

United Nations Entity for Gender Equality and the Empowerment of Women

Hamburg Model United Nations
“Shaping a New Era of Diplomacy”
28th November – 1st December 2019



Welcome Letter by the Secretary Generals

Dear Delegates,

we, the secretariat of HamMUN 2019, would like to give a warm welcome to all of you that have come from near and far to participate in the 21st Edition of Hamburg Model United Nations. We hope to give you an enriching and enlightening experience that you can look back on with joy.

Over the course of 4 days in total, you are going to try to find solutions for some of the most challenging problems our world faces today. Together with students from all over the world, you will hear opinions that might strongly differ from your own, or present your own divergent opinion. We hope that you take this opportunity to widen your horizon, to, in a respectful manner, challenge and be challenged and form new friendships.

With this year's slogan "Shaping a New Era of Democracy" we would like to invite you to engage in and develop peaceful ways to solve and prevent conflicts. To remain respectful and considerate in diplomatic negotiations in a time where we experience our political climate as rough, and to focus on what unites us rather than divides us. As we are moving towards an even more globalized and highly military armed world, facing unprecedented threats such as climate change and Nuclear Warfare, international cooperation has become more important than ever to ensure peace and stability.

During the last year our team has worked tirelessly to turn HamMUN into a platform for you, where you can grow as a person, step out of your comfort zone and be the best delegate you can possibly be. We can't wait to share it with you and are looking forward to an unforgettable time.

Yours Sincerely,

Leah Mathiesen & Tobias Hinderks

Secretary Generals



Introduction Letter by the Chairs

Distinguished Delegates,

It is with the utmost pleasure that the two of us welcome you to this year's edition of Hamburg Model United Nations. We have worked together to ensure exciting debates for all of you in the UN Women committee, and we sincerely hope that you will enjoy yourself during the conference as much as we have preparing the topics for you to work on.

There is always a first time for everything, and with MUN, your first time will never be your last! We are excited to welcome all beginner delegates to this committee. Whether this will be your first time or third, we can promise that this experience will be very educative and eye-opening for you.



The topics that we will be discussing will give you an insight into the world of diplomacy and decision-making. In the era of #MeToo, our first topic explores the struggles women face in workplaces, and encourages you to come up with solutions that tackle its root cause. Our second topic explores another contemporary issue – the condition of women in refugee camps across the world. We hope that delegates will be able to find common ground and come up with fruitful solutions that can be applicable in the real world.



In this process, we will be there to guide you – be it skills, content or resolution writing. We are very much looking forward to meeting all of you, and we hope you will have the best time possible at HamMUN 2019. We wish to contribute to interesting conversations, fruitful debates, but most importantly, to an amazing conference all together, both during the committee and



the social events! We are available to answer any questions you might have both before and during the conference.

We hope to see you as motivated and enthusiastic as we are; good luck with your research and preparation!

Dhwani Goel and Marion Luc



Introduction to the Committee

The United Nations Entity for Gender Equality and the Empowerment of Women, more commonly known under the name UN Women, is the UN body dedicated to fighting against gender-based discrimination, and for gender equality and the empowerment of women and girls. This committee was established to foster progress in this regard and support initiatives on meeting their goals.

The entity was created in 2010, with the adoption of Resolution 64/289 on July 2nd, and became operational in January 2011¹. The current body as we know it emerged from the merge of four different bodies, offices and institutes related to women and gender equality issues.

The UN Women is committed to supporting Member States achieve greater gender equality. It sets standards for countries to meet, and provides technical and financial support to achieve them. It works on a worldwide scale to implement the Sustainable Development Goals for women and girls effectively, and fosters women's equal participation in all areas of life, focusing on four strategic priorities²:

- (1) *“Women lead, participate in and benefit equally from governance systems;*
- (2) *Women have income security, decent work and economic autonomy;*
- (3) *All women and girls live a life free from all forms of violence;*
- (4) *Women and girls contribute to and have a greater influence in building sustainable peace and resilience, and benefit equally from the prevention of natural disasters and conflicts and humanitarian action.”*³

UN Women aims at promoting and coordinating the UN system's work in pushing forward gender equality, through initiatives such as positioning gender equality as fundamental to the Sustainable Development Goals. It aims at creating a more inclusive world.

The committee advocates for gender equality to be recognised not only as a basic human right, but also as a fuel for socio-economic growth. Empowering women

¹ UN Women, *Governance*, accessed September 10, 2019. <https://www.unwomen.org/en/about-us/governance>

² UN Women, *About UN Women*, accessed September 9, 2019. <https://www.unwomen.org/en/about-us/about-un-women>

³ UN Women, *About UN Women*, accessed September 9, 2019. <https://www.unwomen.org/en/about-us/about-un-women>



has consequences well beyond women's lives, contributes to thriving economies and increased productivity.

Over the past decades, the United Nations system has taken significant steps to advance gender equality. Major guiding documents have been elaborate and ratified, such as the Beijing Declaration and Platform for Action and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)⁴.

⁴ UN Women, *About UN Women*, accessed September 9, 2019.
<https://www.unwomen.org/en/about-us/about-un-women>



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Topic A: Ensuring safer and fairer workplaces for women

1. Introduction

According to the International Labour Organization (ILO) and World Bank, in 2018, 39% of the world's total labour force was made up of females⁵. This figure varied per region and country. North America and Sub-Saharan Africa led the numbers with more than 46% of their labour force being women, while Middle East and North Africa scored the lowest with 20.3%. Despite the varying female participation in economies around the world, sexual harassment and discrimination against women are common practices. The ILO reports that in the European Union, 40-50% of women have reported some form of sexual harassment at workplaces⁶. Even though women are not the only victims of harassment, they often face additional obstacles in form of lower wages, maternity discrimination and job insecurity.

Unsafe and unfair workplaces inarguably present a challenge to economic growth because they reduce productivity, de-motivate a significant proportion of the labour force and cause trauma to victims. The main goal of this topic is for the UN Women to deliberate on how to make workplaces female friendly. For this, it is important to break down the topic and briefly investigate each aspect.

1.1. Safety for women in workplaces

1.1.1. Combating sexual harassment

ILO defines sexual harassment in two forms – one where a job benefit is conditional on sexual favours (Quid Pro Quo), and the second where working environments are intimidating for victims⁷. Harassment could be in form of physical, verbal and non-verbal actions which are unwelcome and humiliating.

⁵ The World Bank, *Labor force, female*, accessed August 13, 2019. <https://data.worldbank.org/indicator/SL.TLF.TOTL.FE.ZS>

⁶ International Labour Office, *Sexual harassment at Work*, accessed August 13, 2019. https://www.ilo.org/wcmsp5/groups/public/---ed_norm/---declaration/documents/publication/wcms_decl_fs_96_en.pdf

⁷ International Labour Organisation, *Eliminating sexual harassment in workplaces in the Pacific*, Policy Brief, 2015. Accessed August 16, 2019. https://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/---ilo-suva/documents/policy/wcms_407363.pdf



The Guardian reports that only 8% of women in the UK have reported harassment at work⁸. Reasons for not reporting range from fear of losing job and further victimization, to victim-blaming and not knowing what their rights are. It may also be easier to simply accept the harassment and avoid the shame, if women think that their complaint will not lead to significant action.

1.1.2. Protecting women in the primary sectors

A majority of the women employed in the developing world work in the agricultural and informal sectors⁹. Most of them work in hazardous environments with no social protection or rights to decent working conditions. The threat is even bigger in rural areas where women don't have access to healthcare services, decent wage rates, adequate housing and sanitation; and often work for prolonged hours without proper nutrition and when pregnant.

Women in agriculture are highly exposed to injuries and diseases, which often leads to higher rates of miscarriages and premature births¹⁰. They also suffer a disproportionate impact of poverty. UN Women considers empowerment of rural women essential for their well-being, for the growth of rural communities and for better economic productivity¹¹. This includes supporting the participation of rural women in shaping policies that affect their lives, improving food security and poverty eradication.

1.2. Fairer workplaces for women

⁸ The Guardian, SIDDIQUE Haroon, *Workplace gender discrimination remains rife, survey finds*, September 23, 2018. Accessed August 13, 2019. <https://www.theguardian.com/world/2018/sep/13/workplace-gender-discrimination-remains-rife-survey-finds>

⁹ International Labour Organisation, *More than 60 per cent of the world's employed population are in the informal economy*, April 30, 2018. Accessed August 23, 2019. https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_627189/lang-en/index.htm

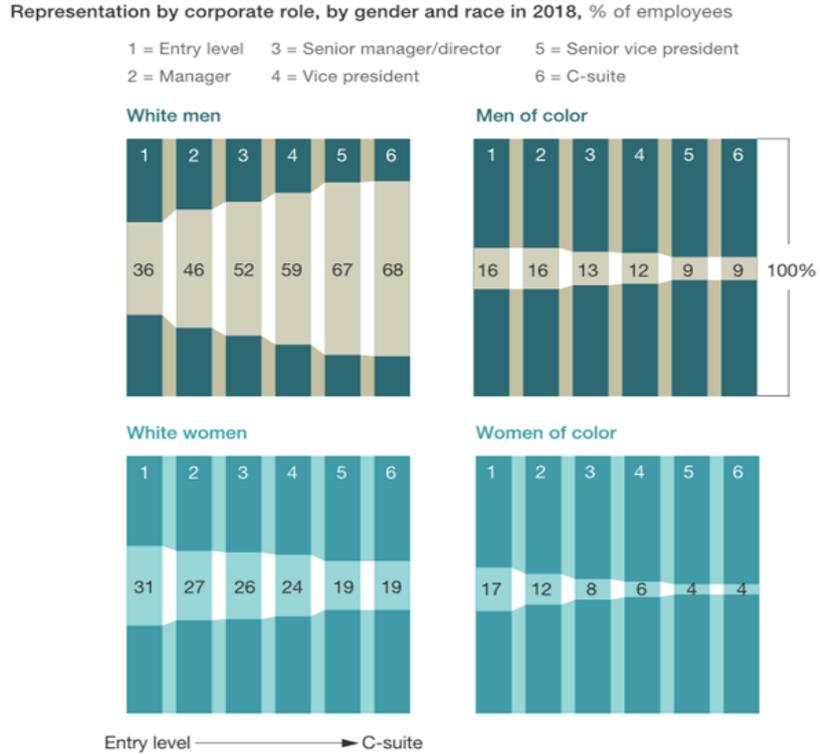
¹⁰ International Labour Office, *Safety and Health in Agriculture*. Accessed August 20, 2019. https://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---safework/documents/publication/wcms_110193.pdf

¹¹ UN Women, *The role of women in rural development, food production and poverty eradication*, October 15, 2013. Accessed August 16, 2019. <https://www.unwomen.org/en/news/in-focus/rural-women-day/2013>



1.2.1. Ensuring equality of opportunity

Studies show that women are underrepresented in the corporate sector, especially in senior leadership. In 2018, women occupied only 27% of managerial positions in the world¹². A study by McKinsey & Company shows that in America only 1 in 5 top-level leaders is a woman, and only 1 in 25 is a woman of colour¹³. The research also shows that managers often underestimate women’s performance, provide less resources and support which is needed to succeed, question their judgement, demand more evidence of competence, address women in a less-than-professional manner and often ignore their contributions. Casual sexism and harassment also diminish gender equality in the workplace.



McKinsey&Company | Source: 2018 LeanIn.Org and McKinsey Women in the Workplace study

Source : McKinsey & Company, *Women in the Workplace 2018*, October 2018.
<https://www.mckinsey.com/featured-insights/gender-equality/women-in-the-workplace-2018>

¹² Sustainable Development Goals knowledge platform, *Sustainable development goal 5 : Achieve gender equality and empower all women and girls*. Accessed August 15, 2019. <https://sustainabledevelopment.un.org/sdg5>

¹³ McKinsey & Company, *Women in the Workplace 2018*, October 2018. Accessed August 20, 2019. <https://www.mckinsey.com/featured-insights/gender-equality/women-in-the-workplace-2018>



1.2.2. Addressing the gender pay gap

The EU defines the gender pay gap as the relative difference in the average gross earnings of women and men within an economy¹⁴. Globally, women make only 77 cents for every dollar men earn¹⁵. In the OECD countries, South Korea has the largest wage gap with women earning only 65.4% of what men earn¹⁶, and worldwide Yemen ranks the worst¹⁷. Furthermore, mothers and women of colour earn less than women without children and white women.

The causes of this gap lie in the perceived difference in the work done by men and women. Women's work is often under-valued even if it requires equal effort or skill. Women also tend to be concentrated in different sectors of the economy. Chidi King of UN Women points out that women are overrepresented in low paid jobs such as teaching, nursing, health care and sales in the developed world; and agriculture and textile industries in the developing world¹⁸.

1.2.3. Tackling maternity and childcare discrimination

Mary Brinton of Harvard University says that despite equaling or surpassing men in education achievements, gender equality at the workplace is far from being achieved because women carry a bigger share of household responsibilities¹⁹. Women end up doing a second shift of work when they return home, yet they are expected to put in the same hours at workplaces as men do. As a result, many women decide to give up their careers or choose not to start families.

King talks about the “motherhood penalty” which pushes women into the informal economy, low-skilled jobs and part-time work. This is because the world of work is centered around the male “breadwinner” model with long working hours, which are extremely challenging to balance with family responsibilities for mothers.

¹⁴ European Commission, *The gender pay gap situation in the EU*, October 2018. Accessed August 17, 2019. https://ec.europa.eu/info/policies/justice-and-fundamental-rights/gender-equality/equal-pay/gender-pay-gap-situation-eu_en

¹⁵ UN Women, *Equal pay for work of equal value*. Accessed August 17, 2019. <https://www.unwomen.org/en/news/in-focus/csw61/equal-pay>

¹⁶ OECD, *Gender wage gap*, 2019. Accessed August 20, 2019. <https://data.oecd.org/earnwage/gender-wage-gap.htm#indicator-chart>

¹⁷ World Economic Forum, *Global Gender Gap Report 2016*, 2016. Accessed August 13, 2019. http://reports.weforum.org/global-gender-gap-report-2016/rankings/?doing_wp_cron=1534177407.7173850536346435546875

¹⁸ UN Women, *Take Five: At the current rate of progress, no equal pay until 2069*, February 24, 2017. Accessed August 17, 2019. <https://www.unwomen.org/en/news/stories/2017/2/take-five-chidi-king-equal-pay>

¹⁹ Harvard Summer School, *Gender Inequality and Women in the Workplace*. Accessed August 28, 2019. <https://www.summer.harvard.edu/inside-summer/gender-inequality-women-workplace>



Pregnancy is seen as a liability by profit-driven businesses. Pregnant women face harsh discrimination such as being dismissed from work, demoted and not being hired. The ILO reports that in Kenya, some women were forced to sign agreements promising that they will not become pregnant, while in Italy women said they were forced to resign for getting pregnant²⁰. Additionally, many pregnant women around the world remain exposed to dangerous chemicals and unsafe working conditions which leads to stillbirths and miscarriages.

1.3. A unique challenge: Recognising unpaid domestic work

Around the globe, women do a vast majority of household work such as childcare, cleaning and cooking – at least two and a half times more than men²¹. As a result, they have less time to secure a full-time job with decent wages, pension for the future and social protection. Women's unpaid work fills in the lack of social services and supports smooth functioning of economies. Yet, it is considered insignificant.

UN Women expert Shahra Razavi reveals that the value of unpaid work done by women in Switzerland is almost equal to the value of the Swiss banking and insurance industry²². The OECD reports that unpaid work represents at least 14% of GDP in South Africa and Canada²³. In South Asia, men perform the lowest share of unpaid domestic work with an average of about 1 hour per day, and only 31 minutes a day in India²⁴.

²⁰ International Labour Organisation, *Maternity protection; Not just a personal issue*, November 23, 2012. Accessed August 15, 2019. https://www.ilo.org/global/about-the-ilo/newsroom/features/WCMS_193975/lang--en/index.htm

²¹ UN Women, *Redistribute unpaid work*. Accessed August 17, 2019. <https://www.unwomen.org/en/news/in-focus/csw61/redistribute-unpaid-work>

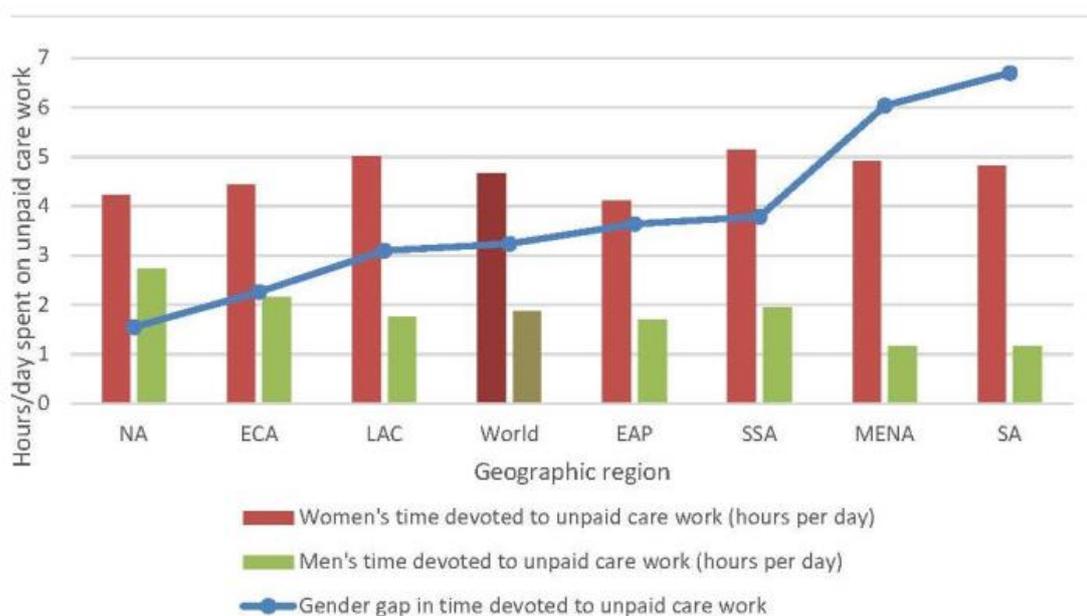
²² UN Women, *What is the real value of unpaid work?*, March 2, 2017. Accessed August 28, 2019. https://www.youtube.com/watch?time_continue=168&v=fcqt0QzgUFU

²³ OECD Development matters, *Why you should care about unpaid care work*, March 18, 2019. Accessed August 28, 2019. <https://oecd-development-matters.org/2019/03/18/why-you-should-care-about-unpaid-care-work/>

²⁴ International Labour Organisation, *ILO: Women do 4 times more unpaid care work than men in Asia and the Pacific*, June 27, 2018. Accessed August 28, 2019. https://www.ilo.org/asia/media-centre/news/WCMS_633284/lang--en/index.htm



Figure 1: Gender gaps in unpaid care work by geographic region



Note: NA stands for North America, ECA for Europe and Central Asia, LAC for Latin America and the Caribbean, EAP for East Asia and the Pacific, SSA for Sub-Saharan Africa, MENA for Middle East and North Africa, SA for South Asia.

Source: OECD Gender Institutions and Development Database (GID-DB), 2019, oecd.stat.org.

Source : International Labour Organisation, ILO: Women do 4 times more unpaid care work than men in Asia and the Pacific, June 27, 2018. Accessed August 28, 2019. https://www.ilo.org/asia/media-centre/news/WCMS_633284/lang--en/index.htm

2. History of the topic

For most of history, women silently endured mistreatment in workplaces. Female slaves were frequently raped, while women employed in production were subject to discriminatory policies by abusive supervisors. The only way to save yourself was to quit your job, because complaining would lead to dismissal anyway.

Time Magazine reports that this situation took a better turn only in the 1970s when the women’s liberation movement began to challenge the system and culture²⁵. Women became more aware,

²⁵ Time, COHEN Sascha, *A brief history of sexual harassment in America before Anita Hill*, April 11, 2016. Accessed September 21 2019. <https://time.com/4286575/sexual-harassment-before-anita-hill/>



empowered and conscious of the violation of their basic human rights to be treated equally and respectfully.

The phrase “sexual harassment” was coined by a group of women at Cornell University in 1975²⁶. Since then, more and more laws came about to counter unsafe and unfair treatment of women at workplaces. The subject gained greater attention in the 2000s not only because women became more empowered and voiced their opinions, but also because they constituted a greater proportion of the workforce in many countries²⁷.

Yet, this is only the case in the West. In many developing countries, women still remain oppressed due to cultural norms. Women’s rights in regards to safety and fairness at workplaces have come a long way, but still require action to achieve global equality.

3. Current situation

3.1. Case study: The #MeToo Movement

In 2018, the famous #MeToo movement on Twitter brought out millions of stories of sexual harassment in many areas such as politics, cinema, sports and religious institutions. Originally founded in 2006, the movement aims to spark a conversation about sexual violence and bring together survivors as advocates of a harassment free world, not only for women, but for survivors from all genders on the spectrum²⁸.

The movement also aims to bring justice to survivors by holding perpetrators accountable. Further, it aims to coordinate grassroots movements that interrupt such behavior in communities, and pool together resources for survivors to seek help from. This movement has made it clear that women will no longer tolerate oppression, and have come together to support each other in this ‘fight’. It has empowered women across the world from all walks of life to speak up against harassment and fight the system.

In November 2018, UN Women released a comprehensive document in support of this movement, called “Towards an End to

²⁶ *Ibid.*

²⁷ Lee, R. D. & Paul, S. G. (1995). The Legal Evolution of Sexual Harassment. *Public Administration Review*, 55(4), 357-364.

https://www.jstor.org/stable/977127?seq=1#page_scan_tab_contents

²⁸ Me too. *History & vision*. Accessed September 21, 2019.

<https://metoomvmt.org/about/#history>



Sexual Harassment: The Urgency and Nature of Change in the Era of #MeToo”²⁹. In this document, UN Women regards sexual harassment as a violation of human rights and a reinforcement of inequality of power. It calls for victim-friendly and independent investigations. It also stresses that cultures of sexual inequality are deeply prejudiced and ingrained in minds, for which countries should work on creating equal and inclusive workplaces by educating businesses.

4. Past actions

4.1. Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)

Article 11.1 of the CEDAW grants women the right to work and the freedom to choose profession³⁰. It forbids gender-based discrimination in the selection criteria. It further secures a number of other rights such as the right to promotion, job security, training, equality of treatment in the evaluation of work, retirement benefits, paid leave and safe working conditions. It also aims to achieve equal pay for work of equal value.

Article 11.2 of the CEDAW forbids discrimination against women on grounds of marriage or maternity to protect their right to work. It calls for states to introduce paid maternity leave, develop child-care facilities and support social services that enable parents to combine family and work responsibilities equally. It also urges states to provide special protection to pregnant women against unsafe working conditions.

Article 14 of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) specifically recognizes the role of rural women in “the economic survival of their families”³¹. Among other measures to empower them, this article calls for rural women to benefit directly from social security programs, receive training to increase their technical proficiency and have equal access to agricultural credit and land.

²⁹ UN Women, *Towards an end to sexual harassment: The urgency and nature of change in the era of #MeToo*, 2018. Accessed August 16, 2019. <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2018/towards-an-end-to-sexual-harassment-en.pdf?la=en&vs=4236>

³⁰ UN Human Rights Office of the High Commissioner, *Convention on the Elimination of all forms of discrimination against Women*, New York, 18 December 1979. Accessed August 20, 2019. <https://www.ohchr.org/EN/ProfessionalInterest/Pages/CEDAW.aspx>

³¹ UN Human Rights Office of the High Commissioner, *Convention on the Elimination of all forms of discrimination against Women*, New York, 18 December 1979. Accessed August 20, 2019. <https://www.ohchr.org/EN/ProfessionalInterest/Pages/CEDAW.aspx>



4.2. Sustainable Development Goals (SDGs)

Goal 5 of the Sustainable Development Goals aims to achieve gender equality, and target 5.5 specifically aims to achieve effective participation and equal opportunities for leadership for women at all levels of decision-making in political, economic and public life. The indicators that measure the progress of this target are proportion of seats held by women in political institutions, and proportion of women in managerial positions.

Target 5.4 of the SDGs aims to achieve universal recognition of unpaid care and domestic work, through the provision of public services, infrastructure and social protection policies. It aims to promote shared responsibility of household chores and family duties, as nationally appropriate. Razavi points out that it is important to change social expectations and norms to encourage men and women to share household responsibilities equally.

4.3. Equal Pay International Coalition (EPIC)

The Equal Pay International Coalition (EPIC) is a joint initiative by UN Women, ILO and the OECD³². It supports governments and organizations to improve legislation and enforcement mechanisms in regard to equal pay. It hopes to see the universal ratification of ILO's Equal Remuneration Convention by 2030. It also consists of a Platform of Champions – influential individuals who advocate for equal pay in their fields by raising awareness and reaching out to policy makers.

4.4. Women's Empowerment Principles (WEPs)

In 2013, UN Women and the Government of Canada set up an online platform on women's economic empowerment (www.empowerwomen.org). Among other initiatives of this platform, the Women's Empowerment Principles (WEPs) encourage businesses to strive for gender equality³³. Companies can sign the WEPs and join the community. They are encouraged to create female-friendly workspaces, remove negative gender stereotypes in their advertising and bring inclusivity into practice.

4.5. Other initiatives

³² Equal Pay International Coalition, *Who we are*. Accessed August 28, 2019. <https://www.equalpayinternationalcoalition.org/the-coalition/>

³³ Empowerwomen, *Equality = business*. Accessed August 20, 2019. <https://www.empowerwomen.org/en/weps/about>



Phumzile Mlambo-Ngcuka, Executive Director of UN Women, said that a strong social protection system comprising of paid maternity leave, affordable child care services and sustainable infrastructure is vital to reducing the pay gap. UN Women launched the #StopTheRobbery campaign to raise awareness about the 23% global gender pay gap.

Other initiatives that deal with sexual harassment at workplaces include:

- (1) *UN Trust Fund to End Violence Against Women*
- (2) *UN Women Youth Council*
- (3) *UN Feminist Network*

5. Conclusion

Ensuring safer and fairer workplaces for women is an important part of reducing gender inequalities. By reducing the amount of discrimination and possibly dangerous factors for women in the workplace, women are more likely to earn a fairer wage and gain independence in the household.

The resolution that will be discussed upon should consider the cultural context that fosters a discriminatory culture towards women in the workplace. Recalling major conventions that have already been passed, the debate should aim at taking long-term and short-term measures that will ensure that women have a space to work that is both safe and fair. Among other actions, this requires a stronger legal framework and greater enforcement by national agencies.

6. Guiding questions

- How can Member States adopt a more survivor-centered approach to combating sexual harassment in workplaces?
- How can Member States create a better culture of sexual equality and respect for women in workplaces?
- How can UN Women assist Member States to better enforce Article 11 and Article 14 of the CEDAW?
- How can UN Women assist Member States in building better social services systems to empower rural women and mothers?



- How can Member States change traditional norms and social expectations regarding household responsibilities?



7. Further reading

7.1. Required

- The UN Women-ILO Handbook on Addressing Violence and Harassment Against Women in the World of Work. (UN Women, 2019). <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2019/addressing-violence-and-harassment-against-women-in-the-world-of-work-en.pdf?la=en&vs=4050>
- Towards an End to Sexual Harassment: The Urgency and Nature of Change in the Era of #MeToo. (UN Women, 2018). <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2018/towards-an-end-to-sexual-harassment-en.pdf?la=en&vs=4236>
- Global and Regional Trends in Women’s Legal Protection Against Domestic Violence and Sexual Harassment. (World Bank, 2018). <http://pubdocs.worldbank.org/en/679221517425064052/EndingViolenceAgainstWomenandGirls-GBVLaws-Feb2018.pdf>

7.2. Optional

- Aizer, A. (2010). The Gender Wage Gap and Domestic Violence. *The American Economic Review*, 100(4), 1847-1859. <https://www.jstor.org/stable/27871277>
- Himmelweit, S. (1995). The Discovery of “Unpaid Work”: The Social Consequences of the Expansion of “Work”. *Feminist Economics*, 2(1), 1-19. <https://www.tandfonline.com/doi/pdf/10.1080/714042229?needAccess=true>



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Topic B: Providing better access to healthcare for women in refugee camps

1. Introduction

Crisis situations and humanitarian emergency contexts often prove highly disruptive for a country's ability to provide primary healthcare services to its population. In that case, humanitarian services often take over the provision of basic services for refugee populations, but such programs too often oversee women's specific essential health needs. As is commonly the case, women tend to be disproportionately affected by conflicts and violent environments, as they suffer from disrupted health systems, sexual and gender-based violence (SGBV)³⁴, and the burden of various diseases³⁵.

The UNHCR defines sexual and gender-based violence as “any act that is perpetrated against a person's will and is based on gender norms and unequal power relationships. It encompasses threats of violence and coercion. It can be physical, emotional, psychological, or sexual in nature, and can take the form of denial of resources or access to services. It inflicts harm on women, girls, men and boys.”³⁶

More specifically, women suffer from lack of access or lack of provision of sexual and reproductive health services. That, in turns, often leads to infections, diseases, disabilities or even death among refugee women³⁷. Sexual and reproductive health and obstetric care are some of the aspects of women's health that suffer the most, as women in refugee camps lack access to family planning services, safe motherhood, and protection from sexual violence and HIV transmission services³⁸. These issues are exacerbated by heightened sexual and gender based violence, increased vulnerability, and precarious living conditions, which include rape, military

³⁴ Henceforth referred to as “SGBV”

³⁵ Reliefweb, *Women's Health Services Lacking for Syrian Refugees*, February 14, 2019. Accessed September 5, 2019. <https://reliefweb.int/report/syrian-arab-republic/women-s-health-services-lacking-syrian-refugees>

³⁶ UNHCR, *Sexual and Gender Based Violence*. Accessed September 22, 2019. <https://www.unhcr.org/sexual-and-gender-based-violence.html?query=gender>

³⁷ Reliefweb, *Women's Health Services Lacking for Syrian Refugees*, February 14, 2019. Accessed September 5, 2019. <https://reliefweb.int/report/syrian-arab-republic/women-s-health-services-lacking-syrian-refugees>.

³⁸ Corbis - Sussex Global Health, ESMATI Zara Leima, *Women's Health in Refugee Camps: A hidden cost of war*. Accessed September 7, 2019. <https://corbissussex.org/womens-health-in-refugee-camps-a-hidden-cost-of-war/>



sexual slavery, forced prostitution, forced marriage, trafficking and the resurgence of female genital mutilation³⁹.

In such conditions, women living in refugee camps require more attention, as they are at risk of unwanted or early pregnancies. A large number of maternal deaths could be prevented⁴⁰. The UN reports that 60 percent of preventable maternal death occur in humanitarian settings. The lack of access to obstetric care endangers the life of both the mother and the baby. A number of reasons including lack of financial resources, shame and distance from healthcare centers prevent women from accessing pre- and post-natal obstetric care. Subsequently, the high exposure to violence and SGBV leads to a large number of unwanted pregnancies. In such living conditions, women might not have access to information about abortion services, or such services might not be provided at all. This, in time, may push women to try and abort by themselves, using low-cost resources they are able to find, often leading to incomplete abortion or serious injuries, infections, and sometimes death. They might also turn to underground service providers for abortion, often in very unsanitary conditions and for large sums of money, adding to the financial distress.

Lack of information on the needs of women refugees during their menstruation leads to the issue being overseen because it does not consist of a life or death matter⁴¹. Women living in refugee camps report fear to use the latrines, especially at night, because they are unsafe, dirty, without water or door locks. On top of those material factors, women are afraid of being assaulted, kidnapped or bitten by snakes when using these facilities⁴². Hence, they often resort to changing their pads in their tents, where they enjoy very little to no privacy at all. Besides economic considerations that hinder access to sanitation menstruation products, it is the lack of appropriate facilities and knowledge that leads to precarious conditions during their periods. Being kept out of school due to the instability of the migration, women often lack correct information about the menstruation cycle and the appropriate sanitation required. Poor hygiene during menstruation might lead to painful infections that could be

³⁹ *Ibid.*

⁴⁰ Help refugees, *Women in Calais*, February 7, 2019. Accessed September 10, 2019. <https://helprefugees.org/news/women-in-calais/>

⁴¹ Reuters, *Refugees lack menstrual supplies and private, safe toilets*, November 6, 2017. Accessed September 10, 2019. <https://www.reuters.com/article/us-health-refugees-menstruation/refugees-lack-menstrual-supplies-and-private-safe-toilets-idUSKBN1D629P>

⁴² *Ibid.*



avoided with simple steps. Moreover, conditions related to menstruation, such as endometriosis, yeast infections and urinary tract infections are still largely overseen.

On top of obvious long-lasting physical repercussions, migration and crisis situation also tend to have a profound impact on women's mental health⁴³. They face a number of barriers such as stigma and shame. Mental health and psychosocial services are essential to guarantee a thorough health care continuum for women living in refugee camps, as they are exposed to a number of aforementioned violence that can have long-lasting impacts on their mental health. The traumas induced by the migration and the associated experiences might be heightened by poor housing conditions, lack of access to food security, critical financial situations, a new cultural system with a possible new language to learn and different gender roles and expectations on women⁴⁴. A study also reports that living conditions in the host country, especially in informal settlements, are often more restrictive for women than they were in their home countries. For example, female Syrian refugees reports spend less time outside the house and feel less safe in their host countries (Egypt, Jordan and Lebanon) than they did in Syria. That constant feeling of insecurity, might in time, lead to psychological traumas.

2. History of the topic

The UNHCR defines a refugee as “someone who has been forced to flee his or her country because of persecution, war or violence. A refugee has a well-founded fear of persecution for reasons of race, religion, nationality, political opinion or membership in a particular social group. Most likely, they cannot return home or are afraid to do so. War and ethnic, tribal and religious violence are leading causes of refugees fleeing their countries⁴⁵”.

Worldwide, 67 % of all refugees have migrated from only five countries: Syria, Afghanistan, South Sudan, Myanmar and Somalia⁴⁶. Globally, it was estimated by the UNHCR that in 2018, there was 25.9 million refugees in the world. This figure had never been this high in history before⁴⁷.

⁴³ Reliefweb, *Women's Health Services Lacking for Syrian Refugees*, February 14, 2019. Accessed September 5, 2019. <https://reliefweb.int/report/syrian-arab-republic/women-s-health-services-lacking-syrian-refugees>

⁴⁴ *Ibid.*

⁴⁵ USA for UNHCR, *What is a refugee?*. Accessed September 7, 2019. <https://www.unrefugees.org/refugee-facts/what-is-a-refugee/>

⁴⁶ *Ibid.*

⁴⁷ USA for UNHCR, *Refugee Statistics*. Accessed September 7, 2019. <https://www.unrefugees.org/refugee-facts/statistics/>



Refugee camps: “It is a life in a limbo⁴⁸”. The UNHCR recalls that refugee camps are supposed to be a temporary shelter for people fleeing persecutions. However, the agency also underlines that more often than not, when a person becomes a refugee, it is likely that they will remain refugees for many years, and for many, there is a good chance they will be displaced for nearly two decades⁴⁹. As of 2018, 2.6 million people were living in refugee camps. Millions more dwell in informal settings and urban and peri-urban areas⁵⁰.

The UN Women Committee has noticed a number of gender-based impacts related to the crisis in Syria and the massive displacement of population. For example, it underlines that more than a third of Syrian refugee women aged 20 to 24 had been forced into early marriage⁵¹. Subsequently, life expectancy for Syrian women has massively dropped, from 75,9 years to 55,7 years old⁵². This gap can be explained by the higher prevalence of gender-based violence, poor living conditions, topped with poor access to healthcare services in refugee camps.

The lack of sex-disaggregated data for past emergency response services in refugee camps is slowing down the process of improving the programs. Gendered data are still not given the place they deserve in the program cycle, or in the funding of programs. UN Women points out that only 0,5 per cent of funding for humanitarian actions were dedicated to gender-based violence support in 2015⁵³. That lack of financing leads to poorer facilities and weaker programs, that might not be comprehensive enough, and fail to address women’s specific health needs.

3. Current situation

3.1. Case study A- Dabaad (Kenya)

Refugees fleeing persecutions in Somali often cross the border into Kenya. Dadaab is a refugee complex, a large settlement near the border, composed of four camps. As of the end of May 2019, Dadaab hosted 211,701 refugees and asylum seekers⁵⁴.

⁴⁸ USA for UNHCR, *What is a Refugee Camp?* Accessed September 7, 2019. <https://www.unrefugees.org/refugee-facts/camps/>

⁴⁹ *Ibid.*

⁵⁰ *Ibid.*

⁵¹ UN Women, *Facts and figures: Humanitarian actions.* Accessed September 9, 2019. <https://www.unwomen.org/en/what-we-do/humanitarian-action/facts-and-figures>

⁵² *Ibid.*

⁵³ *Ibid.*

⁵⁴ UNHCR, *Dadaab Refugee Complex,* Accessed September 4, 2019. <https://www.unhcr.org/ke/dadaab-refugee-complex>



In 2011, Michelle Bachelet, the then UN Women Executive Director raised concerns about living conditions for women in Dadaab's refugee complex. A high prevalence of rapes, in different locations, including bushes, the side of the road, and even inside homes⁵⁵, was reported, making living conditions extremely precarious for women. A large share of the population of the settlement was made up of women and children, and the UNHCR reported that in 2010, nearly 20% of the entire population was women of reproductive age⁵⁶. Those two combined, it is easy to understand the need to adopt gender-sensitive and culture-appropriate obstetric care and sexual and reproductive health service. A 2010 UNHCR report on maternal care reports that the remote location of the settlement prevents its inhabitants from accessing healthcare facilities at night, for lack of public transportation⁵⁷. Moreover, the growing instability and insecurity have resulted in several attacks over health agency vehicles⁵⁸. The report conducted an analysis of reasons leading to maternal deaths, and identified three main factors to work on in order to improve access to obstetric care: the delay in seeking care, the delay in reaching care and the delay in receiving care⁵⁹. Moreover, technical capacities, professional and cultural factors might have added to the inefficiency of the healthcare system. Some of the proposed solutions that resulted include, among others: improvement of infrastructures, staffing, community sensitization, improved transportation, mother incentives and more supplies⁶⁰.

3.2. Case study B- Cox's Bazar (Bangladesh)

The figures for the year 2018 show that the ethnical conflict in Myanmar has led more than 725,000 Rohingya to flee their native land, running away from violence into the neighboring Bangladesh⁶¹. In total, an approximate 900,000 refugees from Myanmar are currently living in

⁵⁵ UN Women, *UN Women Head raises alarm on insecurity facing Somali refugee women and girls in Kenya*, April 5, 2011. Accessed September 4, 2019. <https://www.unwomen.org/en/news/stories/2011/4/un-women-head-raises-alarm-on-insecurity-facing-somali-refugee-women-and-girls-in-kenya>

⁵⁶ UNHCR, *Improving Maternal Care in Dadaab Refugee camps, Kenya*, June 2010. Accessed September 4, 2019. <https://www.unhcr.org/4c247d969.pdf>

⁵⁷ *Ibid.*

⁵⁸ *Ibid.*

⁵⁹ *Ibid.*

⁶⁰ UNHCR, *Improving Maternal Care in Dadaab Refugee camps, Kenya*, June 2010. Accessed September 4, 2019. <https://www.unhcr.org/4c247d969.pdf>

⁶¹ Norwegian Refugee Council, *Cox's Bazar: The world's largest refugee settlement*, August 24, 2018. Accessed September 9, 2019. <https://www.nrc.no/news/2018/august/coxs-bazar-the-worlds-largest-refugee-settlement/>



Bangladesh, more than half of those refugees living in camps are children⁶². The large number of people poses a number of problems in terms of access to health. Inhabitants report that the health facilities are often cramped, giving limited space and privacy to patients. Moreover, some of the facilities being located in remote areas are not easily reachable⁶³.

Like most conflicts, the ethnical crisis in Myanmar has heightened SHR concerns, sexual violence occurrences and increased gender-based violence. Discussions with inhabitants of the camp report that adolescent girls are the most affected by poor access to health services. They face a number of barriers in accessing appropriate services, especially sexual and reproductive health services, ranging from community stigma to high exposure to risk of violence on the way to and from the health care facilities⁶⁴. Non-governmental organisations operating in the area have tried to combine their efforts to understand and make up for the inefficiency of the system. A June 2019 report by the Women's refugee commission assessed the health facilities on a number of criteria, such as the general state of infrastructures, the availability of contraceptive methods, the functioning of the contraceptive service delivery points, the delivery of misoprostol-mifepristone (abortion pills), the provision of comprehensive post-abortion care to an acceptable standard, and the knowledge and attitudes of service providers providing such services⁶⁵. This study threw light on a number of important considerations for a health service provision delivery to be successful.

On top of the material analysis, it is important to consider the social barriers that young girls and women might face in accessing those services. The 2019 report underlines different barriers, such as religious beliefs, physical and financial factors (remote location of facilities,

⁶² *Ibid.*

⁶³ Women's Refugee Commission, *New Report Examines Reproductive Health Services in Cox's Bazar: Contraceptive and Menstrual Regulation Services Widely Available in Refugee Camps*, June 19, 2019. Accessed September 9, 2019. <https://www.womensrefugeecommission.org/news/press-releases-and-statements/3576-new-report-examines-reproductive-health-services-in-cox-s-bazar-contraceptive-and-menstrual-regulation-services-widely-available-in-refugee-camps>

⁶⁴ Women's Refugee Commission, *New Report Examines Reproductive Health Services in Cox's Bazar: Contraceptive and Menstrual Regulation Services Widely Available in Refugee Camps*, June 19, 2019. Accessed September 9, 2019. <https://www.womensrefugeecommission.org/news/press-releases-and-statements/3576-new-report-examines-reproductive-health-services-in-cox-s-bazar-contraceptive-and-menstrual-regulation-services-widely-available-in-refugee-camps>

⁶⁵ Women's Refugee Commission, *A Clear Case for Need and Demand: Accessing Contraceptive Services for Rohingya Women and Girls in Cox's Bazar*, Case Study, June 2019. Accessed September 9, 2019. (Available as PDF)



poor financial resources), and social stigma related to gender inequalities and the stigma weighing on unmarried girls or women seeking sexual and reproductive health services⁶⁶.

One way around those barriers that was put in place by local and international non-governmental organisations is community-based actions. While empowering women to self-organise and raise awareness among one another, some of the burdens associated to access health care services might be lifted.

4. Past actions

4.1. The 2016 New York Comprehensive Refugee Response Framework

The declaration calls for a greater support for refugees and to the countries that host them⁶⁷. It promotes inclusion of refugees in all areas of life. This declaration is of great importance for our topic, as it also provides for better access to all national services in host countries for refugees. All UNHCR Member States that have signed this declaration must henceforth work towards providing better access to basic services, to help refugees thrive and not survive.

However, when a program lacks a gender-sensitive approach, the initiative might benefit males more than women and other genders. It is therefore essential to adapt the measures mentioned in this declaration to the specific needs of women.

4.2. Actions taken by this committee

UN Women has, at multiple occasion raised attention to gender inequalities in refugee camps. The institution has pushed for the other UN institutions to target more programs at women, especially migrant women, that make up 50 % of the migrant population worldwide. UN Women has worked to raise awareness on the fact that, in 2014, only 4 per cent of projects in UN inter-agency were targeted specifically at women and girls⁶⁸. The agency has reluctantly worked towards making women and girls' needs heard and taken seriously. But, it cannot work alone, collaboration with other UN agencies is essential to guarantee a comprehensive and long-lasting response.

⁶⁶ *Ibid.*

⁶⁷ UNHCR, *Comprehensive Refugee Response Framework*. Accessed September 12, 2019. <https://www.unhcr.org/comprehensive-refugee-response-framework-crrf.html>

⁶⁸ UN Women, *Women refugees and migrants*. Accessed September 14, 2019. <https://www.unwomen.org/en/news/in-focus/women-refugees-and-migrants>



4.3. Actions taken by the UNHCR

Even though the UNHCR is not the committee we are representing, bilateral cooperation between the two agencies is essential to guarantee a comprehensive response to the problem. The UNHCR was first established in 1950 as a response to the aftermath of the second world war⁶⁹. Over the years, the institution has had to face a number of crises that provoked massive population displacements, both internally and internationally. Their expertise on the topic is crucial to guarantee a rapid and efficient response. However, it is now essential to work hand in hand with the UN Women agency, as gender considerations are more and more pressing and need addressing.

In May 2003, the UNHCR has edited a report entitled: *Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons, Guidelines for Prevention and Response*⁷⁰. That report defines the key concepts when dealing with gender-based violence, and promotes guiding principles to provide a comprehensive response. By doing so in 2003, the institution acknowledged the gendered nature of violence and took a step forward towards providing better care for women in precarious living settlements and all throughout their migration journey. By defining the minimum package a consideration, through the gender lens, it contributed to improving the responses provided by different actors in the field. Some of those recommendations include (among others) :

- (1) *“Developing community education and awareness activities ;*
- (2) *Empowering Refugee Communities to Respond ;*
- (3) *Planning to Meet the Psycho-Social Needs of Victims/Survivors ;*
- (4) *Developing a Plan for Working with Perpetrators.⁷¹”*

⁶⁹ UNHCR, *History of UNHCR*. Accessed September 12, 2019. <https://www.unhcr.org/history-of-unhcr.html>

⁷⁰ UNHCR, *Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons, Guidelines for Prevention and Response*, May 2003. Accessed September 22, 2019. <https://www.unhcr.org/en-lk/protection/women/3f696bcc4/sexual-gender-based-violence-against-refugees-returnees-internally-displaced.html>

⁷¹ *Ibid.*



5. Possible considerations for the future

While some improvements have already been achieved in terms of access to health for women living in refugee camps, there is still room for progress. It will be important to consider the following steps in a possible resolution in order to provide a comprehensive response, that could include most countries in the actions taken.

5.1. Gender budgeting

The European Institute for Gender Equality defines gender budgeting as “a strategy to achieve equality between women and men by focusing on how public resources are collected and spent⁷²”. Gender budgeting is a crucial step towards transforming programs in the field and providing better access to health via gender-sensitive planning and actions. Donors and funders play a major role in the shaping of a project. The resolution should provide incentives for state and non-state actors to include gender-related clauses in the funding proposals and when creating a program. Only through dedicating a larger share of the funding for humanitarian settings will women’s specific needs be addressed in an appropriate manner. Funding can be directed towards refurbishing infrastructures, training staff, buying medical entrants, but also to raise awareness and train local communities.

5.2. Community mobilisation

Humanitarian settings are particular contexts where state structures and schooling systems are likely to have fallen apart. The response program should consider means to provide services that empower affected populations to organize among themselves. One of the major problems faced by international organizations implementing programs in such areas is the cultural differences that might lead, in time, to the inefficiency of the services. By raising awareness among the communities, and encouraging women to become pro-active in their own health, it empowers them and has a positive trickle-down effect on their relatives and close circles. Only through community mobilization is it possible to guarantee long-lasting change, and avoid the “band aid effect⁷³”

⁷² European Institute for Gender Equality, *Gender budgeting*. Accessed September 13, 2019. <https://eige.europa.eu/gender-mainstreaming/methods-tools/gender-budgeting>

⁷³ “Hasty solution that covers up the symptoms but does little of nothing to mitigate the underlying problem”. <http://www.businessdictionary.com/definition/band-aid-approach.html>



5.3. Sexual and reproductive health services and the health continuum

Given the level of violence that women experience along their migration path, a comprehensive health care continuum should be put in place at their arrival in camps. Those services should include basic health care considerations, along with sexual and reproductive health services. Health care facilities should include a space that provides contraceptives and emergency contraceptive methods, as well as the possibility to test and treat (when possible) for a number of STIs including HIV/Aids. On top of those basic services, infrastructures should be prepared to receive and take care of miscarriages and incomplete abortions, that can occur when women try to abort on their own, and comprehensive post-abortion care. But that alone would not be comprehensive enough. Exposed to precarious living conditions and psychological traumas, women should also be offered the possibility to access mental health and psychosocial support in order to prevent long-lasting post-traumatic syndrome disorder.

5.4. Safety and protection measures

Last but not least, once those facilities are functional, it will be important to include measures to ensure the protection of women seeking the services. This might include a private space to conduct consultations, better lighting in the latrine facilities and separate latrines for women and men. A community-based network, supported by organizations could be put in place to allow women to seek justice and demand accountability for their perpetrators. Refugee women might feel more comfortable sharing their stories with and being guarded by female military officers.

6. Conclusion

Due to a number of discriminating factors, encompassing gendered-norms, expectations on women's sexual behaviour, the high prevalence of SGBV, and heightened precariousness, women are still the ones suffering the most from precarious living conditions in the refugee camps. While some actions have already been taken by major international and non-governmental organisations, there is still room for improvements in addressing gender-specific needs related to access to healthcare services. Addressing a few specific steps will contribute to improving infrastructures and service provisions, and, in time, narrow the gender inequalities gap. The resolution that will be



discussed upon should lead to taking women's specific needs into account and including them at all stages of program planning and implementing.

7. Guiding questions

- (1) How can Member States ensure that emergency response and humanitarian programs include gender sensitive actions?
- (2) How can Member States incentivize women to organize among themselves to provide community-based responses and improve the quality of and access to services?
- (3) How can Member States foster gender-sensitive budgets for international aid programs in the refugee camps?
- (4) How can Member States foster capacity building through inter-agency and inter-organization discussions?



8. Further reading

8.1. Required

- United Nations General Assembly - Resolution adopted by the General assembly on 19 September 2016 - 71/1. *New York Declaration for Refugees and Migrants*. https://www.un.org/en/development/desa/population/migration/generalassembly/docs/globalcompact/A_RES_71_1.pdf
- Center for Women's peace and security (part IV specifically) - *Protecting women and girls in refugee camps - State's obligation under international law* - (2019). <http://www.lse.ac.uk/women-peace-security/assets/documents/2019/LSE-WPS-refugees-camp.pdf>
- Clinical practice - *Health care of refugee women*. (2007). <https://pdfs.semanticscholar.org/201d/1665a1b70c73b9d6dd3695d818478c9dbbec.pdf>
- PRB - *Improving Reproductive Health Services for forcibly displaced women* - 2013. <https://www.prb.org/refugee-women-reproductive-health/>

8.2. Optional

- UNHCR, *Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons, Guidelines for Prevention and Response*, May 2003. Accessed September 22, 2019. <https://www.unhcr.org/en-uk/protection/women/3f696bcc4/sexual-gender-based-violence-against-refugees-returnees-internally-displaced.html>
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- European Institute for Gender Equality, *Gender budgeting*. Accessed September 13, 2019. <https://eige.europa.eu/gender-mainstreaming/methods-tools/gender-budgeting>
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[releases-and-statements/3576-new-report-examines-reproductive-health-services-in-cox-s-bazar-contraceptive-and-menstrual-regulation-services-widely-available-in-refugee-camps](#)



Information about the Conference

1. Conference Schedule

HamMUN 2019 "Shaping a New Era of Diplomacy"				
November 27, 2019	November 28, 2019	November 29, 2019	November 30, 2019	December 1, 2019
Wed	Thurs	Fri	Sat	Sun
		Session II	Session IV	Session VI
	Registration	9:00 - 13:00	9:00 - 13:00	10:00 - 12:00
	10:00 - 14:30			Committee Debriefing 12:00 - 13:00
	Chair Briefing 12:30 - 13:45	RoP - Workshop 12:15 - 13:45	Lunch Break 13:00 - 14:00	Lunch Break 13:00 - 14:00
				Chair Debriefing 13:30 - 14:00
	Opening	Session III	Session V	Closing Ceremony 14:00 - 15:30
	Ceremony	14:00 - 18:00	14:00 - 18:00	
Pre-Program 16:00 - 19:00	15:30 - 17:30			
	Session I			
	18:00 - 20:00	Break	Break	
Get Together				
19:00	Committee Evening			
	20:00	Silent Disco	Delegate Ball	
		21:00	21:00	

Please note: This schedule is subject to change. For the most up-to-date schedule, please check: hammun.de/conference-schedule



2. Rules of Procedure

HamMUN 2019 session will follow the Rules of Procedure which can be found here: <http://hammun.de/rops/>.

For first time delegates we recommend participating in the *Rules of Procedure workshop* on Thursday.

3. Emergency Phone Numbers

Police: 110

Fire Brigade: 112

Casualty doctor: 112

4. Important Addresses

Conference venue: Edmund-Siemers-Allee 1, 20146 Hamburg (*and other places at Hamburg University main campus*)

Opening ceremony: Laeishalle, Kleiner Konzertsaal, Johannes-Brahms-Platz, 20355 Hamburg

Registration: Audimax Garderobe, Von-Melle-Park 4, 20146 Hamburg

Committee Evening: *Different places, your chairs will inform you*

Silent Disco: Club Hamburg, Reeperbahn 48, 20359 Hamburg

Delegate Ball: Gruenspan, Große Freiheit 58, 22767 Hamburg

5. Public Transport

During the conference, **your badge will be your ticket**. Please have your badge with you **all the time!** Public Transport in Hamburg will provide you with busses, tubes and city railroads.

Service Times:

Wednesday + Thursday: Service stops at **1 am**, afterwards you can only take night busses

Friday – Sunday: Whole night service

Stops near to conference venues:

Conference venue + Registration + Committee Evening:



(different places at Hamburg main campus)

S-Bahn Station **Dammtor**: Lines S11, S21, S31

Bus Station **Dammtor**: Line 109

Bus Station **Universität/Staatsbibliothek**: Lines 4, 5

Opening Ceremony:

Walking distance from Registration: 20 Minutes

Bus Station **Johannes-Brahms-Platz**: Line 3

Tube Station **Messehallen**: Line U2

Silent Disco (*Fridays Social*) + Delegates Ball (*Saturdays Social*):

S-Bahn Station **Reeperbahn**: Lines S1, S2, S3

Bus Station **Davidstraße**: Line 111

Tube Station **St. Pauli**: Line U3

6. HamMUN App

HamMUN is proud to offer a mobile app during the conference. You can get it on your phone by typing this URL <https://hammun.lineupr.com/2019> into your mobile browser.

Please note that the app is not to be installed via your app store but is a desktop shortcut of a mobile website!

7. Water Supply

In case you are thirsty (or sober), don't worry. Water out of the tap is perfectly drinkable!

8. Please bring cash!

Unlike in other European nations, many stores, cafeterias and especially the social venues often do not accept credit cards! Make sure to have cash with you.

