation of women in the measures taken.

Pay attention to the privacy of women during search and rescue operations.

- Ensure that relations with the press during search and rescue activities are conducted in a manner that respects women's privacy.
- Ensure that activities are conducted in accordance with human dignity.

Plan specific gender-sensitive search and rescue interventions.

- Take into account the varying needs and sensitivities of women when conducting search and rescue activities.

Take measures for protecting women during search and rescue operations.

- Ensure that necessary measures are taken to ensure the safety of women and their protection from violence during and after disaster response immediately.
- Ensure that measures for security and preventing violence are taken in a timely manner in cooperation with relevant stakeholders.

Examples of Verification Questions

<p>Search and Rescue Staff</p>	<p>Do the search and rescue staff receive training on fundamental human rights and women's rights?</p> <p>Do these trainings include gender equality, violence against women, sexual harassment and other issues related to women's rights?</p> <p>Are the search and rescue staff aware of the special risks and needs women are exposed to in disasters?</p> <p>Are the search and rescue staff informed about humanitarian aid principles and standards?</p> <p>Are there female observers or advisors deployed in the search and rescue teams?</p> <p>Are the staff qualified enough to communicate effectively with women and provide relevant support to them?</p> <p>Are sufficient number of women deployed to the teams?</p> <p>Is the capacity building for women's rights through women's perspective and sensitivities recognised as an accreditation criterion?</p>
<p>Cultural codes, regional needs, code of conduct, respect for human dignity, security, privacy</p>	<p>Are teams informed before going on a mission to understand the values, beliefs and behaviours of different cultural groups?</p> <p>Do teams collaborate with local community leaders, NGOs, and other stakeholders to understand cultural differences and intervene</p>



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	<p>appropriately?</p> <p>Are the teams familiar with international reference documents, especially Sphere Humanitarian Charter and Minimum Standards in Humanitarian Response and the Core Humanitarian Standard?</p> <p>Are the teams informed about international disaster ethical principles?</p> <p>Are translators deployed to meet multilingual needs?</p>
Respecting fundamental rights	<p>Do the staff act in line with the humanitarian principles such as humanity, non-discrimination, independence and impartiality?</p> <p>Is it monitored and evaluated whether the fundamental rights of vulnerable groups are respected during rescue operations?</p> <p>Do rescue teams manage their operations transparently?</p> <p>Is proper communication channels established with all parties involved in decision-making processes?</p> <p>Does humanitarian aid respect human dignity?</p>
Safety of women	<p>Do the rescue teams ensure the safety of the rescued women?</p> <p>Are the injured people moved to a safe area to protect them from harmful interactions and enlisted the support of police or security guards, if necessary, until paramedics arrive?</p> <p>Are the privacy rights of rescued women respected?</p> <p>Are rescued women contacted to ensure the proper communication established with their families or relatives?</p> <p>Are hospital referrals made in accordance with the defined procedures?</p>
Preventing abuse in communication	<p>Are ethical principles for disaster defined and shared with media organisations?</p> <p>Are media professionals trained in disaster broadcasting and ethics?</p> <p>Is the compliance of media organisations in disaster reporting with ethical principles monitored and is a warning mechanism utilised when necessary?</p> <p>Is there a cooperation established among organisations to prevent the unauthorized usage of images of people rescued from the rubble to ensure human dignity?</p> <p>Is women's privacy respected during media releases and broadcasts?</p>

Table 12 Examples of Verification Questions regarding Search and Rescue from the Perspective of Women's Rights

For detailed questions, see ANNEX 3 Search and Rescue Checklist



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Search and Rescue from the Perspective of Children's Rights

Search and rescue teams must conduct prioritised and very sensitive searches in areas where children may be missing or injured to ensure the safety and protection of children. Even very small spaces may be sufficient for children to survive.

In order to protect children's fundamental rights, reduce security risks, and take emotional vulnerabilities into account during search and rescue activities, teams must receive technical training, equipped with special equipment and be informed about child psychology.

During rescue activities, teams should frequently communicate with children's families to inform and involve them in the process. Measures must be taken to protect the safety of children at the highest level during search and rescue activities. Preventing child abuse, protecting their privacy and conducting a fair process for all are very important to protect the best interests of children.

The perspective of children's rights should be integrated in the planning and implementation processes of search and rescue activities. Thus, the fundamental rights of children can be respected during search and rescue operations. During search and rescue activities, it is essential for teams to be informed and aware about the different needs, sensitivities and protection risks of children.

While rescuing missing or injured children from the rubble after disasters, their physical and emotional safety must be ensured at the highest level. Teams must fully comply with the established procedures while handing over children to medical teams or families during and after the operation.

Moreover, it is vital to minimise risks such as child trafficking and child abuse and to protect children's privacy. One of the priority objectives should be to reunite missing children with their families as soon as possible.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of children's fundamental rights in search and rescue, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.

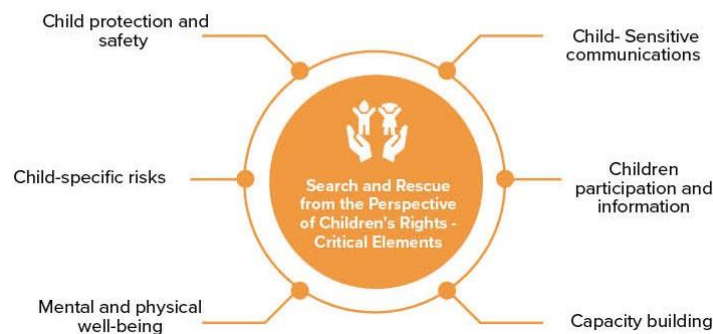


Figure 12 Search and Rescue from the Perspective of Children's Rights - Critical Elements



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Table of key activities (including but not limited to sub-breakdowns)

Take relevant protection and safety measures specific for children during search and rescue operations.

- Ensure that proper measures are taken to protect children against maltreatment, abuse, neglect, violence and discrimination in the disaster zone.
- Plan and implement measures for safeguarding children's rights.
- Ensure the safety and privacy of rescued children and take measures not to share their images in public.

Consider the safety risks specific to children (kidnapping, getting lost, etc.) during search and rescue activities.

- Be aware of the specific risks on child loss, abduction, separation from family and physical and emotional vulnerabilities.
- After rescue, ensure that unaccompanied children are transferred to relevant and responsible stakeholders in accordance with the defined procedures.
- Ensure that the specific measures to address these specific risks are taken together with the relevant stakeholders.

Take measures to improve and ensure children's mental and physical well-being.

- Prioritise the mental and physical well-being of children in search and rescue operations.
- Ensure that children, who are affected by the disaster and who witness the disaster, are not exposed to any communication, information, or images that will create secondary trauma.
- Ensure that adequate equipment and specialised staff for their mental and physical well-being is available.

Design accessible information dissemination mechanism for children in search and rescue operations.

- Ensure that search and rescue teams have the awareness and skills to child-sensitive communication.
- Provide support to and cooperate with the families of children trapped under the rubble during operations.
- Develop the capacity of search and rescue staff on children's varying needs, vulnerabilities, safety and protection risks, disaster psychology, and search and rescue ethics.
- Improve child psychology and communication skills of rescue teams communicating with children during disaster response.

Examples of Verification Questions

Search and Rescue Staff	<p>Are the search and rescue staff provided regular training on children's rights?</p> <p>Do the search and rescue staff avoid situations that could compromise child safety and take measures to protect them?</p> <p>Are the teams informed about issues such as child psychology and post-</p>
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	<p>traumatic stress disorder?</p> <p>Do teams include observers with expertise in child protection to better understand children's needs and provide direct support to them?</p> <p>Are search and rescue staff informed on how to develop cooperation with different institutions regarding child protection and other specific needs?</p>
Physical and emotional safety of children	<p>Is the child moved to a safe area to protect him/her from harmful interactions and enlisted the support of police or security guards, if necessary, until the arrival of paramedics?</p> <p>Are registration and documentation systems established for children who are rescued from the rubble according to the defined procedures?</p> <p>Based on the principle that children should not be handed over to anyone without consent of children or conclusive evidence, is the support of official authorities requested in such cases?</p> <p>Are teams provided training on child psychology and child development to better understand children's psychological and emotional needs?</p> <p>Are all measures taken to ensure children's privacy?</p> <p>Do search and rescue teams establish safe areas where children can stay until they are handed over to their families or authorities?</p> <p>Are team members informed that children should not be handed over to their families or authorities without consent of children or legal documentation?</p> <p>Are the necessary measures taken for the protection and safety of children?</p> <p>Do rescue teams follow defined protocols to prevent child trafficking, exploitation and other child protection risks?</p>
Communication with children	<p>Are announcements (information dissemination methods) about the latest situation of the disaster and search and rescue suitable for children?</p> <p>Is a quiet and safe environment established for the child information process?</p> <p>Are parents and educators enabled to play an active role while informing children?</p> <p>Are child protection principles respected when there is a need for informing children during search and rescue activities?</p>
Reunification with family	<p>Are rapid communication and coordination among relevant institutions established to find the missing children and reunite them with their families?</p> <p>Are identification and verification procedures applied while reuniting children with their families?</p> <p>Is psycho-social support provided to missing children and their families?</p>



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	Is there coordination among relevant institutions for reunification with family?
Preventing abuse in communication	<p>Are ethical principles for disaster reporting by media organisations defined and shared with media organisations?</p> <p>Are media professionals trained in disaster reporting and ethics?</p> <p>Is there cooperation among organisations to prevent unauthorized use of images of children rescued from the rubble in a manner that is incompatible with human dignity?</p> <p>Are confidentiality and privacy of children respected?</p>

Table 13 Examples of Verification Questions regarding Search and Rescue from the Perspective of Children’s Rights

For detailed questions, see ANNEX 3 Search and Rescue Checklist

Search and Rescue from the Perspective of the Rights of Elderly People and Persons with Disabilities

The persons with disabilities and the elderly people may be easily injured during disasters due to their physical and other limitations, or may have difficulties in accessing safe areas due to their limited mobility. On the other hand, due to their existing limitations search and rescue teams may have difficulties in reaching them. Therefore, rescue teams need to develop proper plans for rescuing them in advance and utilise specific technical equipment, especially for the persons with disabilities. In addition to that, the elderly people and the persons with disabilities may have medical needs such as regular medication or special equipment. It is also important that rescue teams have the necessary knowledge and skills to meet these needs. It is critical for rescue teams to provide physical and psychological support to and develop proper communication skills for the elderly people and the persons with disabilities, who may experience more intense stress and trauma due to disasters.

During the planning and implementation of search and rescue activities, it is essential to overcome access limitations for the elderly people and the persons with disabilities, protect the privacy of the elderly people and the persons with disabilities, prevent the presence of the media from leading to abuse, and protect the physical and mental safety of the elderly people and the persons with disabilities.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of fundamental rights of the elderly people and the persons with disabilities in search and rescue, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



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Figure 13 Search and Rescue from the Perspective of the Rights of Elderly People and Persons with Disabilities - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Take protection and safety measures during search and rescue operations.

- Focus on ensuring the physical and psychological safety of the elderly people and the persons with disabilities.
- Ensure that the necessary measures are planned by considering the protection of and health risks to the elderly people and the persons with disabilities.
- Implement the measures by considering the sensitivities of the elderly people and the persons with disabilities.

Prioritise the mental and physical well-being of the elderly people and persons with disabilities.

- Take measures for the mental and physical well-being of the elderly people and the persons with disabilities during search and rescue operations.
- Prioritise these measures and ensure that these measures are carried out by adequate equipment and expert staff.

Take the necessary measures for ensuring accessibility for the elderly people and the persons with disabilities.

- Take measures to facilitate access to rescue operations for the elderly people and the persons with disabilities.
- Ensure that operations are sensitive to elderly people and persons with disabilities in terms of physical support and communication.

Consider the special needs and sensitivity of the elderly people and the persons with disabilities while communicating with them.

- Ensure that teams learn special communication tools such as sign language to communicate with the elderly people and the persons with disabilities.



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- Use communication tools and methods appropriate to the needs of the elderly people and the persons with disabilities during communication.
- Develop the capacity of search and rescue staff on the varying needs, vulnerabilities, safety and protection risks of elderly people and persons with disabilities, disaster psychology, communication and search and rescue ethics.

Examples of Verification Questions

Search and Rescue Staff	<p>Do all professional and volunteer teams receive regular training on the rights of persons with disabilities and elderly people?</p> <p>Are necessary measures taken to meet the different needs of persons with disabilities in rescue activities? (developing alternative communication methods with persons with disabilities under rubble, etc.)</p> <p>Are there experts or consultants in the teams who understand and support persons with disabilities?</p> <p>Are staff aware of special needs, such as mobility, vision or hearing difficulties of elderly people</p> <p>Are there staff who know sign language in search and rescue teams?</p>
Safety of persons with disabilities and elderly people	<p>Are information and support received from local people to locate the persons with disabilities?</p> <p>Is accessibility ensured by using special equipment to rescue the persons with disabilities from the rubble?</p> <p>Are emergency medical interventions regarding the health of the persons with disabilities and the elderly people provided immediately?</p> <p>Are the privacy rights of persons with disabilities respected and are their personal information kept confidential?</p> <p>Are special measures taken for the safety of persons with disabilities and elderly people?</p> <p>Is the safety of the area for the persons with disabilities and the elderly people ensured during rescue operations and are necessary measures taken to protect them from harmful interactions?</p> <p>Is support received from police or security guards, if necessary, to transport the injured person to a safe zone to be protected from harmful interactions until medical teams arrived?</p> <p>Are hospital referrals carried out in accordance with the defined procedures?</p>
Communication with Elderly People and Persons with	<p>Are the information materials prepared in accordance with the different needs of the elderly people and the persons with disabilities?</p>



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<p>Disabilities</p>	<p>For example, sign language videos or subtitled content for the hearing impaired, audio books or texts prepared in Braille alphabet for the visually impaired, etc.</p> <p>Is the information dissemination process structured in multiple layers by using visual, auditory and tactile senses? For example, written or visual communication methods for the hearing impaired, tactile or audio communication methods for the visually impaired.</p> <p>Is the information process carried out in an environment where the persons with disabilities and the elderly people feel safe and comfortable?</p> <p>Is feedback received continuously to ensure that persons with disabilities understand the information and that their needs are met?</p>
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Table 14 Examples of Verification Questions regarding Search and Rescue from the Perspective of the Rights of Elderly People and Persons with Disabilities

For detailed questions, see ANNEX 3 Search and Rescue Checklist



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EVACUATION AND RESETTLEMENT

Women, children, persons with disabilities and elderly people are much more affected by the processes during the evacuation and resettlement phase. Their protection risks may increase, and their social ties may be severed. This can cause even more vulnerabilities for them. During evacuation, women's various challenges such as protecting their privacy, hygiene needs, pregnancy and birth, breastfeeding, and caring for children and family elders should be managed well. Moreover, the evacuation process may cause an increase in the risk of children being lost and exposed to violence and abuse.

Persons with disabilities and elderly people may be separated from their families or may be unable to meet their continuing healthcare needs. The evacuation process should be planned and implemented with certain sensitivity by considering their vulnerabilities.

The following factors should be considered in the evacuation and settlement in safe areas from the perspective of vulnerable groups (subheadings and important factors are not limited to the following):

- ✓ *Information dissemination on evacuation:*
 - In case of mandatory evacuation, providing relevant information on the reasons for the evacuation, the possible risks if not evacuated, and evacuation process in a clear and transparent manner before the evacuation.
 - Preparing and delivering evacuation announcements and information in a manner that is accessible to vulnerable groups.
- ✓ *Social Networks: When planning evacuation,* special care should be taken to reallocate social networks, family, neighbour and friend relationships that will make vulnerable groups feel safe while planning evacuations.
- ✓ *Special needs and participation of vulnerable groups:*
 - Considering the special needs and sensitivities of vulnerable groups during the evacuation,
 - Taking into account the habits, cultural codes and regional needs of vulnerable groups during the evacuation and resettlement in safe areas,
 - Ensuring the participation of vulnerable groups while developing settlement plans and settlements.
- ✓ *Protection and Fundamental Rights:*
 - Taking necessary measures to prevent protection and security risks for vulnerable groups during the evacuation and in the areas to be settled,
 - Ensuring the continuity of services regarding fundamental rights during evacuation and resettlement.

During the mandatory evacuation processes for disaster risk reduction, it is life-saving to provide accurate, timely and comprehensive information that takes into account the special sensitivities of vulnerable groups and to ensure the announcements are accessible.



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Evacuation and Resettlement from the Perspective of Women's Rights

There may be an increase in risks that women are exposed to during evacuation and resettlement operations due to disaster risks. The social networks that women are accustomed to may be disrupted, and security risks may arise due to reasons such as travelling alone or shelter in unsafe places. Women who are pregnant or at risk of giving birth may need prioritised medical support during the evacuation. At evacuation centres or shelter areas, it may also be difficult to provide appropriate conditions for the care of children. Leaving their safe space and home behind can cause women to feel insecure and be constantly anxious. Measures, such as emergency psychosocial support, the presence of security forces in the settlement areas, and lighting arrangements help women to feel safe. Also, informing women in evacuation and temporary settlement areas on application process for protection risks such as in cases of sexual harassment or violence is essential in addressing such risks. By enabling women to take on leadership roles and to participate in decision-making processes during evacuation and resettlement, effective decisions are taken on issues such as accurate identification of needs, monitoring of changing needs, and security.

During the evacuation process and in the settlement areas, women should be immediately provided access to fundamental rights and services and their special needs must be met. It should be prioritised to take necessary measures to ensure the privacy of women during evacuation and settlement, and to take measures to provide nutrition, privacy and health care for pregnant, postpartum and breastfeeding women during the evacuation. Moreover, it is important to eliminate security gaps that may pose possible protection risks such as maltreatment or sexual harassment during the evacuation of women, and to take special measures for the protection and confidentiality of women during the evacuation of women who are already under protection or who are in the process of divorce.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of women's fundamental rights in evacuation and settlement, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 14 Evacuation and Resettlement from the Perspective of Women's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)



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Take prevention and response measures to protect women during evacuation and settlement.

- Pay special attention to risks such as sexual harassment, violence, maltreatment and abuse that may arise during evacuation and resettlement.
- Take appropriate measures to prevent these risks.
- Focus on the confidentiality measures for women who are already under protection or who are in the process of divorce during the evacuation phase.

Ensure that gender-sensitive self-care and hygiene measures are taken.

- Establish facilities such as private toilets and shower areas, that protect privacy, in settlement areas during evacuation and resettlement.
- Raise public awareness on women's self-care and hygiene needs.
- Plan protective and preventive measures to eliminate health problems that may arise due to weakening of hygiene conditions.

✓ Take special measures to ensure continuity of social support and to reduce women's care burdens.

- Develop plans to ensure the establishment of social networks such as family, neighbourhood, and community ties during the evacuation.
- Provide professional support services to alleviate women's care burdens for children and elderly family members.

✓ Provide clear, comprehensive and accurate communication and information during evacuation and resettlement.

- Prepare evacuation information in a method and format accessible to women.
- Use appropriate communication channels to ensure the full access of women to information.

✓ Ensure women's participation and representation in evacuation process.

- Seek women's opinions and views through women community leaders, communities and NGOs during the evacuation and in the settled safe areas.
- Establish and manage the necessary participation mechanisms and collaborations to enable women to participate in decision-making processes.

Examples of Verification Questions

<p>✓ Special needs and sensitivities</p>	<p>✓ Are the staff responsible for evacuation informed about the special needs and sensitivities of women?</p> <p>✓ Is it ensured that hygiene materials concerning with the special hygiene needs of women, that may be required during the evacuation, are available?</p> <p>✓ Are there sufficient female staff among the evacuation officers?</p> <p>✓ Is data collection and logging made regularly during the evacuation in an age- and gender-sensitive manner? Do such records contain the information on who is evacuated to where?</p>
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	<ul style="list-style-type: none"> ✓ Are the evacuation plans developed to protect social ties such as family and neighbourhood etc.?
<ul style="list-style-type: none"> ✓ Access to basic services in evacuation zones 	<ul style="list-style-type: none"> ✓ Are basic needs such as health, nutrition and shelter provided at appropriate standards in the evacuated area? ✓ Are appropriate health services provided to meet women's sexual and reproductive health needs? For example, birth control, pregnancy care, breastfeeding counselling, etc. ✓ Are the necessary staff available for emergency psychosocial support?
<ul style="list-style-type: none"> ✓ Protection and Security 	<ul style="list-style-type: none"> ✓ Are the evacuations planned separately for women who are already under protection? ✓ Are protection and security measures taken in settlement areas? ✓ Is sufficient lighting available and are the security staff assigned in evacuation zones? ✓ Are measures taken against physical threats that may pose a risk in evacuation zones?
<ul style="list-style-type: none"> ✓ Water, sanitation, hygiene 	<ul style="list-style-type: none"> ✓ Is the equipment, such as personal hygiene supplies, distributed to meet basic needs? ✓ Are separate toilet and shower areas planned for women? ✓ Are the routes to common toilet and shower areas adequately illuminated and are the security staff active 24/7? ✓ Can adequate water and sanitation supports be provided?
<ul style="list-style-type: none"> ✓ Care burden 	<ul style="list-style-type: none"> ✓ Is trained staff and volunteer support provided for care support? ✓ Are measures taken to alleviate the increasing care burden of women since they take care of their children and elderly family members?
<ul style="list-style-type: none"> ✓ Information Dissemination 	<ul style="list-style-type: none"> ✓ Are announcement and siren systems installed? ✓ Is the participation of neighbourhood mukhtars, imams, teachers and active women leaders in the neighbourhoods in the processes ensured? ✓ Is multilingual information provided due to regional differences? ✓ Is the necessary information regarding the evacuation given in writing and verbally? ✓ Are the risks that may occur in the absence of evacuation explained? For example, fire, flood, storm, etc.

Table 15 Examples of Verification Questions regarding Evacuation and Resettlement from the Perspective of Women's Rights

For detailed questions, see ANNEX 4 Evacuation and Resettlement Checklist.



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Evacuation and Resettlement from the Perspective of Children's Rights

✓ During the mandatory evacuations, children may face security risks such as getting lost in crowded and unsafe environments or being separated from their families. Suddenly leaving their homes, going to an unknown environment, and facing uncertainty can cause anxiety, fear and trauma. Also, there may be challenges in meeting the basic needs of children during the evacuation. Limited education and play opportunities in evacuation centres or temporary shelter areas may harm the normal development of children, and inadequate hygiene conditions may lead to health risks for children. Some children may have special or developmental needs that may be difficult to meet during the evacuation process.

✓ All these risks threaten the physical and spiritual development of children. Therefore, it is vital to prioritise the special needs and protection of children to take appropriate measures for the safety, health and well-being of children, and to consider the physical, emotional and social needs of children during mandatory evacuations.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of children's fundamental rights in evacuation and settlement, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 15 Evacuation and Resettlement from the Perspective of Children's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Take protection and safety measures specific for children.

- Protect children from maltreatment, abuse, neglect, violence and discrimination.
- Design and implement measures that safeguard children's rights.

Consider the best interests of the child in evacuation and re-settlement.

- Ensure that children are physically, emotionally and sexually safe at all times.
- Ensure that varying needs and risks for girls and boys across different age groups are identified and appropriate intervention plans are developed.
- Ensure that appropriate measures are taken in line with the plans.



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Ensure that the child's family union and social networks are protected.

- Ensure that families are kept together during evacuation and resettlement processes.
- Support the continuous communication among families and ensure the continuity of children's social networks such as school and neighbourhood.

Ensure that children have access to essential services during evacuation and resettlement.

- Ensure that services that enable children to access their fundamental rights are provided during the evacuation and in the safe areas.
- Develop and implement plans to ensure that children can continue their education and have access to playgrounds.
- Take measures for vaccinations, medical monitoring, and other preventive health measures to protect children's physical health. Ensure their access to health services.
- Provide appropriate psychosocial support to reduce the trauma of evacuation and leaving their safe home and to ensure returning their normal life as much as possible.
- Ensure that psychosocial supports are accessible to all children.

Ensure the active participation of children with an inclusive approach.

- Seek children's ideas and views in an inclusive manner during evacuation and resettlement processes.
- Establish mechanisms to encourage children's participation and support children's active participation.

Build the capacity of evacuation staff to address the specific needs of children.

- Ensure that evacuation staff are informed about the varying vulnerabilities, needs, risks and threats of girls and boys.
- Improve staff communication skills with children and mobilise competent staff in communicating with children.

Examples of Verification Questions

<p>Special needs and sensitivities</p>	<p>Are the staff responsible for evacuation informed about the special needs and sensitivities of children?</p> <p>Are measures planned to address children's protection risks?</p> <p>Are protection staff assigned for possible protection risks in the evacuated areas?</p> <p>Are protection workers working collaboratively to reduce the traumatic effects of evacuation, and are they supported in methods to reduce the traumatic effects?</p> <p>Are precaution taken to ensure the children are not at risk of disappearance, abduction, harassment, violence and organ trafficking regarding children during the evacuation?</p>
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Access to basic services	<p>Have temporary settlement schools or kindergartens and playgrounds been immediately put in place in the evacuated area, according to the planned length of stay?</p> <p>Do the staff working in evacuation areas receive awareness training on child protection risks and dangers?</p> <p>Are processes well defined and are referral mechanisms established in case of possible protection cases?</p>
Water, sanitation, hygiene	<p>Are separate shower and toilet areas planned for girls and boys?</p> <p>Is necessary information provided and are measures taken to ensure that children should not go unaccompanied to shared toilet areas in the evening hours?</p> <p>Can water and sanitation be provided adequately?</p>
Family unity	<p>Are children and their families' data kept accurate and up-to date?</p> <p>Is a system developed for monitoring the data accuracy?</p> <p>Is it ensured that children do not lose their families during the evacuation?</p> <p>Are special protection measures taken for unaccompanied children?</p>

Table 16 Evacuation and Resettlement from the Perspective of Children's Rights

For detailed questions, see ANNEX 4 Evacuation and Resettlement Checklist.

Evacuation and Resettlement from the Perspective of the Rights of Elderly People and Persons with Disabilities

Since the elderly people and the persons with disabilities are often more physically fragile, they may have difficulties moving during the evacuation. Physical difficulties such as climbing up and down stairs or walking long distances can slow down the evacuation processes for them. In emergency evacuations carried out due to disaster risks, it may be difficult to meet the needs of individuals, who use regular medications or need medical devices, during the evacuation. Furthermore, leaving their homes, going to an unknown environment and facing uncertainty can cause anxiety, fear and difficulties in adaptation to the new situations, and they may close themselves off to warnings and guidance.

The evacuation centres and temporary shelters may not be accessible to the elderly people and the persons with disabilities. Social isolation is another risk that may be encountered by the elderly people and the persons with disabilities. Separation from family members, moving away from familiar environments, and experiencing a lack of communication with society can cause loneliness and anxiety in the elderly people and the persons with disabilities.

Inadequate hygiene conditions in evacuation centres may increase health risks for the elderly people and the persons with disabilities. The elderly people and the persons with disabilities, especially with weakened immune systems, may be more vulnerable to infections than the rest of the society. During the evacuation planning phase, it is vital to take into account the needs and difficulties of these groups,



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plan the necessary support for them, develop the necessary capacity and implement the measures taken.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of fundamental rights of the elderly people and the persons with disabilities in evacuation and settlement, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 16 Evacuation and Resettlement from the Perspective of the Rights of Elderly People and Persons with Disabilities - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

✓ Take measures to address accessibility problems of the elderly people and the persons with disabilities.

- Make possible physical arrangements to ensure the evacuation centres and temporary shelter areas are friendly for the elderly people and the persons with disabilities.
- Provide evacuation notifications in a clear and transparent language and with a method appropriate to the special communication needs of the elderly people and the persons with disabilities.
- Ensure the proper access of the elderly people and the persons with disabilities to information on evacuation and resettlement.

Ensure that evacuations do not create social isolation for the elderly people and the persons with disabilities.

- During the evacuation process, ensure that the elderly people and the persons with disabilities are evacuated with their families/caregivers.
- Ensure the continuity of social ties such as neighbourhood and friendship.
- Implement protective measures against the risk of social isolation for the elderly people who are alone.



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Take the necessary measures to address the health risks of the elderly people and the persons with disabilities.

- Identify hazards that may pose a health risk and take necessary precautions.
- Ensure the continuity of required medicines and medical supplies. Use data-driven methods.
- Ensure that common toilet and shower areas in evacuation zones are clean and suitable for the persons with disabilities.

Ensure the continuity of services regarding fundamental rights.

- Ensure the continuity of basic services that the elderly people and the persons with disabilities will need during the evacuation and settlement process.
- Ensure that the elderly people and the persons with disabilities have access to basic rights and services such as health, nutrition and shelter during the evacuation and settlement process.

Ensure that necessary measures are taken to protect the elderly people and the persons with disabilities.

- Plan the necessary measures to ensure the safety and protection of the elderly people and the persons with disabilities from violence during evacuations.
- Ensure timely and effective interventions with relevant stakeholders for security and violence situations.

Develop the capacity of evacuation staff to address the special needs of the elderly people and the persons with disabilities.

- Ensure that evacuation staff are aware and informed about the vulnerabilities, threats, risks, needs of the elderly people and the persons with disabilities.
- Mobilise competent staff with empathy and special language skills (sign language, etc.) to communicate with the elderly people and the persons with disabilities during evacuations.

Examples of Verification Questions

<p>Special needs and sensitivities</p>	<ul style="list-style-type: none"> ✓ Are the staff responsible for evacuation informed about the special needs and sensitivities of the elderly people and the persons with disabilities? ✓ Are necessary plans made to ensure that the elderly people and the persons with disabilities are evacuated along with their regularly used medications and medical equipment during the evacuation process? ✓ Is data logging made regularly during the evacuation in an age- and gender-sensitive manner? Do such records contain the information on who is evacuated to where? ✓ Are suitable vehicles mobilised for the elderly people and the persons with disabilities during the evacuation? ✓ Are the evacuation plans made to protect social ties such as family and neighbourhood etc.?
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<p>Access to basic services in evacuation zones</p>	<ul style="list-style-type: none"> ✓ Is the continuity of basic services ensured in evacuation zones? ✓ Are necessary architectural plans made for the persons with disabilities to ensure their access to services in the evacuated zones? ✓ Are social workers assigned for possible protection risks in the evacuated areas? ✓ Do the elderly people and the persons with disabilities have access to their regular medications or equipment they need to use? ✓ Are the sufficient staff available for emergency psychosocial support?
<p>Water, sanitation, hygiene</p>	<ul style="list-style-type: none"> ✓ Are the showers and toilets accessible to the elderly people and the persons with disabilities in evacuation zones? ✓ Are toilets planned at an appropriate distance from living spaces? ✓ Can adequate water and sanitation be provided?
<p>Information</p>	<ul style="list-style-type: none"> ✓ Are announcement and siren systems installed? ✓ Are evacuation announcements made in accordance with the special communication needs of the elderly people and the persons with disabilities and is their access ensured? ✓ Is multilingual information provided due to regional differences? ✓ Are the risks that may occur in the absence of evacuation explained? For example, fire, flood, storm, etc.

Table 17 Evacuation and Resettlement from the Perspective of the Rights of Elderly People and Persons with Disabilities

For detailed questions, see ANNEX 4 Evacuation and Resettlement Checklist.



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NUTRITION SERVICES

The right not to suffer from hunger and to have sufficient food is defined as a fundamental right by international law. Undernutrition and malnutrition pose serious life and health risks for everyone, especially children. Disasters adversely affect the access to food and livelihoods, especially for the most vulnerable groups. States are obliged to ensure the fulfilment of this right in cases where citizens cannot access sufficient food, including in disasters. Nutrition programmes implemented in disasters refer to all the activities including emergency nutrition support, hot meal distributions, food distributions in kind, cash and check.

Nutrition and food aid during disasters are vital for all vulnerable groups, especially children and pregnant women, who are at higher risk of malnutrition due to their limited access. Access to adequate nutrition is more challenging for vulnerable groups, especially during disasters when disruptions in food chain and individual food access capacities are limited. Special nutritional needs such as vegetarian, vegan and gluten-free diets also increase vulnerabilities. It is important to develop plans by considering these special needs. The integration of the perspective of the rights of vulnerable groups into food and nutrition assistance during disasters should be prioritised to ensure the enjoyment and protection of the fundamental rights to life and health of these groups, and to protect human dignity. In disasters and emergencies, all kinds of nutrition and food aid, including emergency nutrition support, hot meal distributions, in-kind and cash food aid, must be planned and implemented in an inclusive manner, be accessible to everyone, and support empowerment. Moreover, it should be ensured that nutrition programmes are implemented in a way that does not lead to serious violations of rights and protection risks such as harassment and abuse.

The following factors should be considered in nutrition activities from the perspective of vulnerable groups (subheadings and important factors are not limited to the following):

✓ *Adequate and Appropriate Nutrition:*

- Ensuring the access of vulnerable groups to appropriate and sufficient food,
- Ensuring that the nutrition assistance plans respect for human dignity,
- Utilising environmental protection measures during nutrition activities,
- Conducting regular nutrition status assessments and updates.

✓ *Staff and Processes:*

- Mobilising competent staff who are informed about the sensitivities of vulnerable groups,
- Taking necessary measures to ensure that the distribution of nutrition assistance does not create a security risk or facilitate harassment.

✓ *Principle of Cultural Sensitivity:*

- Ensuring that the nutrition services are carried out without harming cultural values by reviewing the duration and qualifications of nutrition according to the changing conditions and quality.



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Policies that are participatory, inclusive and sensitive to gender equality should be determined at all planning and implementation stages of nutrition support programmes.

Nutrition Services from the Perspective of Women's Rights

In disasters, women face specific difficulties in accessing adequate food and nutrition due to gender inequalities, social norms, increased care burdens, protection risks and their limited access to resources. Malnutrition may adversely affect the physical and mental well-being of everyone affected by a disaster, especially pregnant and breastfeeding women, and pose risks to life. Therefore, it is important to ensure that women have access to safe and adequate nutrition in a manner to ensure gender equality, non-discrimination and protection of fundamental rights.

Nutrition programmes must be planned and implemented to meet women's specific needs, support their empowerment, and prevent all kinds of protection and security risks. Ensuring the participation of women in nutrition programmes and the sharing of nutritional roles is especially vital in terms of equality between men and women.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of women's fundamental rights in nutrition assistance, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 17 Nutrition Services from the Perspective of Women's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Take the necessary measures for the provision of gender-sensitive nutrition services and the access to food for women.

- Develop nutrition programmes that will ensure women have equal access to sufficient, safe and appropriate food in line with their needs.



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- Plan services and assistance that supports empowerment and not create dependency on assistance in the long term.
- Ensure that nutrition service provision and food distribution respect human dignity and fundamental rights.
- Ensure that information on nutrition services is accessible to women.
- Consider cultural codes and local dietary habits.

Consider women's special needs (pregnant women, postpartum women, breastfeeding mothers, etc.), and make and implement nutrition plans that address these needs.

- Ensure that gender-sensitive nutrition and food needs analyses are conducted.
- Ensure that nutrition services and food assistance provided meet women's specific needs.
- Support gender equitable sharing for nutrition services.
- Offer solutions for varying special needs, especially for women who are breastfeeding and in postpartum period.
- Plan and implement in kind and in cash nutrition assistance solutions in a gender-sensitive manner.

Be aware of the protection risks related to inadequate nutrition and develop proper measures to address such risks.

- Ensure that feeding and food distribution services are provided in a manner that does not create abuse, harassment or violence risks for women.
- Ensure that women's access to food is adequate and appropriate in order to prevent them from engaging negative coping strategies.
- Ensure that information on nutrition services and safe access to adequate food is gender-sensitive.
- Develop and implement safeguarding procedures to prevent and respond protection risks such as harassment, abuse and violence against women that can be caused by staff and volunteers.

Ensure women's participation in the management and delivery of nutrition services.

- Ensure women's participation in decision-making processes regarding nutrition and food assistance.
- Establish and effectively utilise mechanisms for women to communicate their requests, complaints and feedback.

Examples of Verification Questions

<p>Gender-sensitive nutrition and food assistance and access</p>	<p>Are nutrition and food assistance planned with gender-sensitive exit strategies?</p> <p>Do the services and assistance provided support the fair sharing of roles regarding food responsibility among family members?</p> <p>Are cultural codes and local dietary habits considered during assistance planning?</p>
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	Is information on the location and time of nutritional assistance provided in a clear, widespread, multilingual and comprehensive manner?
Special needs and nutrition	Is the access to adequate and appropriate food for pregnant and breastfeeding women ensured? Are personalised assistance solutions provided by taking into account the differentiated nutritional needs?
Protection risks and food safety	Are special measures taken to ensure the safety of women, especially during the hot meal distributions? Are measures taken to ensure that nutrition assistance does not pose any risk of abuse and maltreatment for women? Are the staff responsible for food distribution aware of harassment cases that women may experience? Do the staff have knowledge on how to proceed in such situations?
Participation and feedback	Are there mechanisms available for women to provide feedback on food assistance processes? Are feedbacks effectively monitored and evaluated?

Table 18 Examples of Verification Questions regarding Nutrition Services from the Perspective of Women's Rights

For detailed questions, see ANNEX 5 Nutrition Checklist.

Nutrition Services from the Perspective of Children's Rights

Meeting children's need for adequate food is vital for their survival, health, and physical and mental development during their growing years, compared to adults. Due to their physical conditions and dependency to their caregivers, children are among the most vulnerable groups in terms of nutrition and access to sufficient food, especially during disasters when access to food is more challenging. Nutrition programmes during disasters should be planned and implemented to ensure that children have access to adequate and safe food in line with their development needs. Lack of access to adequate nutrition is directly related to child protection risks since it can lead to health and development risks as well as adverse consequences such as early and forced marriage and child labour.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of children's rights in nutrition assistance, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



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Figure 18 Nutrition Services from the Perspective of Children's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Prioritise a child-centred approach in nutrition programs.

- Prioritise the best interests of children in all decisions regarding the food and nutrition assistance.
- Focus on protecting children's physical, mental and emotional well-being in nutrition programmes.
- Train staff and volunteers on child-centred approaches.
- Establish mechanisms for the effective participation of children in nutrition programmes.
- Take into account children's feedback, complaints and requests in nutrition programmes.

Ensure that children have access to adequate nutrition according to their specific needs.

- Consider children's developmental and physical needs during calorie calculations.
- Ensure that the food provided meets recommended nutritional standards for children by age group.
- Identify barriers to children's access to food and take proper measures to remove them.
- Ensure that specific nutritional supports are provided for breastfeeding women and interventions supporting breastfeeding (such as breastfeeding counselling) are provided.
- When necessary, plan formula and supplementary food supports in line with the developmental needs of babies.
- Develop supportive nutrition programmes (school nutrition aid and micronutrient supplements, etc.) and special nutrition assistance programmes for children.

Ensure that nutrition programmes are implemented in a way that does not result in child protection risks.

- Take the necessary measures to prevent children from being exposed to any protection risks at hot meal and food distribution points.



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- Establish and implement safeguarding procedures to prevent and respond when staff and volunteers cause protection risks such as harassment, abuse and violence against children.

Examples of Verification Questions

<p>Child-centred nutrition programmes and access to adequate food</p>	<p>Are the barriers related to children's access to food, including unaccompanied children, addressed in nutrition programmes?</p> <p>Are special measures and interventions implemented to address the obstacles to children's access to adequate food?</p> <p>Are staff and volunteers working in nutrition programmes informed about child-centred approaches?</p> <p>Are parents and caregivers aware of the importance of adequate and safe food for children?</p>
<p>Special needs and nutrition</p>	<p>Do nutrition programmes ensure that the food provided are appropriate with different age groups and developmental needs of those groups?</p> <p>Are parents and caregivers informed and aware about the special nutritional needs of children?</p>
<p>Child protection and nutrition</p>	<p>Are measures to address child protection sensitivities at distribution points taken? For example, establishing separate queues, prioritising children, etc.</p> <p>Are staff and volunteers working in the nutrition programmes informed about child protection risks?</p> <p>Are monitoring and intervention mechanisms in place to address possible harassment, neglect, abuse and maltreatment by staff?</p> <p>Are nutrition programmes designed to prevent child protection risks that can cause children's exposure to negative coping strategies?</p> <p>Are staff and volunteers informed about child protection coordination and referral mechanisms?</p>
<p>Child participation</p>	<p>Are there mechanisms for children to provide feedback on food assistance processes?</p> <p>Do feedback mechanisms have effective age and gender representation?</p> <p>Are feedback mechanisms designed in a manner that is age- and gender-appropriate and accessible?</p> <p>Are families involved in these mechanisms when necessary?</p>
<p>Staff and volunteers</p>	<p>Do staff have knowledge and understanding about child protection legislations and core principles?</p> <p>Do staff receive communication skills trainings on how to communicate with</p>



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	<p>children effectively?</p> <p>Are up-to-date data on the provision of nutrition services, information on decisions taken, practices initiated by the public administration specifically for children with special nutritional needs (if any), reports on developments at the field, secondary data resources that may be useful for nutrition services in disasters and best practices reported and disseminated to the relevant institutions and organisations?</p>
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Table 19 Examples of Verification Questions regarding Nutrition Services from the Perspective of Children’s Rights

For detailed questions, see ANNEX 5 Nutrition Checklist.

Nutrition Services from the Perspective of the Rights of Elderly People and Persons with Disabilities

The elderly people and the persons with disabilities are often more vulnerable than other individuals during disasters and face more challenges in meeting their nutritional needs. Nutrition and food assistance not only support the physical health and resilience of the elderly people and the persons with disabilities but also meet their emotional and psychological needs. Providing regular and individualised nutrition and food assistance for the elderly people and the person with disabilities helps them feel safer and more supported during disasters while contributing to the solidarity of society and the recovery process after disasters and emergencies.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of fundamental rights of the elderly people and the persons with disabilities in nutrition assistance, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 19 Nutrition Services from the Perspective of the Rights of Elderly People and Persons with Disabilities - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)



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Offer individualised nutrition programmes that address the varying special needs of the elderly people and the persons with disabilities.

- Conduct data-based nutrition and food needs analyses based on gender, age and disability.
- Ensure the nutrition services and food assistance meet specific needs of the elderly people and the persons with disabilities.
- Ensure that individualised nutrition programmes consider special health needs.

Ensure that the elderly people and the persons with disabilities have safe access to nutrition programmes.

- Ensure that physical access barriers for the elderly people and the persons with disabilities are removed at hot meal and food distribution points.
- Ensure that information about nutrition and food assistance is customised to the specific communication needs of the elderly people and the persons with disabilities.
- In food package distribution, develop alternative distribution plans for the elderly people and the persons with disabilities who do not have access to distribution points.
- Ensure that the elderly people and the persons with disabilities who cannot meet their own nutritional needs have access to adequate food through their caregivers.

Ensure the active participation of the elderly people and the persons with disabilities in nutrition programmes.

- Establish participatory feedback mechanism in order to receive the views and opinions of the elderly people and persons with disabilities on nutrition services.
- Ensure the feedbacks are regularly evaluated and integrated to nutrition programmes.

Examples of Verification Questions

Individualised nutrition programmes	<p>Are special nutritional needs identified for the elderly people and the persons with disabilities (if any) who have special dietary needs or chronic conditions?</p> <p>Are personalized assistance offered for these needs?</p>
Access and security	<p>Are special supports provided to the elderly people living alone to eliminate the limitations in their access to food?</p> <p>Is information about the place and time of nutritional assistance provided in a clear, widespread, multilingual and comprehensive manner?</p> <p>Are disabled-friendly physical measures taken at hot meal and food distribution points?</p>
Participation	<p>Are there mechanisms for the elderly people and the persons with disabilities available to provide feedback on food assistance processes?</p> <p>Are families/caregivers involved in these mechanisms when necessary?</p>



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<p>Staff and Volunteers</p>	<p>Are teams trained on the special needs and challenges of the elderly people?</p> <p>Do teams receive training and have experience on empathising with the elderly people and the persons with disabilities in order to understand their experiences?</p> <p>Do teams receive trainings to improve their skills on effective communication with the elderly people and the persons with disabilities?</p> <p>Are staff informed about the protection risks and referral mechanisms for the elderly people and the persons with disabilities?</p> <p>Are up-to-date data on the provision of nutrition services, information on decisions taken, practices initiated by the public administration specifically for elderly people and persons with disabilities with special nutritional needs (if any), reports on developments at the field, secondary data resources that may be useful for nutrition services in disasters and best practices reported and disseminated to the relevant institutions and organisations?</p>
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Table 20 Examples of Verification Questions regarding Nutrition from the Perspective of the Rights of Elderly People and Persons with Disabilities

For detailed questions, see ANNEX 5 Nutrition Checklist.



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SHELTER SERVICES

The shelter services provided immediately after disasters not only provide protection from environmental conditions but also offer a healthy living environment, support family and community life, ensure the dignity and privacy of life, and support the empowerment of individuals by influencing their sense of security. Therefore, shelter services are not limited to only material supply or shelter construction.

It is essential that the shelter areas/camps need to be planned to support the mobility of vulnerable groups and to be deployed to facilitate their access to services. A shelter unit design that provides privacy and necessary household items also reinforce the feeling that the life is close to normal. Manageable sized and well-planned shelter areas help vulnerable groups affected by disasters to rebuild their social ties. Also, shelter has an important role, especially for women and children, on protection of the vulnerable groups against increased risks of violence after disasters.

The qualifications and standards of shelter services are defined in the Sphere Humanitarian Charter and Minimum Standards in Humanitarian Response and are internationally accepted.

The following factors should be considered in shelter activities from the perspective of vulnerable groups (subheadings and important factors are not limited to the following):

✓ *Shelter Units:*

- Planning and implementing shelter areas and households in accordance with the Sphere Humanitarian Charter and Minimum Standards in Humanitarian Response,
- Ensuring the shelter unit designs support reinforcing the sense of safety and privacy for vulnerable groups.

✓ *Service Provision:*

- Designing water and sanitation services in a manner that does not pose any health and safety risks.
- Providing regular psychosocial support in shelter areas,
- Ensuring secure and sufficient access to energy in the shelter units,
- Ensuring equal access to health services, nutrition and aid for vulnerable groups in shelter areas.

✓ *Community-based Safety and Support:*

- Ensuring that area managers are informed about Sphere and similar guidelines and shelter standards,
- Establishing community-based participatory mechanisms to effectively ensure protection and security.

Shelter during disasters is much more than four walls and a roof for vulnerable groups.



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Shelter Services from the Perspective of Women's Rights

Post-disaster shelter services are crucial for women as it helps them to prepare for and support their transition to normal life. However, when shelter services are not planned in line with a gender equality perspective, the services can pose security and access risks for women. Poorly illuminated settlement areas, lack of gender-equal security staff, and difficulty in accessing services can prevent women from feeling safe. In non-participatory, poorly planned and ineffectively managed settlements, women are at increased risk of sexual abuse and assault. In such shelter areas, mobility of the women may be restricted, they may not have access to necessary services and they may not be able to establish social solidarity networks. While planning and managing shelter areas, necessary measures should be taken to ensure that women can feel safe, can access services more easily, can protect their privacy and re-establish their social ties. These measures should include measures such as planning shelter areas based on the gender-equality principle, adequately illuminating the settlements, assigning trained and sensitive staff to ensure security, and ensuring the easily accessible services. It is essential to provide a supportive and protective shelter environment for women's empowerment and integration into society after disasters.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of women's fundamental rights in shelter services and shelter areas, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 20 Shelter Services from the Perspective of Women's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Ensure women's safety and create safe spaces for women.

- Take security measures to protect women against the risk of violence in shelter areas.
- Consider women's safety when planning services and activities in shelter areas.
- Develop the settlement plans by taking into account special measures for women already under protection or women at risk of protection.
- Establish safe spaces where women can gather in shelter areas.



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- Plan the lighting of shelter areas to ensure the safety of women.
- Provide 24/7 security services in shelter areas.

Take measures to protect women's privacy.

- Ensure that the layout and design of shelter areas and shelter units provide privacy for women.
- Consider women's privacy concerns regarding services and activities offered in shelter areas.

Ensure that basic services for women are provided.

- Take measures to facilitate access to shelter in order to meet women's specific needs.
- Ensure that services for women's specific needs (nutrition, water, sanitation, hygiene, security, health, psychosocial, etc.) are provided in shelter areas.

Create mechanisms for social support and solidarity.

- Design shelter areas to help build solidarity and support networks among women affected by disasters.
- Establish appropriate mechanisms to foster social solidarity and support.

Ensure women's participation and representation in the management of shelter areas.

- Establish mechanisms to encourage women's active participation in shelter management and decision-making processes.
- Use participatory methods for receiving women's feedbacks, requests and complaints, and transparently evaluate and respond to those feedbacks.

Ensure that women are informed properly in shelter areas.

- Ensure that women have access to information on services and activities in shelter areas.
- Provide up-to-date information through women-friendly communication tools and channels and in a language appropriate for women.

Examples of Verification Questions

<p>Accessibility and coordination on services for women's varying needs</p>	<p>Are transportation facilities to the service points and urban centres convenient, safe and sufficient for women?</p> <p>Are adequate services (health, nutrition, water, sanitation, psychosocial support, etc.) available and safely accessible for women in shelter areas?</p> <p>Is access to other services that are not provided in shelter areas safe and accessible for women?</p> <p>Are other special shelter services for women, such as guest houses, active and accessible?</p> <p>Are Child Care services provided to support women in providing care for their children and focusing on their own needs?</p> <p>Are women adequately provided with in-kind assistance for their special</p>
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	<p>needs (such as hygiene, clothing, etc.) when required?</p> <p>Are there areas in temporary shelter areas that offer counselling and support services specifically designed for women?</p> <p>Is there an effective coordination with managing institutions, local NGOs, local administration units, volunteer groups and other stakeholders for services for women in shelter areas?</p>
Women Protection and security	<p>Are women at risk of protection prioritised in settlements?</p> <p>Are protection risks considered during shelter unit distributions? (i.e., not settled in the same shelter unit with the violent spouse, etc.)</p> <p>Are necessary measures taken to ensure the relocation of women (when necessary) and data privacy?</p> <p>Are protective, preventive and responsive measures planned for the risks of violence and abuse against women?</p> <p>Are application and referral mechanisms for risks such as violence and abuse effectively operated?</p> <p>Are privacy and security measures taken for women under protection or at risk of protection in shelter areas?</p> <p>Is there sufficient lighting in shelter areas?</p> <p>Are there sufficient security staff in shelter areas?</p> <p>Are common service areas and utilities (laundry, shower, toilet) planned in a location and quality that does not pose any security risks?</p>
Shelter areas and shelter unit plans	<p>Are Sphere standards considered in planning shelter areas?</p> <p>Is gender-equality principle considered in the planning and design of shelter areas?</p> <p>In temporary shelter areas, are shelter units, toilets and showers located in areas where women can easily access and feel safe?</p> <p>Are the shelter units designed in accordance with regional climatic conditions?</p> <p>Is adequate lighting provided for shelter areas and shelter units?</p> <p>Are the necessary equipment and resources for each shelter unit determined and provided in advance?</p> <p>Are the standards regarding the number of people considered in settlements?</p> <p>Do girls have private areas?</p> <p>Do the settlement plans support the neighbourhood relations and social ties?</p> <p>Are there convenient areas planned to alleviate the care burden of women by</p>



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	enabling children and other family members in need of care to spend time outside the shelter unit? (such as playgrounds, study rooms, schools, day homes for elderly people, etc.)
Decision-making mechanisms and participation	<p>Is there sufficient female representation in the management of shelter areas?</p> <p>Are there effective mechanisms that enable women to share their opinions and to participate in decision-making processes?</p> <p>Is the active participation of women ensured?</p> <p>Are there specific policies and practices in place to ensure gender equality in the management of shelter areas?</p>
Shelter area/service staff	<p>Are the staff informed about fundamental rights and ethical principles in humanitarian aid?</p> <p>Are the staff informed about the risks of harassment, sexual assault and other protection against women and the relevant response interventions?</p> <p>Are preventive safeguarding measures taken against any rights violations or abuse caused by the staff?</p> <p>Are there sufficient multilingual staff in the shelter areas according to regional needs?</p> <p>Are sufficient female staff mobilised in the shelter areas?</p> <p>Are up-to-date data on the provision of shelter services, information on decisions taken, practices initiated by the public administration specifically for women with special needs (if any), reports on developments at the field, secondary data resources that may be useful for shelter services in disasters and best practices reported and disseminated to the relevant institutions and organisations?</p>

Table 21 Examples of Verification Questions regarding Shelter Services from the Perspective of Women's Rights

For detailed questions, see ANNEX 6 Shelter Checklist.

Shelter Services from the Perspective of Children's Rights

In the chaos caused by disasters, children lose their normal daily life routines, may become homeless, lose their beloved ones and lose their safety. Such changing situations can cause children to experience trauma, fear and anxiety. Therefore, shelter becomes vital especially for children after disasters. A safe and healthy shelter environment protects children's physical health and also supports their emotional and psychological well-being. Shelter areas provide safe spaces to help children recover from the trauma they experience after disasters. Moreover, such areas provide children with a routine and safe environment and make it easier for them to return to their normal lives. Meeting shelter needs is also crucial for children to meet their basic needs. Meeting basic needs such as sufficient water and food in shelters after disasters supports their healthy development. In addition, education and health services provided in shelter areas help minimise factors that may adversely affect the future of children.



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The following section includes a graph of the key elements that should be prioritised to integrate the perspective of children's fundamental rights in shelter services and shelter areas, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 21 Shelter Services from the Perspective of Children's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Ensure that protection and safety measures specific for children are taken.

- Take the necessary measures to observe, prevent and respond in child protection risks, such as unaccompanied and separated children, sexual exploitation and abuse, maltreatment, child labour, etc.
- Eliminate structural hazards such as rain pits, dark construction areas, etc. that may pose both health and physical risks to children in temporary shelter areas.
- Establish safe spaces where children can spend time for their well-being.
- Prioritise the safety of children in the use of common areas and services.

Ensure the continuity of essential services for children and their access to such services.

- Design services that will meet the varying basic needs of children in shelter areas, such as food, water, sanitation, health, etc., with a child-centred approach.
- Ensure that children can enjoy their right to education and development, such as temporary schools and study centres, etc. Take all measures to ensure that children are not deprived of education.
- Ensure that children have access to services that support their psychological and physical well-being (for example, child-friendly activities, psychosocial counselling, guidance, etc.)

Promote the establishment of social ties and solidarity.

- Establish child-friendly safe areas in shelter areas, where children can gather with their peers, where they can share and create together.



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- Take the necessary measures to ensure that playgrounds and recreation areas, community spaces that support social ties do not pose physical and environmental risks for children.
- Ensure that children are safe from child protection risks within their community.

Ensure that children have access to, participate in and are informed about inclusive services.

- Ensure the active participation of children particularly in decision-making processes in shelter areas, especially those that affect them.
- Inform children clearly, concisely and appropriately about the basic services offered in shelter areas.
- Ensure that services are inclusive for different age groups and genders.

Examples of Verification Questions

<p>Accessibility and coordination of services for children’s varying needs</p>	<p>Are the transportation facilities of the shelter areas to the service points and city centres suitable, safe and sufficient for children?</p> <p>In temporary shelter areas, are shelter units, toilets and showers located in areas where children can easily access and feel safe?</p> <p>Are adequate services (health, nutrition, psychosocial support, etc.) available and safe for children to access in shelter areas?</p> <p>Are education services provided to meet the education and development needs of children? If not, do children have access to education services outside the shelter areas?</p> <p>Are the needs of different age groups and genders considered when designing services?</p> <p>Are there child-friendly areas where children can spend time safely?</p> <p>Are children adequately provided with in-kind assistance for their special needs (hygiene, clothing, stationery, books, etc.) when required?</p> <p>Is there coordination with relevant stakeholders regarding services for children?</p>
<p>Child protection and safety</p>	<p>Is the design of shelter areas suitable for children's protection sensitivities? For example, are privacy, separate sleeping areas, etc. considered?</p> <p>Are protective, preventive and response measures planned for child protection risks?</p> <p>Do application and referral mechanisms for risks such as violence and abuse work effectively?</p> <p>Is there sufficient lighting in shelter areas?</p> <p>Can the movements of children in the area be monitored to reduce the risk of getting lost, and are emergency procedures implemented in case of</p>



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	<p>getting lost?</p> <p>Are safe shelter options immediately arranged for unaccompanied children?</p> <p>Are there sufficient security staff?</p> <p>Are common service and utilities (shower, toilet) planned in a location and quality that does not pose any security risks for children?</p>
Shelter areas and shelter unit plans	<p>Are private areas for girls available?</p> <p>Are measures taken against the physical risks of children in shelter areas? For example, traffic, potholes, etc.</p> <p>Are there safe areas where children can safely socialize and meet their developmental and educational needs?</p> <p>Are there secure areas where children can play and interact comfortably?</p> <p>Are measures taken to prevent children from staying together with non-family adults in shelter units?</p>
Child participation and access to information	<p>Are the communication language and tools used for information dissemination suitable for children (simple and understandable)?</p> <p>Is there a participatory approach to collect and integrate the opinions and experiences of children?</p> <p>Are children centres, playgrounds and the staff working in these areas actively used as communication channels to reach out the children?</p> <p>Are families included in information activities regarding children?</p>
Shelter services staff	<p>Are the staff informed about fundamental rights and ethical principles in humanitarian aid?</p> <p>Are the staff informed about child protection risks and necessary interventions?</p> <p>Are preventive measures taken against any rights violations, abuse or maltreatment that may arise from the staff?</p> <p>Are up-to-date data on the provision of shelter services, information on decisions taken, practices initiated by the public administration specifically for children with special needs (if any), reports on developments at the field, secondary data resources that may be useful for shelter services in disasters and best practices reported and disseminated to the relevant institutions and organisations?</p>

Table 22 Examples of Verification Questions regarding Shelter Services from the Perspective of Children's Rights

For detailed questions, see ANNEX 6 Shelter Checklist.



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Shelter Services from the Perspective of the Rights of Elderly People and Persons with Disabilities

Disasters significantly impact physical health, mood, and overall well-being of elderly people and persons with disabilities. In the chaos caused by disasters, they may often experience security concerns, become homeless, and separated from their families and community. This may cause them to experience psychological distress, fear and anxiety. Therefore, the need for immediate shelter is vital for the elderly people and persons with disabilities after disasters. A safe and healthy shelter environment protects physical health of them, supports their emotional and mental well-being, and distracts them from stress and uncertainty they experience in disasters. Moreover, common socialising spaces in shelter areas provide social solidarity and support to the elderly people and persons with disabilities and enable them to reorganise their new lives. In addition to that, health services and medical support provided in shelter areas allow them to monitor their health status and receive requires treatments. Providing safe and supportive shelter opportunities to elderly people and persons with disabilities during emergency interventions and long-term support programs is a critical step to minimise the negative effects of disasters on them.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of fundamental rights of the elderly people and the persons with disabilities in shelter services and shelter areas, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 22 *Shelter Services from the Perspective of the Rights of Elderly People and Persons with Disabilities - Critical Elements*

Table of key activities (including but not limited to sub-breakdowns)

Make accessible disability-friendly arrangements in shelter areas and shelter units.

- Establish shelter areas in convenient locations that will facilitate easy access to basic services for the elderly people and the persons with disabilities.
- Remove access barriers to services provided in shelter areas.
- Make disability-friendly arrangements in shelter areas to ease the mobility of the elderly people and the persons with disabilities.



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Ensure that accessible services for special needs are provided in shelter areas.

- Consider the special needs of the elderly people and the persons with disabilities such as special hygiene, sanitation needs, etc.
- Facilitate access to health services in shelter areas.
- Provide medical equipment and staff to address specific health needs.
- Ensure that adequate support is provided for the emotional and psychological needs of the elderly people and the persons with disabilities, and their caregivers after disasters.
- Ensure that basic services provided inside and outside the shelter areas, such as nutrition, psychosocial support, etc., are inclusive and accessible.

Ensure that sensitive, respectful and professional support is available for the elderly people and the persons with disabilities.

- Take the necessary measures to protect the personal spaces of the elderly people and the persons with disabilities.
- Ensure that staff working in shelter areas are aware of the different needs, fundamental rights and sensitivities of the elderly people and the persons with disabilities.
- Establish mechanisms in shelter areas to encourage the integration of the elderly people and the persons with disabilities into society.
- Establish common spaces where the elderly people and the persons with disabilities (and their caregivers) can interact, create together with their peers, and receive support for re-establishing social ties.

Ensure the participation and representation of the elderly people and the persons with disabilities in the management of shelter areas.

- Establish mechanisms for the participation of the elderly people and the persons with disabilities in the management and decision-making processes of shelter areas.
- Encourage the active participation of the elderly people and the persons with disabilities.
- Establish collaborations with relevant NGOs.

Examples of Verification Questions

<p>Inclusive basic services and access</p>	<p>Are the transportation facilities to the service points and city centres suitable, safe and sufficient for the elderly people and the persons with disabilities?</p> <p>Are sufficient basic services (health, nutrition, psychosocial support, water sanitation, etc.) provided for the special needs of the elderly people and the persons with disabilities in shelter areas?</p> <p>Are the needs of different age groups, genders and persons in different disability categories considered in service designing?</p> <p>Are the elderly people and the persons with disabilities provided with in-kind assistance for their special needs (medication, special materials, equipment, etc.) if</p>
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	<p>they cannot meet their own needs?</p> <p>Are services for the special needs of the elderly people and the persons with disabilities accessible for them?</p> <p>Are measures taken against physical barriers to accessing services (ramps, directions, wide entrances, etc.)?</p> <p>Are there alternative shelter services such as nursing homes and elderly care homes other than temporary shelter areas?</p> <p>Is there coordination with relevant stakeholders regarding services for the elderly people and the persons with disabilities?</p>
Shelter areas and shelter unit plans	<p>Are the shelter units designed to ensure that the elderly people and the persons with disabilities feel safe, peaceful and have privacy?</p> <p>Are disability-friendly physical arrangements provided, especially for households where the persons with disabilities stay?</p> <p>Are the elderly people and the persons with disabilities prioritised in the settlement process to provide easy access to services?</p> <p>Are there accessible interaction areas in shelter areas where the elderly people and the persons with disabilities can come together with their peers and can receive support for the re-establishment of social ties?</p> <p>Are there safe areas where children with disabilities can socialize safely, meet their developmental and educational needs, and interact with other children?</p>
Participation and access to information	<p>Is information dissemination conducted with appropriate materials (large print, high contrast colours, Braille alphabet or sign language, etc.) and through communication channels suitable for the special communication needs of the elderly people and the persons with disabilities?</p> <p>Are there appropriate participation mechanisms to support effective participation for the elderly people and the persons with disabilities?</p> <p>Are caregivers included in the information dissemination?</p>
Shelter services staff	<p>Are the staff informed about fundamental rights and ethical principles in humanitarian aid?</p> <p>Are the staff informed about special sensitivities of the elderly people and the persons with disabilities?</p> <p>Are there staff who are competent in special communication languages such as sign language?</p> <p>Are preventive safeguarding measures taken against any rights violations, abuse or maltreatment caused by the staff?</p> <p>Are up-to-date data on the provision of shelter services, information on decisions</p>



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	<p>taken, practices initiated by the public administration specifically for elderly people and persons with disabilities with special needs (if any), reports on developments at the field, secondary data resources that may be useful for shelter services in disasters and best practices reported and disseminated to the relevant institutions and organisations?</p>
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Table 23 Examples of Verification Questions regarding Shelter Services from the Perspective of the Rights of Elderly People and Persons with Disabilities

For detailed questions, see ANNEX 6 Shelter Checklist.

Example of a Good Practice

Container City in Adiyaman – Private Sector Initiative

After the Kahramanmaraş earthquake that took place on February 6, 2023, a private company in Adiyaman built a container city for 1,200 people for its employees and their families on a private land just next to their factory. Factory workers and family members with whom they shared the same house before the disaster moved in the container city as soon as the container city was ready. The ownership and usage rights of the containers were given to the female member of the family while handing over the shelter-units. A solid contract was signed, including usage rules and exit strategies. The container city planning and management team received expert support during the establishment of the city and built the shelter units and a settlement area in accordance with the Sphere standards. Families of male employees who lost their lives in the earthquake were also invited to the container city.

The following steps were taken when establishing and managing the container city.

Living spaces:

- ✓ Some families were provided with two combined containers so that each individual in the household would have at least 4 m2 of space.
- ✓ All relevant measures were taken against fire risks.
- ✓ Common areas in the shelter unit were divided by curtains, thus forming separate sleeping areas for girls and boys.
- ✓ Each household is provided with an air conditioner suitable for seasonal conditions.
- ✓ The container layout is planned to ensure the privacy of families.
- ✓ The front of each container is shaded so that it can be used as a socialization area by the household. This area was transformed into small gardens by families in the course of time.
- ✓ Laundry areas, one for every 10 containers, were located in easy-to-access areas.
- ✓ Families with elderly members and members with disabilities were provided with containers close to exits and marketplaces.
- ✓ Necessary measures for water and sanitation were taken, and underground systems and water treatment systems were installed.



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Security:

- ✓ Male and female security guards were assigned to ensure security.
- ✓ The lighting was ensured to be sufficient for security.
- ✓ Camp management was established with the participation of camp residents.
- ✓ The container city was surrounded by fences to ensure safe entry and exit.
- ✓ A security gate was created to receive visitors. Families were allowed to accept guests from outside.

Health Services and psychosocial support:

- ✓ A female psychologist was mobilised to the container city with the support of the Ministry of Health.
- ✓ With the support of the Ministry of Health, a mobile clinic provides health services in the container city at certain days.

Access to Education and protection of social networks:

- ✓ The children started education activities with the support of volunteer teachers.
- ✓ A kindergarten was established for working mothers. In case the kindergarten was not sufficient, transportation was provided for the nearest kindergarten.
- ✓ Playground and sports areas were utilised for children.
- ✓ A common community centre was set up to offer safe and accessible spaces to enable women, elderly people and children to come together.
- ✓ Families who worked at the same shifts or who knew each other before the disaster were placed in containers close to each other on application.

Employment opportunities and efforts on transition to normal life:

- ✓ If desired by the family member, the spouse or children of appropriate age of the male family member who lost his life in the earthquake were given the opportunity to work in the factory.
- ✓ Three markets were established in the container city to ensure the access of everyone. Families started to shop in these markets with their own money.
- ✓ Production started immediately in the factory upon the request of the factory employees. This greatly contributed to the normalization of life as much as possible.

Large-scale disasters are not natural phenomena that states and local public bodies can cope with alone. An effective normalization process can only be realised with the cooperation of the public, civil society, private sector and local administrations.



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HEALTH SERVICES

Providing health services in disasters is of vital importance for vulnerable groups. Vulnerable groups such as women, children, elderly people and persons with disabilities are generally at greater risk in disasters and in greater need of emergency health services. The special health needs of these groups should be prioritised during the planning and implementation of post-disaster services. Women may require more attention due to special circumstances such as pregnancy and birth while children and elderly people may need additional care and support. Persons with disabilities may have special needs such as physical access and communication.

Therefore, providing inclusive, accessible, sensitive, and effective health services for vulnerable groups is crucial in minimising the effects of disasters and increasing community health resilience.

The following factors should be considered in planning and providing of health services from the perspective of vulnerable groups (subheadings and important factors are not limited to the following):

- ✓ *Continuity of Health Services:*
 - Taking necessary measures to ensure that health services continue without interruption,
 - Ensuring the access to health for vulnerable groups,
 - Ensuring access to regular medications, including psychiatric medications,
 - Taking necessary measures regarding environmental health.
- ✓ *Rights and Security of Vulnerable Groups:*
 - Ensuring the dignity, privacy, confidentiality, security and right to information of vulnerable groups during health service provision,
 - Taking additional measures to ensure that vulnerable groups have access to all information regarding health services, including preventive information about epidemics,
 - Protecting health professionals and establishing psychosocial support mechanisms for them.
- ✓ *Conducting Trainings to Health Professionals:*
 - Ensuring that the health staff are competent and have sufficient knowledge on fundamental rights.
- ✓ *Environmental Risks and Measures:*
 - Taking special measures for vulnerable groups regarding environment, water and sanitation risks.

Access to health services is a human right. The right to dignity, privacy, confidentiality and security of vulnerable groups must be guaranteed during health service provision.



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Health Services from the Perspective of Women's Rights

Women's access to health services under the impact of disasters is a challenging issue that requires special attention. Women's natural life cycles, such as pregnancy, birth, sexual diseases, and menstrual periods, continue during disasters. Interruptions in access to health services during these periods may adversely affect women's health and general well-being. Also, during disasters, women may become more vulnerable as the sexual violence cases increase among the community and the need for special protection may arise.

Continuity of women's access to general health and reproductive health services in disasters and emergencies should be a part of health system pre- and post-disaster planning. These efforts should aim to identify women's needs in advance, allocate resources correctly and ensure the uninterrupted delivery of health services. Active participation during planning and service provision plays a key role in reducing women's health risks. Women's active participation in identifying the status of their access to health services and their needs during pre- and post-disaster processes ensures that services are more appropriate and accessible for them. Moreover, a participatory approach improves the quality of health programmes and strengthens the accountability of health systems.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of women's fundamental rights in health services, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 23 Health Services from the Perspective of Women's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Ensure that emergency health services are gender-sensitive, accessible and appropriate to women's sensitivities.

- Ensure that gender-based data is used in planning emergency health services regarding possible risks before disasters.
- Ensure that women have equal access to emergency health services.
- Ensure that facilities for emergency health services are accessible to women.



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- Ensure that emergency health services are provided by considering special vulnerabilities and protection risks of women.

Ensure that gender-sensitive health services are provided.

- Ensure that family planning, sexual and reproductive health services for women are provided and accessible.
- Consider the varying special needs of women (pregnant, postpartum, menopausal women, etc.) in the planning and provision of health services.
- Ensure that stocks of medical supplies and equipment are sufficient for women's specific needs in line with disaster risk scenarios.
- Provide supplies (sanitary pads, contraceptive supplements, etc.) and medications appropriately for women's specific needs.
- Ensure that the interinstitutional referral and coordination mechanism for women's protection risks identified during the provision of health services is efficiently functioning.

Ensure the continuity of health services for women and their access to services.

- Ensure that structural and non-structural measures are taken to prevent any interruption of health services for women in line with disaster risk scenarios.
- Ensure that gender-based data is used in analyses and planning for continuity of health services.
- Ensure that temporary health centres established are accessible to women.
- Use/provide mobile health facilities in areas where the access is limited.

Ensure that protective and preventive health measures for women are taken.

- Ensure that women have access to adequate water, sanitation and hygiene information, infrastructure and materials against epidemic disease risks.
- Ensure that information on protective and preventive health measures is gender sensitive and accessible to women.
- Establish and utilise community-based mechanisms for protective and preventive health information dissemination.

Increase the capacity of health professionals in gender-sensitive service provision.

- Develop the capacity of health professionals in line with women's rights and disaster risks specific to women.
- Inform health professionals about assessment and referral mechanisms regarding women's protection risks.
- Increase the capacity of all health professionals to provide emergency psychosocial support.
- Take measures against safety risks for all health professionals, especially female health professionals.



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Examples of Verification Questions

<p>Special needs and continuity of health services</p>	<p>Are measures taken against structural and non-structural risks for the continuity of health services for women?</p> <p>Are reproductive and sexual health services available and have safe access for women?</p> <p>Are supplies for special health needs (sanitary pads, birth control drugs, etc.) provided in a gender sensitive manner?</p> <p>Are emergency maternity service areas established from the first days of disasters?</p> <p>Are there sufficient information and materials on issues such as women's special needs (menstrual, reproductive, and sexual health, birth control)?</p> <p>Are there sufficient medical equipment and supplies available in health centres providing services for women?</p> <p>Is women's privacy and confidentiality taken into account in the provision of health services?</p>
<p>Access to health services</p>	<p>Are emergency health services accessible to women in line with their needs and sensitivities?</p> <p>Do women have safe access to general health services as well as health services specific to women?</p> <p>Is safe access to health facilities enabled for women?</p> <p>Are mobile health services effective for regions in remote areas?</p> <p>Are distribution and service points specifically for women established?</p> <p>Are local cultural codes and habits taken into account in the provision of health services?</p> <p>Are health services offered in multiple languages?</p> <p>Are there mechanisms available to and accessible for women to convey their feedback, complaints and demands regarding health services?</p>
<p>Protective and preventive health services</p>	<p>Is information about public health, protective and preventive health appropriate to women's sensitivity and accessible to women?</p> <p>Are community-based health information and follow-up mechanisms established?</p> <p>Do women have adequate and appropriate access to water,</p>



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	<p>sanitation and hygiene infrastructure and materials to prevent epidemics and reduce health risks?</p>
Women protection and health	<p>Are health services provided in a manner that do not harm women's sensitivities or do not cause medical side effects or abuse?</p> <p>Are referral mechanisms effective for protection risks identified during health services?</p> <p>Is interinstitutional coordination regarding protection risks functioning effectively?</p> <p>Are health professionals informed on codes of conduct and how to communicate with women when they encounter such risks?</p> <p>Are there any staff among the health professionals who are experts on violence against women and protection risks?</p>
Health professionals	<p>Are all health professionals informed about the protection risks and dangers that may arise in disaster?</p> <p>Is the number of competent female health professionals sufficient?</p> <p>Are health professionals trained on communication sensitivities with women and their special needs?</p> <p>Do all health professionals have knowledge on emergency psychosocial support?</p> <p>Are sufficient measures taken for the safety of all health professionals, especially female health professionals, during disasters?</p> <p>Are up-to-date data on the provision of health services, information on decisions taken, practices initiated by the public administration specifically for women with special needs (if any), reports on developments at the field, secondary data resources that may be useful for health services in disasters and best practices reported and disseminated to the relevant institutions and organisations?</p>

Table 24 Examples of Verification Questions regarding Health Services from the Perspective of Women's Rights

For detailed questions, see ANNEX 7 Health Checklist.



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Health Services from the Perspective of Children's Rights

Disasters can cause the emergence of several risks that may adversely affect children's access to health services. Thus, planning and implementing health interventions integrated with child protection strategies in disasters is vital to protect children's health and minimise risks.

Interruptions in children's access to health services in disasters may have serious consequences. Particularly in emergencies, children may be at greater risk and their health needs need to be prioritised and addressed quickly and effectively. To realise this, health interventions should be an integral part of pre-disaster planning and preparedness processes. During these processes, varying health needs of children should be considered and necessary measures should be taken to ensure uninterrupted provision of health services.

The continuity of children's access to health services also requires a protective approach. Health interventions must have an effective strategy to protect children's health while minimising the risks posed by disasters. This strategy should ensure that children have easy and safe access to health services and should be protected from possible risks with preventive measures.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of children's fundamental rights in health services, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 24 Health Services from the Perspective of Children's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Ensure the effective provision of emergency health services for children.

- Ensure that emergency health services are provided to children with an appropriate approach and communication so as not to further traumatize the child.
- Ensure that defined procedures are implemented for unaccompanied children in emergency health service referrals.
- Take the necessary measures (data sharing, coordination, etc.) to ensure that the unaccompanied children receiving emergency health services in health institutions are reunited with their families.



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Ensure the continuity of and access to child-focused health services.

- Ensure that child health services are provided to improve children's physical and psychological well-being.
- Ensure that the best interest of the children is prioritised in health referrals and service provision.
- Enhance children's access to health services with diagnosis and screening activities.
- Ensure that on-site health services (mobile health centres, etc.) are provided in order to ensure children's access to health services.
- Ensure that services are provided according to the varying needs of children such as age, gender, disability, and required regular treatment.

Ensure that child protection risks are considered in health services and relevant interventions are conducted.

- Increase the awareness of the staff about identifying child protection risks throughout the entire health services.
- Ensure that effective coordination and referral mechanisms for child protection are established and utilised.
- Ensure that health institutions work in effective cooperation with all relevant stakeholders on child protection.

Ensure that preventive and protective health measures are taken for children.

- Ensure that measures and information dissemination regarding public health and preventive health are conducted with tools and through communication channels appropriate to children's age levels and gender.
- Ensure that parents and caregivers are informed on preventive and protective measures for children.

Increase the knowledge and awareness of health professionals about providing child-focused health services.

- Develop the capacity of health professionals on children's rights and disaster risks specific to children.
- Train health professionals on identification and referral mechanisms regarding child protection risks.
- Inform all health professionals on relevant response methods and referral mechanisms in case of child protection risks identified.

Examples of Verification Questions

<p>Providing child-focused health services</p>	<p>Are plans made in line with age-disaggregated data to ensure the continuity of health services for children?</p> <p>Are defined measures and procedures followed to protect children's</p>
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	<p>family unity during emergency health services and medical treatments?</p> <p>Are health services provided according to children's varying needs in line with their age, gender, disability?</p> <p>Are there sufficient medical equipment and supplies available at health centres providing services for children?</p> <p>Are necessary measures taken to ensure the uninterrupted treatment for children who have chronic diseases and/or have continuous medication requirements?</p> <p>Do the hospital management grant special permissions and make special arrangements for the caregivers to stay with the children?</p>
Access to health services	<p>Are emergency health services accessible for children in line with their needs and sensitivities?</p> <p>Are there operational mobile health services for children in areas that have transportation limitations?</p> <p>Are measures taken to raise the awareness of parents and caregivers about children's access to health services?</p> <p>Is it ensured that physical barriers to access to health centres for children with disabilities, such as stairs, narrow corridors, or toilets without access suitable for persons with disabilities, are eliminated?</p>
Protective and preventive health services	<p>Is information about public health, protective and preventive health appropriate to children's sensitivity, age and gender, and accessible to children?</p> <p>Is the participation of children ensured in defining protective and preventive health measures?</p> <p>Are adequate and appropriate measures taken to ensure the access of children to water, sanitation and hygiene infrastructure and materials to protect children from infectious diseases, prevent epidemics and reduce health risks? Is the access of children to these measures ensured?</p> <p>Is the continuity of vaccination practices for children ensured during disasters?</p> <p>Are parents and caregivers included in protective and preventive health measures for children?</p>
Child protection and health	<p>Are health services provided in a manner that do not harm children's sensitivities or do not cause medical side effects or abuse?</p> <p>Are referral mechanisms effective for child protection risks identified during health services?</p>



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	<p>Is intersectoral coordination regarding protection risks functioning effectively?</p> <p>Are relevant procedures implemented for referrals of unaccompanied children to health services?</p> <p>Does health staff awareness on missing children during unaccompanied hospital admissions of children?</p>
Health professionals	<p>Are all health professionals informed about child protection risks, threats and intervention methods that may arise in disasters?</p> <p>Are health professionals informed on code of conduct and how to communicate with children when they encounter such risks?</p> <p>Are all health professionals trained on emergency psychosocial support for children?</p> <p>Are there any child protection expert staff among the health professionals?</p> <p>Are up-to-date data on the provision of health services, information on decisions taken, practices initiated by the public administration specifically for children with special needs (if any), reports on developments at the field, secondary data resources that may be useful for health services in disasters and best practices reported and disseminated to the relevant institutions and organisations?</p>

Table 25 Examples of Verification Questions regarding Health Services from the Perspective of Children's Rights

For detailed questions, see ANNEX 7 Health Checklist.

Health Services from the Perspective of the Rights of Elderly People and Persons with Disabilities

Disasters are particularly challenging for the elderly people and the persons with disabilities as their access to the regular health services they need in their normal lives may be disrupted. Therefore, it is vital to ensure the access of the elderly people and the persons with disabilities to health services in disasters to protect their physical and psychological well-being.

Injuries that occur during disasters can cause new disabilities for the elderly people and the persons with disabilities. This may further increase their existing health problems that will require additional support and care. In the post-disaster period, one of the most critical risks for the elderly people is that they are deprived of health services and cannot access critical medication and health equipment. This can seriously affect the overall health of the elderly people and lead to life-threatening situations.

The physical and mental needs of the persons with disabilities often require a more specialised and focused approach. Therefore, providing health services in an inclusive and accessible manner to the persons with disabilities is critical to minimise the effects of disasters and increase the resilience of the society in terms of health services.



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The following section includes a graph of the key elements that should be prioritised to integrate the perspective of fundamental rights of the elderly people and the persons with disabilities in health services, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 25 Health Services from the Perspective of the Rights of Elderly People and Persons with Disabilities - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Ensure that emergency health services are inclusive of the elderly people and the persons with disabilities.

- Ensure that emergency medical services are inclusive and accessible for the elderly people and the persons with disabilities.
- Ensure that emergency health care measures are taken for new disabilities that may occur due to disasters.
- Take relevant measures for the varying needs of the elderly people and the persons with disabilities in the provision of emergency health services.

Ensure the continuity of inclusive health services for special needs.

- Take necessary measures to ensure that health services for the elderly people and the persons with disabilities continue without any interruption.
- Ensure that comprehensive health services are provided for the ongoing treatment of the elderly people and the persons with disabilities or for new disabilities that may occur due to disasters.
- Ensure that adequate medication, medical supplies and equipment are provided for the elderly people and the persons with disabilities.
- Ensure that protection risks for the elderly people and the persons with disabilities are effectively managed in health service provision.

Remove barriers on access to health services for the elderly people and the persons with disabilities.

- Ensure that medical services are accessible for the elderly people and the persons with disabilities.
- Take relevant measures to eliminate physical barriers in accessing health services.



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- Ensure that alternative methods such as mobile health services are used for places with transportation limitations.
- Ensure active community-based mechanisms to ensure the access of the elderly people and the persons with disabilities to health services.

Ensure that protective and preventive health measures for the elderly people and the persons with disabilities are inclusive.

- Ensure that protective and preventive health services are inclusive for the elderly people and the persons with disabilities.
- Ensure the participation of the elderly people and the persons with disabilities and their caregivers (if any) in protective and preventive health services.
- Ensure that appropriate measures are taken for the elderly people and the persons with disabilities in order to reduce infectious and epidemic diseases.

Increase the knowledge and awareness of health professionals on the elderly people and the persons with disabilities.

- Develop the capacity of health professionals on the rights of the elderly people and the persons with disabilities and special disaster risks.
- Inform health professionals about identifying and referral mechanisms for protection risks regarding the elderly people and the persons with disabilities.
- Implement relevant measures to increase the sensitivity of health professionals regarding their behaviour and attitudes towards the elderly people and the persons with disabilities.

Examples of Verification Questions

Health services for special needs	<p>Are plans developed in line with disaggregated data on age and disability to ensure the continuity of health services for the elderly people and the persons with disabilities?</p> <p>Are health intervention measures integrated in the plans for new disabilities that may occur in line with disaster scenarios?</p> <p>Are measures and procedures followed to protect family unity for the elderly people and the persons with disabilities during emergency health services and medical treatment?</p> <p>Are health services provided for varying needs of the elderly people and the persons with disabilities based on age, gender, disability?</p> <p>Are comprehensive and holistic specialised health services provided for new disabilities arising due to disasters?</p> <p>Are there sufficient medical equipment and supplies in health centres required for the elderly people and the persons with disabilities who need regular treatment?</p> <p>Are necessary measures taken to ensure the continuation of treatment for the</p>
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	<p>elderly people and the persons with disabilities who have chronic diseases and/or have regular medication requirements?</p> <p>Is it ensured that caregivers of the elderly people and the persons with disabilities in need of care participate in health services?</p>
Access and accessibility	<p>Are emergency health services accessible to the elderly people and the persons with disabilities in line with their special needs and sensitivities?</p> <p>Are mobile health services available for access to the elderly people and the persons with disabilities?</p> <p>Are measures taken to raise the awareness of parents and caregivers on the access of the elderly people and the persons with disabilities to health services?</p> <p>Is it ensured that physical barriers on access to health centres for the elderly people and the persons with disabilities, such as stairs, narrow corridors, or toilets without access suitable for persons with disabilities, are eliminated?</p> <p>Are sufficient guidance and information provided regarding access to health services for the elderly people and the persons with disabilities?</p> <p>Are community-based mechanisms utilised to ensure the access of the elderly people and the persons with disabilities to health services?</p>
Protective and preventive health services	<p>Is information dissemination on public health, protective and preventive health conducted in line with the special communication needs of the elderly people and the persons with disabilities?</p> <p>Are protective and preventive health measures inclusive of the elderly people and the persons with disabilities?</p> <p>Are community-based health information dissemination and follow-up mechanisms established?</p> <p>Are water, sanitation and hygiene infrastructure and materials sufficient and accessible for the elderly people and the persons with disabilities to protect the elderly people and the persons with disabilities from infectious diseases, to prevent epidemics and to reduce health risks.</p> <p>Are caregivers included in protective and preventive health information dissemination and measures?</p>
Protection and health	<p>Are the mechanisms available for protection risks that may arise due to disability and age?</p> <p>Are health services provided in a manner that do not harm sensitivities of the elderly people and the persons with disabilities or do not cause medical side effects or abuse?</p> <p>Is intersectoral coordination regarding protection risks functioning effectively?</p> <p>Are relevant procedures implemented for unaccompanied elderly people and</p>



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	<p>persons with disabilities?</p> <p>Are hospital staff informed about the elderly people and the persons with disabilities who are at risk of getting lost during unaccompanied hospital admissions? (Especially for persons with cognitive disabilities)</p>
<p>Health professionals</p>	<p>Are all health professionals trained on the rights of the elderly people and the persons with disabilities, humanitarian aid, health services delivery standards and codes of conduct?</p> <p>Are all health professionals informed about the protection risks and dangers that may arise in disasters due to physical and/or mental limitations that may occur due to disability or old age?</p> <p>Are all health professionals trained on emergency psychosocial support to be provided to the elderly people and the persons with disabilities?</p> <p>Are there any expert staff among the health professionals competent in working with the elderly people and the persons with disabilities?</p> <p>Are up-to-date data on the provision of health services, information on decisions taken, practices initiated by the public administration specifically for elderly people and persons with disabilities with special needs (if any), reports on developments at the field, secondary data resources that may be useful for health services in disasters and best practices reported and disseminated to the relevant institutions and organisations?</p>

Table 26 Examples of Verification Questions regarding Health Services from the Perspective of the Rights of Elderly People and Persons with Disabilities

For detailed questions, see ANNEX 7 Health Checklist.



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PSYCHOSOCIAL SUPPORT

Vulnerable groups may be more exposed to the effects of disasters due to limited access to resources and their psychosocial support needs may become more intense. To this end, special attention should be paid to the access of vulnerable groups to quality and appropriate psychosocial support during and after disasters. Thus, their access to health rights and other related rights may be facilitated. It is critical to provide assistance such as psychosocial support services, counselling, group support programmes and mental health services in a manner that ensures equal access to vulnerable groups without discrimination to protect their psychosocial health. Since psychosocial well-being is directly related to social elements, cultural sensitivities should be considered in the provision of support. As disasters increase the protection risks of vulnerable groups, psychosocial support also becomes more important in increasing the capacity of vulnerable groups to prevent and reduce protection risks. Moreover, psychosocial support facilitates the identification of rights violations, sexual assault and threats.

The following factors should be considered in psychosocial support from the perspective of vulnerable groups (subheadings and important factors are not limited to the following):

- ✓ *Special Needs of and Support to Vulnerable Groups:*
 - Consider the varying needs of vulnerable groups in needs assessment,
 - Providing specialised psychosocial interventions for vulnerable groups,
 - Organising vulnerable groups focused social events.
- ✓ *Protection and Awareness-Raising:*
 - Establishing protection mechanisms related to rights violations identified during psychosocial support,
 - Ensuring the mobilisation of competent staff who are experienced on working with vulnerable groups in disaster areas.
- ✓ *Service Provision:* Ensuring that services are provided, if possible, by the same staff in a regular and trustworthy environment

The access of vulnerable groups to quality, appropriate and sustainable psychological support during and after disasters enhances returning to normal life.



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Psychosocial Support from the Perspective of Women's Rights

During and after disasters, women may face additional stress that adversely affects their psychosocial status due to their gender roles, care responsibilities and burdens, social expectations and access limitations to resources. Moreover, during disasters, gender-based violence increases. Thus, the vulnerabilities of women increase even more during disasters. In addition to the damage caused by disasters, there is an increase in stress, anxiety and trauma levels due to challenges in accessing fundamental rights and services and protection risks. These factors increase the psychological distress experienced by women after disasters. It is also crucial to address gender-sensitive needs and vulnerabilities in psychosocial support for women and to ensure that women have equal access to psychosocial support.

The following section includes a graph of the key activities that should be prioritised to integrate the perspective of women's fundamental rights in psychosocial support, a table detailing the breakdown of activities, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 26 Psychosocial Support from the Perspective of Women's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Ensure that gender-sensitive, inclusive and accessible professional psychosocial support services are provided.

- Ensure that psychosocial supports are inclusive and accessible for women.
- Identify how gender roles, norms, and expectations affect women's psychosocial well-being.
- Identify age- and gender-specific challenges faced by women and girls during and after disasters to adapt support services to their needs.
- Plan and implement psychosocial support programmes that consider women's special needs and vulnerabilities.
- Ensure that women's privacy and confidentiality are considered in service provision.
- Ensure that quality psychosocial services are provided to women by paying attention factors such as the environment in which the service is provided, specialist support, etc., and that such services are provided in accordance with the principle of doing no harm.



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- Ensure that psychosocial support services are provided with an approach that prevents addiction to aid and ensures women's empowerment.
- Consider cultural codes and habits in the provision of professional services.

Ensure widespread psychosocial support practices using community-based and psychological self-care approaches to increase psychosocial support capacity.

- In case professional services cannot be provided, ensure that emergency support teams are well trained and experienced on the limited support and content that they can provide.
- Develop the psychosocial support capacity of NGOs, volunteers, community leaders and members and ensure that they are mobilised when needed.
- Train women on psychological self-care.

Ensure that psychosocial support and protection activities for women are conducted in an integrated manner.

- Ensure that protection risks to women are considered during the provision of psychological support.
- Ensure that professional psychological support is provided during protection interventions against violence, harassment, abuse and maltreatment.
- Ensure that referrals are made to protection mechanisms in case of rights violations identified during psychosocial support.

Take measures to strengthen social ties and increase social solidarity.

- Establish safe women-friendly spaces where women can gather and spend time to strengthen their social ties.
- Raise awareness among relevant stakeholders who provide disaster humanitarian aid services such as evacuation, resettlement and shelter, on respecting social ties during their interventions.
- Conduct community awareness-raising activities to support women's care burden and role sharing.
- Establish community-based psychosocial support mechanisms to support women's psychosocial well-being.
- Train volunteers for community-based psychosocial support and widespread community-based psychosocial support practices.

Increase the capacity of specialist staff, other staff and volunteers working in the field of psychosocial support on gender-sensitive supports.

- Provide psychosocial first aid training to female humanitarian workers and volunteers in the disaster zones.
- Increase the capacity of specialist staff, other staff and volunteers working in the field of psychosocial support to address protection risks, vulnerabilities and special needs of women.
- Increase the awareness and capacity of specialist staff, other staff and volunteers working in the field of psychosocial support regarding sensitive communication with women.



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- Enhance capacity building of relevant stakeholders on disaster psychology.
- Mobilise sufficient and competent female social workers and psychologists.

Examples of Verification Questions

<p>Gender-sensitive support</p>	<p>Are gender-sensitive analyses carried out on women's psychological well-being?</p> <p>Are specific psychosocial support needs of women identified by considering local cultural norms and gender roles?</p> <p>Are women's special sensitivities considered during psychosocial support?</p> <p>Are psychosocial support activities and services planned in order to women's empowerment?</p>
<p>Access to support</p>	<p>Are barriers on women's access to psychosocial support identified?</p> <p>Are measures planned and taken effectively to address the barriers to women's access to psychosocial support?</p> <p>Are there awareness-raising activities for women and the community in general on the importance of psychological support?</p>
<p>Participation</p>	<p>Is effective community participation in psychosocial support ensured with community-based mechanisms and trainings?</p> <p>Are awareness-raising activities conducted regarding women's care burden, gender inequality, and negative restrictive norms and attitudes towards women?</p> <p>Is women's capacity for psychosocial support and self-help increased?</p> <p>Are feedback mechanisms established for psychosocial support services?</p> <p>Are complaints, views and requests of women addressed carefully?</p>
<p>Psychosocial support and protection</p>	<p>Are experts sufficiently informed about women's protection risks that need to be considered during the provision of psychosocial support?</p> <p>Is specialised psychosocial support provided for protection risks and negative coping strategies?</p> <p>Is identification of human rights violations such as abuse, violence and maltreatment encountered by women in psychosocial support referred to protection mechanisms?</p> <p>Is an effective coordination and referral mechanism functioning among psychosocial support and protection service providers?</p> <p>Are safeguarding policies defined and implemented in case of rights violations or malpractices caused by professionals and volunteers?</p>



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<p>Social ties and community solidarity</p>	<p>Is the preservation of social ties considered during the provision of basic services for disasters?</p> <p>Are safe areas established for women to come together and interact with each other?</p> <p>Have women access to safe areas?</p> <p>Are there sufficient psychosocial activities and events for increasing the psychosocial well-being of women in safe areas?</p> <p>Are activities planned that enable women solidarity in groups?</p>
<p>Capacity of staff and volunteers</p>	<p>Is a sufficient number of female staff and volunteers mobilised for psychosocial support?</p> <p>Do all staff and volunteers have basic knowledge on women's rights, gender equality, the risks women may face in disasters, etc.?</p> <p>Are staff and volunteers providing support other than experts informed on the measures to prevent further harm during the support?</p> <p>Are all staff and volunteers informed on cultural codes and social norms regarding women?</p> <p>Is the awareness of key service provider stakeholders increased about the psychosocial impacts of their services and the factors that need to be considered?</p> <p>Are up-to-date data on the provision of psychosocial support, information on decisions taken, practices initiated by the public administration specifically for women with special needs (if any), reports on developments at the field, secondary data resources that may be useful for psychosocial support in disasters and best practices reported and disseminated to the relevant institutions and organisations?</p>

Table 27 Examples of Verification Questions regarding Psychosocial Support from the Perspective of Women's Rights

For detailed questions, see ANNEX 8 Psychosocial Support Checklist.

Psychosocial Support from the Perspective of Children's Rights

Children are often more affected by disasters since they are dependent on adults for emotional support and care. Children may not fully understand the effects of a disaster and they do not have skills to cope with the emotional and psychological effects. They may experience fear, anxiety, confusion and helplessness, which can have long-term effects on their mental health and wellbeing. Moreover, children may become separated from their families, lose their homes or belongings, or witness traumatic events during disasters, which further aggravate their distress. Lack of access to basic services, disrupted routines, and limited social support systems may further increase psychosocial impact on children during disasters and emergencies. Thus, it is vital that disaster response and recovery activities prioritise emotional and psychological needs of children and provide them appropriate support and resources to enable them to cope with trauma and enhance their resilience.



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The following section includes a graph of the key elements that should be prioritised to integrate the perspective of children's fundamental rights in psychosocial support, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 27 Psychosocial Support from the Perspective of Children's Rights - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Ensure that psychosocial supports are child-sensitive.

- Ensure that psychosocial support is provided in accordance with the child's age, development and gender characteristics.
- Establish safe spaces where children can express their thoughts and feelings.
- Demonstrate special empathy, respect and courtesy for children's sensitivities during the provision of support.
- Encourage children to express their feelings in various ways, such as drawing, storytelling, play or discussion.
- Plan individual and group activities to help children share their experiences and enhance their resilience.

Increase the effectiveness of family, school and social ties to support children's psychosocial well-being and access to psychosocial supports.

- Increase awareness and knowledge of parents/caregivers on psychological support for their children in order to strengthen family support.
- Increase the capacity of teachers and other education professionals to identify and support children's psychosocial needs.
- Establish child-friendly safe spaces where children can interact and socialize with their peers.
- Offer group and individual psychosocial activities appropriate to children's developmental and age needs in safe areas where they interact together (school, children's centres, child-friendly areas, etc.).



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Ensure that psychosocial support and protection activities for children are conducted in an integrated manner.

- Ensure that child protection risks are considered during the provision of psychological support.
- Ensure that professional psychological support is provided during protection interventions against violence, harassment, abuse and maltreatment.
- Ensure that referrals are made to protection mechanisms in case of rights violations during psychosocial support.

Develop the capacity of specialist staff, other staff and volunteers working in the field of psychosocial support on children's sensitivities and child-focused support.

- Increase the capacity of specialist staff, other staff and volunteers working in the field of psychosocial support to address fundamental rights violations, protection risks, vulnerabilities and special needs of children.
- Increase the awareness and capacity of specialist staff, other staff and volunteers working in the field of psychosocial support regarding sensitive communication with children.
- Mobilise sufficient and competent female social workers and psychologists.

Examples of Verification Questions

<p>Child-focused psychosocial support</p>	<p>Is psychosocial support provided in accordance with the child's age, development, and gender characteristics?</p> <p>Are safe spaces established where children can express their thoughts and feelings?</p> <p>Is special empathy, respect and courtesy shown for children's sensitivities in the provision of support?</p> <p>Are children encouraged to express their feelings in various ways, such as drawing, storytelling, play or discussion?</p> <p>Are individual and group activities planned to encourage children share their experiences, recover from trauma, and enhance resilience?</p>
<p>Family, school and social ties</p>	<p>Are child-friendly safe spaces established where children can gather?</p> <p>Is awareness of parents and families regarding the psychosocial needs of children during disasters increased?</p> <p>Are measures taken to protect social ties in the basic services provided to children?</p> <p>Are measures taken to provide psychosocial support in schools (training of teachers, psychosocial activities, etc.)?</p>
<p>Children participation</p>	<p>Is it ensured that the community effectively participate in psychosocial support through community-based mechanisms and trainings?</p> <p>Are feedback mechanisms established suitable for children for psychosocial support services?</p>



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	Are views, opinions and requests of children received and processed by using methods appropriate to their age and gender needs?
Psychosocial support and protection	<p>Do experts receive trainings on child protection risks that need to be considered during the provision of psychosocial support?</p> <p>Is specialised psychosocial support provided for child protection risks and negative coping strategies?</p> <p>Are cases of human rights violations such as abuse, violence and maltreatment referred to protection mechanisms?</p> <p>Are effective coordination and referral mechanisms established and efficiently functioning among psychosocial support and protection service providers?</p> <p>Are safeguarding policies in case of rights violations or malpractices caused by professionals and volunteers defined and implemented?</p>
Capacity of staff and volunteers	<p>Are a sufficient number of pedagogues, psychologists and volunteers experienced in working with children mobilised for psychosocial support?</p> <p>Do all staff and volunteers have basic knowledge on children's rights, the risks faced by children in disasters, etc.?</p> <p>Are staff and volunteers providing support other than experts informed on the measures to prevent harm during the support?</p> <p>Are all staff and volunteers competent in children's sensitivities and communication with children?</p> <p>Is the awareness of key service provider stakeholders increased on the psychosocial impacts of their services and the factors that need to be considered?</p> <p>Are up-to-date data on the provision of psychosocial support, information on decisions taken, practices initiated by the public administration specifically for children with special needs (if any), reports on developments at the field, secondary data resources that may be useful for psychosocial support in disasters and best practices reported and disseminated to the relevant institutions and organisations?</p>

Table 28 Examples of Verification Questions regarding Psychosocial Support from the Perspective of Children's Rights

For detailed questions, see ANNEX 8 Psychosocial Support Checklist.

Psychosocial Support from the Perspective of the Rights of Elderly People and Persons with Disabilities

The elderly people and the persons with disabilities have the most difficulty in accessing support services during and after disasters due to their mobility obstacles, physical limitations such as dependency on medical equipment, social isolation, difficulties in accessing information and dependency on caregivers. Difficulties in accessing these services and interruptions in the care provided to the elderly people and the persons with disabilities affect them psychologically and adversely more than other groups. The elderly people and the persons with disabilities are the groups most at risk of



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discrimination during disasters. Therefore, it is vital to provide inclusive, accessible and culturally sensitive psychological support for the elderly people and the persons with disabilities.

Individualised psychosocial support programmes should be implemented for the elderly people and the persons with disabilities by considering the effects of past traumas, losses, and discrimination on their mental health. Developing a trauma-sensitive approach for the physical and psychological care is crucial to improve the psychosocial well-being of the elderly people and the persons with disabilities.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of fundamental rights of the elderly people and the persons with disabilities in psychosocial support, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 28 Psychosocial Support from the Perspective of the Rights of Elderly People and Persons with Disabilities - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Ensure the provision of psychosocial support that is sensitive to the varying special needs of the elderly people and the persons with disabilities.

- Identify the special needs of the elderly people and the persons with disabilities and individualise support services to meet these needs.
- Address psychosocial support services considering past traumas.
- Respect choices of the elderly people and the persons with disabilities, pay attention to their experiences, and establish a safe environment.
- Consider the protection risks of the elderly people and the persons with disabilities in psychosocial support and ensure the integration of protection mechanisms.
- Ensure the involvement of the elderly people, the persons with disabilities and their caregivers with appropriate participation and feedback mechanisms to support their psychosocial wellbeing.



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Ensure that psychosocial supports are inclusive and accessible for the elderly people and the persons with disabilities.

- Ensure that psychosocial support services are accessible for the elderly people and the persons with disabilities considering their mobility, sensory perception and communication difficulties.
- Eliminate barriers to physical accessibility in psychosocial support areas and centres. (wheelchair ramps, elevators, adequate lighting and appropriate information and guidance materials for the hearing or visually impaired, etc.)
- Use different communication methods and tools to meet the diverse communication needs of individuals with disabilities. (sign language interpreters, written materials, audio guidance, etc.)

Take measures to prevent social isolation of the elderly people and the persons with disabilities and strengthen their social ties.

- Establish accessible (age- and disability-friendly) safe spaces, where they can come together and spend time together, to strengthen their social ties.
- Raise awareness among relevant stakeholders who provide disaster-related services such as shelter, evacuation, resettlement, on the priority given to the social ties of the elderly people and the persons with disabilities.
- Establish community-based psychosocial support mechanisms to support psychosocial well-being of the elderly people and the persons with disabilities.
- Inform/train volunteers on community-based psychosocial supports and mobilise them to conduct regular communication with the elderly people and the persons with disabilities.

Develop the capacity of specialist staff, other staff and volunteers working in the field of psychosocial support on the sensitivities of the elderly people and the persons with disabilities.

- Provide psychosocial first aid training to female humanitarian workers and volunteers in the disaster zones.
- Increase the capacity of specialist staff, other staff and volunteers working in the field of psychosocial support to address protection risks, vulnerabilities and special needs of the elderly people and the persons with disabilities.
- Increase the awareness and capacity of specialist staff, other staff and volunteers working in the field of psychosocial support regarding sensitive communication with the elderly people and the persons with disabilities.
- Support capacity building efforts of relevant stakeholders on disaster psychology.
- Mobilise sufficient and competent female social workers and psychologists.
- Ensure that the awareness of support providers, staff and the community is raised for the access psychosocial support services for the elderly people and the persons with disabilities.
- Ensure that awareness-raising trainings cover topics such as the use of sensitive language, combating discrimination and providing services appropriate to different needs.



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Examples of Verification Questions

<p>Need-based individualised support</p>	<p>Are the different special needs of the elderly people and the persons with disabilities identified?</p> <p>Are psychosocial supports provided in an individualised manner according to specific needs?</p> <p>Is the trauma-focused care approach integrated into supports?</p> <p>Is attention paid to the protection risks of the elderly people and the persons with disabilities in psychosocial support?</p> <p>Are special protection interventions provided for identified abuse and rights violations?</p>
<p>Access to support and accessibility</p>	<p>Are measures taken to address physical barriers to access to psychological support for the elderly people and the persons with disabilities?</p> <p>Are communication tools and methods specific to the communication needs of the elderly people and the persons with disabilities used to access information?</p> <p>Are social barriers in accessing psychosocial support for the elderly people and the persons with disabilities identified and are necessary measures taken?</p>
<p>Participation</p>	<p>Are accessible participation and feedback mechanisms established for the elderly people, the persons with disabilities and their caregivers?</p> <p>Are the feedback, requests and complaints of the elderly people and the persons with disabilities addressed carefully?</p> <p>Is it ensured that the community effectively participate in psychosocial support for the elderly people and the persons with disabilities with community-based mechanisms and trainings?</p> <p>Are social awareness-raising activities conducted regarding discrimination against the elderly people?</p> <p>Is the capacity of the elderly people, the persons with disabilities and the caregivers for psychosocial support and self-help increased?</p>
<p>Social ties and solidarity</p>	<p>Are the psychosocial well-being and preservation of social ties of the elderly people and the persons with disabilities considered during the provision of basic services for disasters?</p> <p>Are safe spaces established for the elderly people and the persons with disabilities to come together and interact with each other?</p> <p>Are the necessary physical and communication measures taken for the elderly people and the persons with disabilities to access safe social areas?</p>



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	<p>Are accessible activities and events organised for increasing the psychosocial well-being of the elderly people and the persons with disabilities in safe areas?</p> <p>Are group activities planned that ensure the elderly people and the persons with disabilities can interact with each other?</p>
Capacity of staff and volunteers	<p>Do all staff and volunteers receive training and information on the rights of the elderly people and the persons with disabilities, their special needs, and sensitivities?</p> <p>Are support staff and volunteers other than experts informed on the measures to prevent harm during the support?</p> <p>Are all staff and volunteers informed about the discrimination and social isolation faced by the elderly people and the persons with disabilities?</p> <p>Is the awareness of key service provider stakeholders increased about the psychosocial impacts of their services and the factors that need to be considered?</p> <p>Are up-to-date data on the provision of psychosocial support, information on decisions taken, practices initiated by the public administration specifically for elderly people and persons with disabilities with special needs (if any), reports on developments at the field, secondary data resources that may be useful for psychosocial support in disasters and best practices reported and disseminated to the relevant institutions and organisations?</p>

Table 29 Examples of Verification Questions regarding Psychosocial Support from the Perspective of the Rights of Elderly People and Persons with Disabilities

For detailed questions, see ANNEX 8 Psychosocial Support Checklist.

Good Practice

Ağustos Newspaper - News from the Container City

In order to make voices of children and young people living in prefabricated settlements in Kocaeli and Düzce provinces after the earthquake of 17 August 1999 heard and to contribute to their psychological well-being, the Social Services and Child Protection Agency, UNICEF and Ankara University Faculty of Communication collaborated to conduct the "Ağustos" newspaper project 2 years with young people between the ages of 9-18.

The name of the newspaper was given by the children. Young people, who were eager to take part in the project, took courses on various topics such as photography, news writing, page editing, and worked on processes such as writing articles at the newspaper centre, taking photographs and printing, and distributing the newspaper. A prefabricated unit in the settlement was used as a newspaper centre. The darkroom installation made it possible for young people to print the photographs taken and edit the pages of the newspaper. The monthly newspaper was distributed to all schools in the two provinces with the support of Kocaeli and Düzce Provincial Directorates of National Education.

Approximately 40 reporters and an editorial team of 10 people living in the three container cities published the newspaper for two years, which included articles that affected their own lives after the earthquake and many topics such as their lives in the container city, infrastructure problems, access to education problems, child labour, etc.



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The Ağustos newspaper became the voice of young people who experienced the disaster and tried to survive in prefabricated cities at a time when the digital environment was not yet widespread, and contributed to the empowerment of young people who can write and read.





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IN-KIND AID AND HUMANITARIAN AID DISTRIBUTION

Everyone has the right to receive humanitarian aid during disasters and emergencies. This aid should be distributed fairly, impartially and without discrimination by prioritising vulnerable groups and consider their specific needs. It is one of the basic humanitarian principles that the aid provided in disasters and emergencies should be timely and respect the human dignity.

Disasters often cause property loss, and people can often be left out with only the clothes they are wearing. Therefore, people affected by disasters depend on non-food humanitarian aid to survive. Humanitarian aid are also vital to protect people affected by disasters from weather and climate conditions, to meet their most basic and urgent needs and to make them feel safe.

For inclusive and effective humanitarian aid, it is essential to consider the varying needs of vulnerable groups and their changing needs at different stages of disasters.

It should be noted that aid may have adverse effects on the habits, cultural codes and resilience of the society in the long term. Therefore, it is important that the aid distribution process is well planned, that an exit strategy is determined in advance, and that the aid is carried out according to the highest professional standards.

It should also be underlined that immediate, on-site, life-saving aid can significantly improve the safety and well-being of children and have a major impact on the threats experienced by women and children. Therefore, the distribution of aid needs to be carefully planned and implemented.

The following factors should be considered in in-kind aid and humanitarian aid distribution from the perspective of vulnerable groups (subheadings and important factors are not limited to the following):

✓ *Aid Distribution and Meeting Needs:*

- Ensuring that vulnerable groups affected by disasters receive appropriate aid related to their needs,
- Planning and conducting aid distribution that respects human dignity,
- Establishing participation and feedback mechanisms to ensure that the aid to be distributed is tailored to the needs.

✓ *Rights and Protection of Vulnerable Groups:*

- Prioritising vulnerable groups in distributions, but taking measures to avoid discrimination based on factors such as ethnicity, religion or belief,
- Ensuring that the staff who will distribute aid has a perspective on vulnerable groups, is competent and has knowledge of fundamental rights,
- *Ensuring the physical safety of aid recipients and taking appropriate security measures to protect them from mistreatment.*

✓ *Privacy and Data Security:*

- Protecting the privacy and personal privacy rights of recipients of aid,
- Taking appropriate security measures for the collection, storage and use of personal information.



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After disasters, everyone has the right to receive accurate and adequate humanitarian aid in a timely manner and at the right place, without creating security risks, from skilled and experienced staff who comply with ethical principles.

In-Kind Aid and Humanitarian Aid Distribution from the Perspective of Women's Rights

In-kind aid provided in disasters is an important tool in meeting the basic needs of women. In disasters, women face various barriers in accessing in-kind aid due to care responsibilities, security risks, limited access to adequate information, and social and cultural codes. It is important to eliminate gender-based barriers and ensure that women have inclusive and equal access to aid appropriate to their needs such as hygiene, self-care, dressing, etc. This can reduce the effects of disaster on women while promoting gender equality. Moreover, providing aid with the active participation of women can empower women and prevent aid from turning into an element of dependency.

In-kind aid helps women recover and meet their basic needs during disasters, and in some cases it can increase protection risks such as abuse and harassment. If the aid is offered based on conditions so as to cause threat, women may be faced with risks. It is vital that in-kind aid is planned and carried out by professional staff complying with ethical values, who will not cause protection risks.

The following section includes a graph of the key activities that should be prioritised to integrate the perspective of women's fundamental rights in the provision of in-kind aid, a table detailing the breakdown of activities, and a figure containing examples of verification questions regarding the sub-breakdowns.

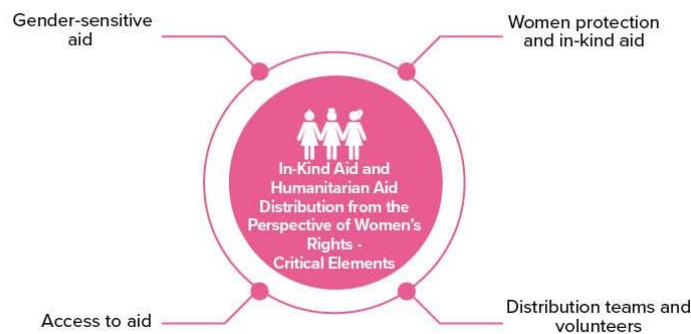


Figure 29 *In-Kind Aid and Humanitarian Aid Distribution from the Perspective of Women's Rights - Critical Elements*

Table of key activities (including but not limited to sub-breakdowns)



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Ensure that gender-sensitive, appropriate, timely and accessible aid is provided in line with the women's varying needs.

- Ensure that adequate aid for women's specific needs is stocked in warehouses before disasters.
- Plan aid distributions in a gender-sensitive manner and consider the special needs of women.
- Ensure that aid is provided in a transparent and accountable manner with the participation of women.

Ensure that women have equal and full access to aid.

- Ensure that appropriate communication tools and methods are used to ensure that women receive gender-sensitive, clear information about aid.
- Ensure that distribution points are accessible to women. Prepare distribution plans for women with limited transportation means.
- Identify barriers in access to aid and ensure that measures are taken to remove the barriers with relevant stakeholders.

Take the necessary protective, preventive and response measures for the management of women protection risks in in-kind aid distribution.

- Ensure that distributions are made in a manner that respects human dignity, without discrimination.
- Ensure that all measures for the physical safety of women are taken during the distribution process and in aid distribution points.
- Take all necessary measures to ensure that aid does not cause protection risks such as abuse and harassment.

Develop the capacity of staff and volunteers in humanitarian aid distribution.

- Ensure that distribution teams and volunteers are trained in crowd control and how to interact with women.
- Ensure that teams receive training on women protection risks, code of conduct and communication in disasters.

Examples of Verification Questions

Gender-sensitive in-kind aid distribution	<p>Is there a gender-sensitive needs assessment conducted?</p> <p>Are appropriate distribution plans prepared to address the varying needs of women?</p> <p>Are there any aid materials for women's special needs in the warehouses available?</p>
Accessibility of aid	<p>Are the distribution points accessible to women?</p> <p>Are barriers to the access of women to aid (gender roles, cultural</p>



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	<p>norms, etc.) identified?</p> <p>Are appropriate measures planned for the identified access risks?</p> <p>Are alternative distribution plans prepared for women with limited access?</p> <p>Are women informed about distribution points and distributions?</p>
Women Protection and in-kind aid	<p>Are possible protection risks related to aid identified?</p> <p>Are necessary measures taken for protection risks?</p> <p>Are distribution points safe for women?</p> <p>Are preventive mechanisms established for protection risks caused by distribution teams?</p> <p>Are the response mechanisms for possible protection risks in distribution functioning effectively?</p> <p>Are measures taken to prevent discrimination during the distribution process?</p>
Women Participation	<p>Is women participation ensured in the planning and implementation of disaster aid and services?</p> <p>Is a safe, inclusive and supportive environment reinforced to enable women to express themselves and voice their needs?</p> <p>Are women's views and requests considered?</p>
Capacity of distribution teams	<p>Are the staff responsible for evacuation informed about the special needs and sensitivities of women?</p> <p>Are teams informed about the social norms, values, and expectations of women in different cultures?</p> <p>Do teams have empathy and sensitivity to understand women's emotional and psychological needs?</p> <p>Are aid distribution teams and local communities trained on how to prevent sexual violence and abuse?</p> <p>Are staff involved in aid distribution trained to ensure the safety of women and to identify situations of maltreatment?</p> <p>Do distribution teams receive training on cultural sensitivities?</p>

Table 30 Examples of Verification Questions regarding In-Kind Aid and Humanitarian Aid Distribution from the Perspective of Women's Rights

For detailed questions, see ANNEX 9 In-Kind Aid and Humanitarian Aid Distribution Checklist.



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In-Kind Aid and Humanitarian Aid Distribution from the Perspective of Children's Rights

Due to their dependence on caregivers, it is critical that children have access to in-kind aid, that their basic needs are met and that they are protected. Moreover, aid should be designed to meet specific and different needs of children and positively support their development. Children's access to appropriate in-kind aid adapted to their needs helps their healthy development, protection and recovery. Therefore, ensuring the access of children to inclusive in-kind aid in disasters minimise long-term impacts and enable children to recover faster by ensuring they are protected, and their needs are met.

The following section includes a graph of the key activities that should be prioritised to integrate the perspective of children's fundamental rights in the provision of in-kind aid, a table detailing the breakdown of activities, and a figure containing examples of verification questions regarding the sub-breakdowns.

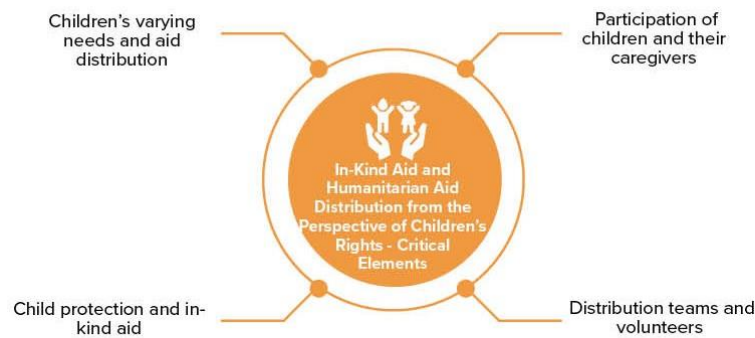


Figure 30 *In-Kind Aid and Humanitarian Aid Distribution from the Perspective of Children's Rights - Critical Elements*

Table of key activities (including but not limited to sub-breakdowns)

Ensure that gender-sensitive, appropriate, timely and accessible aid is provided to children's varying needs.

- Ensure that adequate aid for children's specific needs is in stock before disasters.
- Ensure that aid is provided to varying hygiene and health needs of girls.
- Consider the varying special needs of children in aid planning and distribution.
- Identify and implement alternative distribution methods for children with limited access.
- Develop collaboration with schools and other educational facilities in identifying children's needs and distributing aid.

Ensure that children have equal and full access to aid.

- Ensure that appropriate communication tools and methods are used to ensure that children receive gender-sensitive, clear information about aid.
- Ensure that distribution points are accessible to children. Prepare distribution plans for children with limited transportation means.



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- Identify barriers to access and ensure that measures are taken to remove the barriers with relevant stakeholders.

Ensure that in-kind aid distributions are made so as to prevent child protection risks.

- Ensure that all measures for the physical safety of children are taken during the distribution process and in aid distribution areas.
- Pay attention to protection sensitivities for children who come to distribution points unaccompanied.
- Take all necessary measures to ensure that aid does not cause protection risks such as abuse and harassment.
- Ensure that safeguarding protocols are defined to manage protection risks such as abuse, harassment and maltreatment caused by distribution teams.

Develop the capacity of staff and volunteers in humanitarian aid distribution.

- Ensure that distribution teams and volunteers are trained in crowd control and how to interact with children.
- Ensure that teams receive training on child protection risks and code of conduct.
- Ensure that distribution teams are trained on communication with children.

Examples of Verification Questions

Aid individualised to children's needs	<p>Are there different needs assessments for girls and boys available?</p> <p>Are there sufficient aid materials in the warehouses available to meet the varying needs of children?</p> <p>Is there coordination with schools and educational facilities in determining children's in-kind aid needs and distributing in-kind aid?</p>
Child protection and in-kind aid	<p>Are measures taken to ensure that aid is not given directly to children in unsupervised environments?</p> <p>Are protective measures taken for children who are unaccompanied or without their family during aid distribution?</p> <p>Is there sufficient supervision on site to protect children from getting lost and other dangers?</p>
Communication with children	<p>Are special training programmes organised for distribution teams on crowd control and communication with children?</p> <p>Do teams have basic knowledge of child psychology and behaviour?</p> <p>Do teams have the skills to understand children's emotional states and show empathy towards them?</p>



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Table 31 Examples of Verification Questions regarding In-Kind Aid and Humanitarian Aid Distribution from the Perspective of Children’s Rights

For detailed questions, see ANNEX 9 In-Kind Aid and Humanitarian Aid Distribution Checklist.

In-Kind Aid and Humanitarian Aid Distribution from the Perspective of the Rights of Elderly People and Persons with Disabilities - Critical Elements

The elderly people and the persons with disabilities may need in-kind aid more during disasters than other vulnerable groups, especially due to their need for regularly used medications and health equipment. In some cases, in-kind aid provided is vital for the elderly people and the persons with disabilities, for example, heating, clothing suitable for seasonal conditions, hygiene and sanitation materials, etc. However, the access of the elderly people and the persons with disabilities to aid is much more limited compared to other groups due to their physical difficulties. Therefore, it is critical to consider the needs and access limitations of the elderly people and the persons with disabilities regarding their varying vulnerabilities in in-kind aid planning and distribution.

The following section includes a graph of the key activities that should be prioritised to integrate the perspective of fundamental rights of the elderly people and the persons with disabilities in the provision of in-kind aid, a table detailing the breakdown of activities, and a table containing examples of verification questions regarding the sub-breakdowns.



Figure 31 In-Kind Aid and Humanitarian Aid Distribution from the Perspective of the Rights of Elderly People and Persons with Disabilities - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Ensure the provision of appropriate, timely and comprehensive aid to address the varying needs of the elderly people and the persons with disabilities.

- Maintain sufficient aid materials for the special needs of the elderly people and the persons with disabilities based on disaggregated data on age, disability and gender.
- Plan aid distributions in a gender-sensitive manner and take into account the special needs of elderly women.
- Ensure that aid is distributed in a transparent and accountable manner, with the participation of the elderly people and the persons with disabilities.



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Ensure that the elderly people and the persons with disabilities have access to aid.

- Ensure that appropriate communication tools and methods are used to ensure that the elderly people and the persons with disabilities receive gender-sensitive, clear information about aid.
- Ensure that distribution points are accessible to the elderly people and the persons with disabilities.
- Prepare alternative distribution plans for access restrictions for the elderly people and the persons with disabilities.
- Identify barriers to access and ensure that measures are taken to remove the barriers with relevant stakeholders.

Develop the capacity of staff and volunteers in humanitarian aid distribution.

- Ensure that distribution teams and volunteers are trained in crowd control and how to interact with the elderly people and the persons with disabilities.
- Ensure that teams receive training on the needs of the elderly people and the persons with disabilities, protection risks and rules of conduct in disasters.
- Ensure that aid distribution teams are trained on code of conduct and communication.

Examples of Verification Questions

<p>Aid for special needs</p>	<p>Are the needs assessments conducted in a gender-, age- and disability-sensitive manner?</p> <p>Are services for the special needs of the elderly people and the persons with disabilities planned and implemented?</p> <p>Are varying needs considered?</p> <p>Are there any aid materials for the special needs of the elderly people in the warehouses available?</p> <p>Are supply systems established to meet special needs?</p> <p>Are supplies, especially vital health equipment, provided in a timely manner?</p>
<p>Access and accessibility</p>	<p>Are the distribution points accessible to the elderly people, the persons with disabilities or their caregivers?</p> <p>Are distribution points, materials and services arranged according to the mobility needs of the elderly people and the persons with disabilities?</p> <p>Are measures taken to address the physical barriers in accessing aid? Are the distribution points disability-friendly?</p> <p>Are appropriate measures planned for the identified access risks?</p>



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	<p>Are alternative distribution plans prepared regarding access limitations?</p> <p>Is information about distributions provided with appropriate tools and channels in line with the special communication needs of the elderly people and the persons with disabilities?</p> <p>Are special supportive services for the elderly people and the persons with disabilities (translation services, guidance and physical assistance for hearing or visually impaired persons, etc.) provided during distributions?</p>
<p>Participation of the elderly people and the persons with disabilities</p>	<p>Is a safe, inclusive, and supportive environment created to enable the elderly people and the persons with disabilities to express themselves and voice their needs?</p> <p>Are caregivers enabled to participate in aid distribution processes?</p>
<p>Capacity of distribution teams</p>	<p>Are teams trained on the special needs of the elderly people and the persons with disabilities and age-related challenges?</p> <p>Are teams trained and experienced in empathizing with the elderly people and the persons with disabilities and understanding their experiences?</p> <p>Do teams include any staff and/or volunteers with special communication skills such as sign language?</p> <p>Are staff informed about the protection risks and intervention mechanisms for the elderly people and the persons with disabilities?</p>

Table 32 Examples of Verification Questions regarding In-Kind Aid and Humanitarian Aid Distribution from the Perspective of the Rights of Elderly People and Persons with Disabilities

For detailed questions, see ANNEX 9 In-Kind Aid and Humanitarian Aid Distribution Checklist.



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EDUCATION

In addition to being a fundamental right for children in particular and for the whole society, education is also an important transformative tool that supports access to other rights. Providing quality education to all is one of the main responsibilities of the states. However, disasters cause significant disruption to education. During disasters and emergencies, early childhood development and the continuity of primary, secondary, higher, informal, technical, vocational and adult education opportunities are critical for supporting physical, psychological, social and cognitive well-being of children while acquiring new skills⁹.

In disasters, education supports psychosocial and cognitive development of children, increases their resilience and enable them to develop their sense of normality. Schools and other educational environments also contribute to the identification of other basic needs of children (protection, nutrition, water and sanitation and health services, etc.) and to carry out the necessary interventions with relevant stakeholders. Moreover, enrolment in education is also critical in preventing protection risks such as child, early and forced marriage, sexual exploitation and child labour. In disasters, education provides affected people with the skills they need to enjoy other fundamental rights, such as the right to life and health.

The impact of disasters can increase pressures on gender roles and social norms and adversely affect the women's access to education. Women may have to give up educational opportunities to contribute to the family economy. Safety concerns may also increase during disasters, which may cause concerns about safety. This may also adversely affect the access of women and girls to education.

In order to ensure children's access to education and to accelerate recovery, strengthen vulnerable groups and increase resilience, inclusive and accessible education services must be planned for all vulnerable groups. These education/training activities support the social, psychological and economic well-being of vulnerable groups and help them access other rights such as life, health and employment.

The following section includes a graph of the key elements that should be prioritised to integrate the perspective of children's rights in education, a table detailing the breakdown of activities for the key elements, and a table containing examples of verification questions regarding the sub-breakdowns.

⁹ The key activities and control questions to be discussed in this section cover formal and informal education for children in disasters and emergencies. In disasters, it is vital to ensure children's participation in formal and informal education and to provide vocational, technical and skill training opportunities and access to adults and other vulnerable groups. Such inclusive and accessible education services must be planned to accelerate recovery, strengthen vulnerable groups and increase resilience. These education/training activities support the social, psychological and economic well-being of vulnerable groups and help them access other rights such as life, health and employment.



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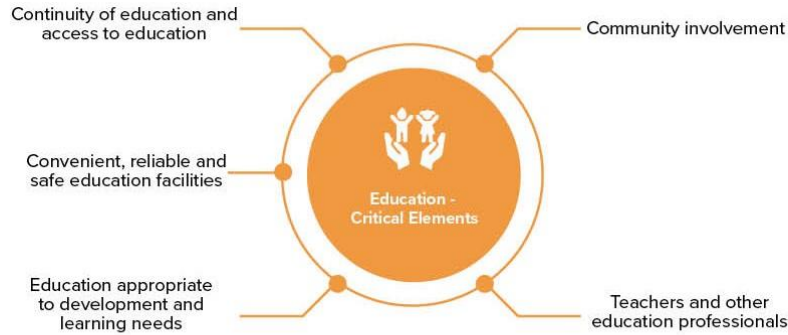


Figure 32 Education - Critical Elements

Table of key activities (including but not limited to sub-breakdowns)

Ensure the continuity of education and prioritise necessary measures for access to inclusive education.

- Before disasters, ensure that structural and non-structural risks to the continuity of education are identified and necessary measures are taken.¹⁰
- In case of interruption of formal education, prepare and prioritise plans for temporary, informal and alternative education services.
- In case of using schools as shelter areas after disasters, take into account the needs of vulnerable groups and make the necessary arrangements.
- Ensure the continuity of education with coordination and cooperation with civil society and relevant stakeholders.
- Provide appropriate learning opportunities in line with developmental needs.
- Ensure that all children, especially girls and children with disabilities, have equal access to quality and age-appropriate education.
- Prioritise gender equality in access to education and the provision of educational opportunities.
- Increase knowledge and awareness of parents on their children's participation in education.
- Ensure coordination and cooperation with relevant stakeholders regarding the continuity of education and children's return to education as soon as possible.
- Encourage the development and implementation of local policies that will enable children to return to education.

¹⁰ In this regard, the 'Disaster Awareness School Education' prepared by AFAD aims to raise awareness from an early age and to provide basic behaviors and skills against disaster risks that threaten Türkiye.

<https://istanbul.afad.gov.tr/afete-hazir-okul--afet-bilinci-ilkokul-ve-ortaokul-egitimi>

Moreover, the Disaster and Emergency Management Planning Guide for Educational Institutions prepared by the Office of Governor of Istanbul and AFAD will provide important guidance.

<https://www.ipkb.gov.tr/wp-content/uploads/2023/07/DISASTER-EDUCATIONAL-INSTITUTIONS-MANAGEMENT-PLANNING-GUIDE.pdf>



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Ensure that educational facilities and other educational environments are suitable, safe and accessible for children.

- Ensure that educational environments and facilities are designed to support children's psychological well-being.
- Establish safe and secure educational environments and facilities for children.
- Identify barriers on enrolment, transportation to the education facilities and access, and take relevant measures to remove such barriers.

Ensure that education is appropriate to children's learning and development needs and supportive for their other needs.

- Ensure that formal and informal education curricula are appropriate to the development and learning needs of children.
- Ensure that learning is student-centred, participatory and inclusive.
- Ensure that children's needs in other sectors such as health, nutrition, protection and psychosocial support are identified and supported during the education activities.
- Ensure that referral and response mechanisms for other needs of children are addressed effectively with relevant stakeholders.

Ensure the child and community participation in education.

- Establish mechanisms for the effective participation of parents, relevant stakeholders and community members in all educational activities.
- Encourage the participation of children and relevant stakeholders in the planning and implementation of services through appropriate participation mechanisms.
- Ensure the allocation/use of community resources for education.

Develop the capacity of teachers and other education professionals.

- Mobilise a sufficient number of teachers and education staff with appropriate qualifications.
- Mobilise teachers and education staff in line with the principles of diversity and equality.
- Increase the communication capacity of teachers and educators with children in disasters and emergencies.
- Identify protection and other basic needs and increase their awareness and knowledge on response mechanisms to address these needs.

Examples of Verification Questions

<p>Continuity of and access to education</p>	<p>Are school buildings constructed in accordance with earthquake resistant building legislation? Are the necessary reinforcements made?</p> <p>Are measures taken in schools against non-structural risks (such as security/protection, risks of access to fundamental rights and services)?</p> <p>Are urgent measures taken and are educational programmes designed to prioritise</p>
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	<p>the child's holistic development and well-being in order to prevent education from being interrupted after disasters?</p> <p>Are educational programmes designed with an approach that promotes gender equality and pays special attention to girls' education?</p> <p>Are up-to-date data on the education services, information on decisions taken, practices initiated by the public administration, reports on developments at the field, secondary data resources that may be useful for education in disasters and best practices reported and disseminated to the relevant institutions and organisations?</p>
Children's special needs and education	<p>Are measures taken to identify and support children's other basic needs during the education activities?</p> <p>Are cooperation protocols and agreements made with organisations working in child protection?</p> <p>Are children's basic needs such as health, protection and psychosocial support determined together? Are the necessary interventions carried out?</p> <p>Are the unique needs of children with special needs (for example children with special health and care needs, children with disabilities, children with special education and learning needs) identified and met during disasters? Are the necessary interventions carried out?</p>
Educational facilities and educational environment	<p>Is transportation of children to education centres easy and safe?</p> <p>Are temporary learning centres established to be functioning immediately right after disasters?</p> <p>Are the educational environment and facilities safe for children?</p> <p>Does the physical infrastructure of schools meet the special needs of persons with disabilities? (Ramps for persons with disabilities, toilets suitable for persons with disabilities, etc.)</p>
Teachers and other education professionals	<p>Do teachers and other education professionals receive training on child protection, children's special needs and communication with children in disasters and emergencies?</p> <p>Are sufficient women education staff with appropriate qualifications mobilised?</p> <p>Are teachers and other education professionals informed about child protection interventions and child protection mechanisms?</p> <p>Are training and information programmes organised for teachers and other education professionals on coping with trauma and stress?</p>

Table 33 Examples of Verification Questions regarding Education from the Perspective of Children's Rights

For detailed questions, see ANNEX 10 Education Checklist.



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RECOVERY NEEDS ASSESSMENT

The continuity of fundamental rights and services in disasters and emergencies should be the basis of the humanitarian aid efforts provided during and after disasters. The purpose of the services and aid provided is to ensure that life returns to normal as quickly as possible after disasters. Recovery initiatives should focus on building a resilient society where everyone can enjoy fundamental rights and services equally and fairly.

In the early stages of disasters, urgent needs such as shelter, clean water, food and medical aid are common priorities for all vulnerable groups. However, needs and coping strategies that emerge over time may differ among vulnerable groups. All vulnerable groups have developed different skills and strategies for coping with disasters since they have different levels of vulnerabilities and access to resources. These capacities and challenges cause differences in progress levels for different segments of community. Particularly vulnerable groups need additional measures to benefit equally from fundamental rights and increase their resilience during the recovery. The integration of a rights-based approach into recovery needs assessment reinforce the inclusive design of recovery programmes that focus on equity and prioritise the needs of vulnerable groups without discrimination. Thus, it aims to protect the dignity, well-being and resilience of vulnerable groups and empower them while contributing to sustainable development.

A society that is empowered and resilient, where no one is left behind and social justice can be ensured by data-based planning and interventions.

The following factors should be considered in carrying out recovery needs assessment in disasters and emergencies from the perspective of vulnerable groups (subheadings and important factors are not limited to the following):

- ✓ **Needs Assessment and Participation:**
 - Ensuring the participation of vulnerable groups during recovery needs assessment with an inclusive approach,
 - Facilitating feedback and complaint mechanisms with an inclusive approach,
 - Considering the special needs of vulnerable groups during the assessment.
- ✓ **Transparency and Accountability:**
 - Conducting the assessment in a transparent and accountable manner,
 - Developing recovery plans in a transparent, open and participatory manner and facilitating feedback and complaint mechanisms.
- ✓ **Planning and Disclosure:** Disclosing the planning for recovery activities to the public in a transparent and clear manner.



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- ✓ *Protection and Enforcement of Rights:* Taking necessary measures to ensure the protection and enforcing the economic, social and cultural rights during the recovery stage.

The stages of recovery needs assessment and critical activities to integrate the perspective of vulnerable groups into these stages are:

Recovery Needs Assessment Stages and Key Activities (including but not limited to sub-breakdowns)

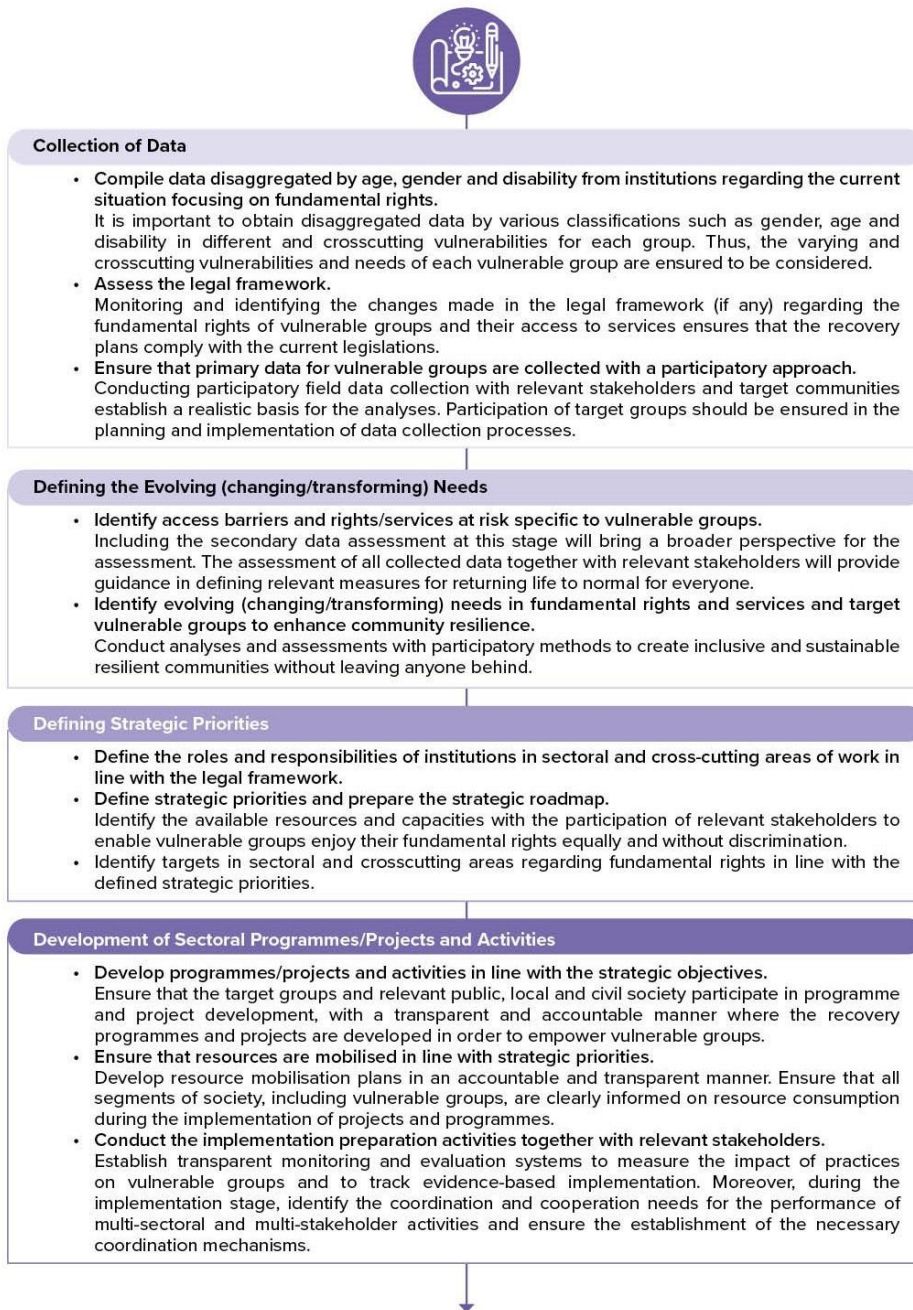


Figure 33 Integration of the Perspective of Fundamental Rights in Recovery Assessment Stages – Key Activities



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Examples of Verification Questions

Participation of vulnerable groups	<p>Are customised and suitable participation mechanisms established for the participation of each vulnerable group?</p> <p>Is active and effective participation of vulnerable groups ensured?</p> <p>Are the needs and expectations of vulnerable groups integrated into planning?</p>
Considering varying needs	<p>Are the varying needs of vulnerable groups considered in analysis and planning?</p> <p>Are the evolving needs of each vulnerable group identified through an evidence-based approach?</p>
Transparency and accountability	<p>Are the target groups and community informed transparently and openly on the needs analysis and planning processes?</p> <p>Is clear and transparent information provided on recovery plans?</p> <p>Are transparent communication mechanisms established for resource consumption in the implementation stage?</p>
Programme and project development	<p>Do programmes and projects developed cover the identified fundamental rights and service risks?</p> <p>Are roles and responsibilities regarding fundamental rights and services clearly defined?</p> <p>Are monitoring and evaluation systems established to assess the impact of programme results on vulnerable groups?</p> <p>Are coordination and cooperation mechanisms established with relevant stakeholders?</p>

Table 34 Examples of Verification Questions regarding Recovery Needs Assessment from the Perspective of Vulnerable Groups

For detailed questions, see ANNEX 11 Recovery Needs Assessment Checklist.



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ANNEXES

ANNEX 1 Disaster Risk Assessment and Planning Checklist

ANNEX 2 Community Disaster Awareness and Preparedness Checklist

ANNEX 3 Search and Rescue Checklist

ANNEX 4 Evacuation and Resettlement Checklist

ANNEX 5 Nutrition Services Checklist

ANNEX 6 Shelter Services Checklist

ANNEX 7 Health Services Checklist

ANNEX 8 Psychosocial Support Checklist

ANNEX 9 In-Kind Aid and Humanitarian Aid Distribution Checklist

ANNEX 10 Education Checklist

ANNEX 11 Recovery Needs Assessment Checklist

ANNEX 12 Checklist from the Perspective of Women's Rights in All Fields of Work

ANNEX 13 Checklist from the Perspective of Children's Rights in All Fields of Work

ANNEX 14 Checklist from the Perspective of the Rights of Elderly People and Persons with Disabilities in All Fields of Work

ANNEX 15 Checklist for All Vulnerable Groups in All Fields of Work