

Safety and Protection Cluster
Situation Report and Initial Rapid Assessment TC Gita
Monday 19 February 2018

Introduction

This rapid situation analysis was undertaken by members of the Safety and Protection Cluster whose membership includes:

- Ministry of Internal Affairs (MIA)
- Ministry of Police
- Civil Society Forum of Tonga
- Women Children Crisis Center
- Tonga National Women and Crisis Center
- Ma'a Fafine moe Famili
- Talitha Project
- Tonga Ladies Association
- NATA
- Tonga National Visual Impaired Association
- Samaletani Lelei
- Tonga Red Cross, OTA & Alonga
- Mango Tree
- Tonga Youth Congress
- Act for Peace

It is based on a review of initial sit-reps by sectors including WASH, Shelter, Education, etc as well as a data collected and analysed during a specific safety and protection needs assessment and additional disability inclusion data from Tonga Red Cross.

Current Safety and protection issues

Methodology and coverage:

- 1- Rapid assessment
- 2- Women's and Children's Crisis Centre (WCCC) report
- 3- Tongan Red Cross Society data on disabled personnel
- 4- Observations reported by sector partners

Name of the dist.	No. of Assessments (Residential)	No. of Assessments (Evacuation Centers)
1 NUKUNUKU	12	0
2 VAINI	3	4
3 LAPAHA	6	3
4 KOLOMOTU'A	7	34
5 KOLOFO'OU	5	0
6 HIHIFO	0	0
7 TATAKAMOTONGA	0	0

	No. of Respondents
Evacuation centers	41
Households	33

General

WCCC held conversations at 17 evacuation centers and found that women wanted to be more prepared and that they have not been involved directly in decision-making – 14 out of

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17 expressed that they had had no involvement in the first 72 hours and were just instructed where to stay and what to do.

Findings based on available data

- **Vulnerable groups were found to include:**
 - Pregnant and lactating women
 - Children
 - People living with disabilities
 - Elderly people
 - Young single mothers
 - Widows
 - LGBTQI
 - PLWD
 - Parents of young children
 - People without a source of income

- **General findings**
 - A lack of access to clean water is increasing the risk of waterborne diseases.
 - Debris that is collecting rainwater has increased potential mosquito breeding sites and there is a risk of vector borne diseases, such as dengue.
 - Solar powered street lights have led to a greater sense of security for many respondents.
 - Men and women have equally reported feelings of sadness, fear, discomfort and insecurity.
 - People are often having to prioritise their spending on emergency supplies which may not meet special needs of vulnerable family members (e.g. people living with disabilities, the elderly).
 - Fewer than half of respondents reported knowing where to seek support for protection concerns.

- **Findings at evacuation centres**
 - Evacuation centres lack clear management systems and structures, those that exist do not provide clear ways to engage with evacuees. Women particularly report not being included in decision-making processes, and not receiving adequate information.
 - No one has been delegated responsibility for safety and security, especially of women and children.
 - The sanitation facilities in ten centres are not gender segregated and many have no locks and are without bathing facilities and lights.
 - The centres are not all accessible for people with limited mobility, including people with disabilities and the elderly.
 - Six centers had no separate arrangements for sleeping. Where families are living together in cramped quarters with no means of separation or security, risks of sexual assault may increase.
 - All centers have reported that no one has been informed about any safety rules.
 - There is a lack of counselling and psycho-social support (PSS) services.

- **Findings related to women and girls:**

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- There is no direct data available on incidences of gender-based violence (GBV). It should be noted that this does not indicate a lack of GBV cases. Given what is already known about existing significant rates of GBV in non-emergency times, this likely indicates that services are not available or accessible, and/or that survivors do not feel comfortable reporting violence they have experienced and seeking services. The lack of data on incidences of GBV is a strong indicator that safe entry points to GBV services should be established, and reporting and referral systems strengthened.
 - Many women residents in evacuation centres reported feeling unsafe, some particularly noted that toilets/bathrooms are unsafe.
 - There is an increased hardship amongst women due to lack of or limited food, water and electricity, given their additional roles in taking care of family members. The lack of water is a significant burden for women who tend to bear the primary responsibility for washing and cooking, and for bathing children.
 - There is a lack of information reaching women about the humanitarian assistance that is available to them.
 - Women are excluded from decision making processes and discussions and are generally not being consulted about decisions which affect them.
 - There is a lack of separated wash, toilet facilities and sleeping arrangements. Many toilets are not lockable, and lighting is insufficient. This creates additional risks of sexual assault and exploitation, in particular for women and girls.
 - There are greater reported levels of stress amongst women than amongst men.
 - There is an additional workload for women engaged in cleanup that have young children in need of their care.
 - Women and girls were observed to be less likely to be engaging in leisure activities than men and boys. Many girls are reported to be taking on household support tasks such as cleaning and tidying, looking after family members.
 - in evacuation centres reported not being able to keep track of young girls, which may indicate a risk of sexual assault and/or exploitation as girls are unsupervised and vulnerable. Indeed, one respondent (in LIDS Matavaimoui Chapel) reported hearing reports/rumours of sexual exploitation/exchange of sexual favours for food or non-food items. Given the rapid nature of the assessment, it is unlikely that all reports and rumours would have been documented.
- **Child protection findings**
- Most children have been out of school for a week and remain out of schools.
 - Their parents are engaged in cleanup as well as livelihood activities and employment. This limits their ability to supervise their children.
 - Children have been observed playing in contaminated floodwater (which is a severe health risk), playing in areas where there is dangerous debris (e.g. broken glass) and helping their parents clean up potentially hazardous debris (e.g. wood with protruding nails etc.).
 - Some children are reportedly sheltering in evacuation centres away from primary caregivers, increasing their exposure to potential protection risks.
 - Many children are likely to be in need of psychosocial support.
 - Some parents have relayed that their children are fearful for the future, worrying that the cyclone may return.
 - There are children who have experienced the stress of their homes being damaged/destroyed whilst they have been sheltering in them.

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- Lack of normalcy and the distress of parents are also likely to contribute to needs for psychosocial support amongst children.
- Some children in evacuation centres are apart from their primary care givers, which combined with the exceptional situation may negatively impact their wellbeing.

- **Findings for people living with disabilities**
 - Most have returned to their homes as they reported feeling uncomfortable in the evacuation centres (primarily due to lack of accessibility).
 - Most had homes which were either partially or fully destroyed.
 - There are approximately 28 individuals living at Alonga centre (Alonga centre is a centre for persons with disabilities who has no home or no one to take care of them) - 15 person with disabilities and 13 without disabilities. The 13 individuals are acting as personal assistance to person with disabilities
 - People living with disabilities have limited or no financial means which restricts their ability to purchase food and to pay for labour to reconstruct their homes.
 - People are often having to prioritise their spending on emergency supplies which may not meet particular needs of family members who are living with a disability.
 - 14 centers were found to be hosting women and girls living with a disability.
 - Immediate needs include: access to clean water, food, hygiene and first aid materials to clean old wounds (hospitals are too crowded) and diapers.

Recommendations

To address these findings, the Safety and Protection Cluster request funding to support the following:

General Recommendations: the Safety and Protection Cluster makes the following recommendations:

1. Establish an accessible means of communication for people who are apart from family members to support their psychosocial wellbeing.
2. Explore means of making information on humanitarian assistance available more accessible to vulnerable groups.
3. Run a cleanup campaign to raise awareness of vector borne diseases and to remove debris and potential breeding sites.
4. Explore the option of expanding solar powered street lights, and providing portable solar lights to women and girls.
5. Provide psychosocial support services to affected populations (men and women).
6. Designate qualified personnel to evacuation centres to manage safety and protection related issues.
7. Establish SOPs for evacuation centre safety rules and how these should be appropriately shared with evacuees.

People Living with Disabilities: Noting that there is a high number of people living with disabilities as per the 2016 census, the Safety and Protection Cluster makes the following recommendations:

1. A specific disability assessment to be conducted if sufficient disability desegregated data does not emerge from the available data .

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2. Food and water to be urgently distributed to persons with disabilities not living in government evacuation centres.
3. Health needs of persons living with disabilities to be prioritised.
4. Portable solar lights for all women and girls, especially in evacuation centres and especially for those people with limited or no income, poor housing, coordinate with shelter cluster...
5. Ensure refurbishment of church buildings, community halls and schools include measures to support disability inclusion.

Children: Noting that children are a particularly vulnerable group of the population, as of the 2016 census, the Safety and Protection Cluster makes the following recommendations:

6. Establish child friendly spaces to provide children with a safe space and supervision in the interim, enabling parents to pursue cleanup and livelihood activities.
7. Conduct psychosocial support activities in schools and in child friendly spaces to improve psychological and social wellbeing of children affected by this emergency.
8. Propose the Education cluster to prioritise the return of children to schools as an urgent and lifesaving intervention.
9. Propose the Ministry of Education to consider waiving school fees in first term for affected families.
10. Ensure food assistance gives consideration to the nutritional needs of pregnant and lactating women and very young children.
11. Monitor situation of children not in the care of primary caregivers in evacuation centres.

Women and girls: the Safety and Protection Cluster makes the following recommendations:

12. Ensure women are consulted and involved in decision making regarding cleanup and reconstruction efforts. Propose establishing emergency centre management committees with a minimum number of women members.
13. Propose to Shelter cluster: Build accessible and separate toilets, including facilities for women and girls menstrual hygiene, at evacuation centres. Ensure women and girls are consulted in this process.
14. Promote solidarity and shared responsibilities among men and women through discussions at evacuation centres and information shared through EC management.
15. Ensure women have equal access to information and means of communication. As above, propose including women on EC management committees, and establishing specific information-sharing channels with women representatives in ECs.
16. Ensure women are consulted on all WASH-related plans and activities.
17. Provide separate and secure sleeping areas arrangements for women in evacuation centres and ensure this is included in future evacuation centre SOPs.
18. Establish referral pathways for survivors of GBV, including displaying and providing clear information on available service providers and contact details at all evacuation centres.
19. Establish safe and accessible entry points to services for survivors of GBV. This may include ensuring and supporting access for existing service providers, exploring women-friendly spaces, etc.

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