Australian Red Cross

Questions Taken on Notice: Inquiry into the Rights of Women and Children (response submitted on 4 July 2023, following the hearing on 7 June 2023)

Human Rights Subcommittee of the Joint Standing Committee on Foreign Affairs, Defence and Trade (JSCFADT)

Australian Red Cross (Red Cross) thanks the Human Rights Subcommittee of the Joint Standing Committee on Foreign Affairs, Defence and Trade (JSCFADT) for its invitation to participate in the hearing for the Inquiry into the Rights of Women and Children on 7 June 2023. Please find below responses to the following questions taken on notice at that hearing:

- 1. Would the international cluster approach be appropriate/applicable in Australia?
- 2. Please provide practical examples of applying an intersectional lens in practice and explain the difference it can make.
- 3. Does Australian Red Cross have a position on children in institutions?

Question 1: would the international cluster approach be appropriate/applicable in Australia?

Senator Linda Reynolds, Deputy Chair of the Subcommittee, asked Australian Red Cross whether we would suggest that the international cluster approach would be suitable to apply in Australia, and encouraged Australian Red Cross to make a submission on this point to the Select Committee on Australia's Disaster Resilience.

Australian Red Cross has already made a written submission to this inquiry (please see <u>Submission 56</u>). In particular, we draw the Subcommittee's attention to section 4 of that submission 'Considerations of an Alternative Model' and, in particular, the paragraph 'Need for increased streamlining and coordination within emergency management sector':

As we prepare for a future of more severe and more frequent disasters because of climate change, it is critical to ensure that the emergency management systems are as coordinated as possible, centred on the needs of individuals and communities, informed by evidence, and ensuring no one is left behind. Without a national system that records those who are affected by disasters and verifies the impacts they have suffered, people are forced to tell their stories multiple times and to multiple agencies, which can compound the trauma that people have already experienced. A number of the recommendations in the Royal Commission into National Natural Disaster Arrangements should be considered and implemented.

Whether or not clustering is the solution, there are some broad considerations that should be included in any conversation about the Australian disaster management landscape. There is a need to enhance coordination and be responsive to the strengths and needs of people who are affected by disasters. Whatever the system, the results should be collaboration and

coordination, clear delineation of responsibilities and, as a result, better humanitarian outcomes on the ground.

There is broad acknowledgement that the disaster management landscape in Australia must adapt. The changing climate, globalisation, reliance on technology all put Australia at risk to future disaster. Red Cross would emphasise the need for:

- o Increased focus on pre-disaster resilience building;
- Intentional improvement of the social infrastructure, in addition to hard disaster risk reduction measures,
- Increased resourcing for community-led initiatives; and
- Reduction of systems that duplicate services, drive competition over collaboration and retraumatise people by making them tell their stories over and over.

Many organisations, including Australian Red Cross, are open to such changes. In 2021, the Humanitarian Advisory Group completed a scoping study on behalf of Australian Red Cross which found that there is significant appetite across the sector for this kind of change. This report can be shared with Subcommittee members if desired.

If Australia were to adopt the clustering approach, it would need to be adapted to the Australian context and meaningfully embed psychosocial wellbeing and social connection infrastructure into its framework. While psychosocial wellbeing may be considered part of a health cluster, it is so critical to disaster recovery and resilience that it should stand on its own and be considered as part of all clusters.

Finally, members of our team have worked with Dr Daniel McAvoy from Deakin University whose area of research is disaster management in Australia and particularly looks at if we should apply clustering here. The Subcommittee may be interested to speak to him directly.

Question 2: please provide practical examples of applying an intersectional lens in practice and explain the difference it can make.

The Importance of the Application of an Intersectional Lens and its History in Humanitarian Practice

As outlined in our written submission, an intersectional approach is a perspective which emphasises that individuals experience multiple and overlapping layers in their identities such as gender identity, ethnic origin, nationality or citizenship, age, disability, language, political opinions, religious beliefs, social background, sexual orientation, physical appearance, colour and racialised identity.¹ These layers can increase susceptibility to discrimination, exclusion, marginalisation and safety risks. Applying an intersectional lens therefore seeks to understand the compounding impacts on an individual and plan for practical ways to prevent and address these impacts.

Humanitarian organisations have been seeking to provide support without discrimination and by prioritising the most urgent cases of need for more than a century. In terms of the International

¹ International Federation of Red Cross and Red Crescent Societies (IFRC) (2022). <u>Protection, Gender</u> <u>and Inclusion Policy</u>. Page 6.

Red Cross and Red Crescent Movement, as a matter of practice and tradition, the Fundamental Principles – which include the Principles of Humanity and Impartiality which prioritise the most urgent cases of need without discrimination – date back to the creation of the Movement in 1863.² The application of an intersectional lens is a more recent approach. It occurs mostly via the process of protection mainstreaming which seeks to ensure that humanitarian support does not cause unintended harm and that all people can safely access support which is dignified, relevant and appropriate for them.³

A more formalized approach to the practice of protection mainstreaming dates back to the 1990s and continues to be refined and improved as an iterative process. Across the humanitarian sector at large, the Sphere Project initiated in 1997 by a group of global humanitarian agencies including the International Red Cross and Red Crescent Movement adopted the Sphere Handbook Humanitarian Charter and Minimum Standards in Disaster Response⁴ in 2000 which aimed to improve the quality of humanitarian action during disasters. This was revised in 2004 and then again in 2011⁵ crucially including four protection principles of avoiding causing harm, ensuring access to impartial assistance, protecting people from violence, and ensure people can access remedies. In 2014, the Core Humanitarian Standard was developed as a common reference point for the sector as a whole on quality of humanitarian assistance and accountability to communities.⁶ The most recent 2018 edition of the Standards⁷ includes the chapter 'Sphere Protection Principles' which codifies four protection principles which all humanitarian actors must comply with (enhancing safety, dignity and rights of people and avoiding exposure to harm; ensuring access to assistance according to need and without discrimination; assist people to recover from physical and psychological effects of violence, coercion and deprivation; and help people to claim their rights).

A key milestone that helped this work to become more intentional was the adoption of the Inter-Agency Standing Committee Policy on Protection in 2016. The policy strongly emphasised the collective responsibility of all humanitarian actors in conducting protection mainstreaming (as opposed to specialist protection actors alone) and indicated that the reduction of risks of violence, coercion and other related discrimination need to be outcomes in and of themselves.⁸ While the adoption of this policy has been found to have had an impact on shifting the

² Their codified form was proclaimed at the 20th International Conference of the Red Cross in Vienna in 1965 and adopted into the Movement's revised statutes at the 25th International Conference of Red Cross in 1986. See Jean Pictet, *The Fundamental Principles of the Red Cross: Commentary*, (1979).
³ In terms of the International Red Cross and Red Crescent Movement, as a matter of practice and tradition, the <u>Fundamental Principles</u> – which include the Principles of Humanity and Impartiality which prioritise the most urgent cases of need without discrimination – date back to the creation of the Movement in 1863. Their codified form was proclaimed at the 20th International Conference of the Red Cross in Vienna in 1965 and adopted into the Movement's revised statutes at the 25th International Conference of the Red Cross in Vienna in 1986. See Jean Pictet, *The Fundamental Principles of the Red Cross: Commentary*, (1979).

⁴ <u>Humanitarian Charter and Minimum Standards in Disaster Response.</u>

⁵ Ibid.

⁶ CHS Alliance, <u>Core Humanitarian Standard on Quality and Accountability</u>.

⁷ Sphere Handbook: Humanitarian Charter and Minimum Standards in Humanitarian Response.

⁸ Inter-Agency Standing Committee (IASC), '<u>Independent Review of the Implementation of the IASC</u> <u>Protection Policy</u>' (2022).

humanitarian sector's ways of working, more investment and building on existing good practice is required.⁹

Recommendations to the Subcommittee

In the context of this Inquiry, Australian Red Cross recommends that the Subcommittee apply an intersectional lens to its analysis of the experiences of women and children. By this we mean that any policies or documents that are created as a result of this Inquiry should also apply this lens. In terms actions relating to the findings of the Subcommittee which could apply an intersectional lens in practice, it could for example (noting the broad scope of the terms of reference):

- Ensure that any laws, policies and guidelines supported by the Australian Government require all actors to apply an intersectional lens in order to prevent and respond to increased and compounding risks of marginalisation, violence and exclusion for women and children. This can be done by engaging in a meaningful way with a variety of groups who may experience marginalisation in relation to the proposed laws, policies and guidelines during their development, and by requiring agencies implementing those laws, policies and guidelines to do the same in practice.¹⁰
- Ensure that any funding directed to projects supporting women and children requires an intersectional lens be applied to ensure that women and children within the scope of those projects who face increased risk of marginalisation, safety risks and discrimination are prioritised and supported.
- In the Government's work which seeks to enhance and promote respect for international law, in particular international humanitarian law, human rights law and refugee law, advocate for the inclusion of robust commitments and action on gender equality and broader protection issues. Similarly, seek to strengthen implementation of the protections for women articulated in international human rights law to ensure that relevant disaster risk management laws are gender-sensitive and provide robust measures to prevent and address sexual and gender-based violence in emergencies and support other governments to do the same.

Building on the explanation provided in our written submission on what an intersectional approach is and why it is important, in the following section we seek to expand in more practical terms on what this work looks like in practice in the context of Australian Red Cross' humanitarian work.

Applying an Intersectional Lens in Australian Red Cross' Work Internationally

Australian Red Cross has a five-year (2019-2024) \$50 million humanitarian Partnership Agreement with the Australian Government Department of Foreign Affairs and Trade. Our work focuses on supporting a shift towards localised humanitarian action: that is, decision-making is led by our partners on the ground and supports work with local communities, authorities and stakeholders. While Australian Red Cross provides funding and technical support to our

⁹ Ibid.

¹⁰ See, for example, the references to intersectionality in the Framework of Target Actions in the <u>ASEAN</u> Regional Framework on Protection, Gender, and Inclusion in Disaster Management 2021-2015. Page 12.

partners as appropriate and as required, the work is implemented at the local level and directly by our partners rather than by us.

Through the protection, gender and inclusion (PGI) approach, Australian Red Cross provides funding and technical support to our partners to apply an intersectional lens to their disaster and crisis preparedness, early/anticipatory action, response and recovery work. This aims to ensure there is intentional planning for the needs of those who may face marginalisation, a lack of access to services, and safety issues. In practice, this can include work such as:

- Embedding PGI in national societies' strategic plans and disaster risk management plans;
- Collecting sex, age and disability disaggregated data during needs assessments to ensure that support can be tailored to the specific needs of different groups;
- Conducting training on PGI in emergencies;
- Enhacing policies and processes related to protection and prevention of sexual exploitation, abuse and harassment (PSEAH);
- Conducting training on sexual and gender-based violence in emergencies and establishing strong referral pathways to organisations that can provide specialized support and care;
- Forming partnerships with local organisations such as women's shelters, organisations for persons with disabilities, local support organisations for people of diverse sexual orientations, gender identities and expressions and sex characteristics, and relevant government departments; and
- Attending coordination meetings with other protection actors to ensure work is complementary and to better understand the occurrence of violence, exclusion and discrimination in the context.

The following case studies from Fiji and Timor-Leste seek to illustrate this work in more practical terms.

Applying an Intersectional Lens to Disaster Laws in Fiji

The International Federation of Red Cross and Red Crescent Societies (IFRC – the Secretariat for all 192 Red Cross and Red Crescent Societies globally) has worked with Red Cross and Red Crescent National Societies and governmental authorities for over a decade to ensure that laws and policies relating to disasters and climate change consider the needs of the most vulnerable people. The IFRC Disaster Law Program has developed comprehensive recommendations on the protection and inclusion of vulnerable groups in domestic disaster management legislation and has codified this advice in the Checklist on Law and Disaster Preparedness and Response.¹¹

Australian Red Cross has invested in IFRC's International Disaster Response Law program as a part of our humanitarian partnership with the Department of Foreign Affairs and Trade. Through the program, the IFRC has applied an intersectional lens to this body of work by ensuring that disaster laws and policies manage and reduce risks, and enable the resilience of people who may be most at risk during disasters such as people of different gender identities and

¹¹ IFRC, '<u>Checklist on Law and Disaster Preparedness and Response</u>' (2019).

expressions, ages, abilities, sexual orientations, health statuses, social statuses, and ethnicities.¹² This can include ensuring that:

- There are provisions in relevant laws and policies which require equality and nondiscrimination;
- Disaster-related legislation, policies and procedures are gender- and diversity-sensitive, require collection of sex, age and disability disaggregated data, and provide accessibility information in different languages, formats and via different communication channels;
- The needs of communities at risk of forced displacement are anticipated and supported; and
- Government agencies and officials consult with a wide range of community representatives including with groups which face particular marginalisation.¹³

In 2017 in the wake of Tropical Cyclone Winston which killed 44 people and impacted 40 percent of the population, the Government of Fiji requested the IFRC and Fiji Red Cross Society's support to review its National Disaster Risk Management Law and National Disaster Risk Management Plan. As a part of this process, consultations were held with local community groups including women's groups, disability organisations and youth groups. These consultations meant that protection issues faced by members of those groups could be meaningfully addressed in the draft legislation, including a specific focus on child protection issues.¹⁴ The draft legislation is currently with the Fijian parliament.

Timor-Leste Red Cross Response to Cyclone Seroja in 2021

One of Australian Red Cross' partners is the Timor-Leste Red Cross (Cruz Vermelha de Timor-Leste or CVTL). Cyclone Seroja made landfall in Timor-Leste on 4 April 2021. The significant rainfall resulted in substantial flooding leaving many displaced. CVTL mobilised 23 staff and 74 volunteers to support 30,367 households and 151,835 people affected by the floods across 53 evacuation centres. The focus of the response was on provision of emergency food, water and sanitation and household items. However, the CVTL disaster response team identified that there were significant needs which were not being addressed. During the emergency response phase, the disaster response team approached Australian Red Cross seeking technical support and advice. The Australian Red Cross PGI team provided real-time coaching on how to understand and respond to protection issues during the response.

CVTL collected sex, age and disability disaggregated data during the response. This allowed identification of the needs of persons with disabilities, pregnant and breastfeeding mothers, and adapting the response work to cater to these. CVTL distributed kits which included items such as sanitary napkins and rechargeable lights in the evacuation centres it was managing and delivered kits for women and babies to affected communities. CVTL also worked to coordinate with other protection actors working on the response, including UN Women.

CVTL's work during Cyclone Seroja cemented a new commitment to applying an intersectional lens within its emergency preparedness and response work by adopting the PGI approach.

¹² See, for example, IFRC, 'Protection, Gender, Inclusion and Disaster Law (Snapshot)' (2018).

¹³ Ibid.

¹⁴ IFRC, 'Evaluation of the IFRC's Disaster Law Program' (2020). Pages 65-68.

Question 3: does Australian Red Cross have a position on children in congregate care or institutions in disasters?

Australian Red Cross is a child safe organisation. We have zero tolerance for child abuse. We value, respect and listen to children and are committed to supporting child safety and wellbeing in our work.¹⁵

Australian Red Cross has been a longstanding and active member of the Australian Council for International Development (ACFID) whose purpose is to '… lead and unite its members in action for a just, equitable and sustainable world'. ACFID's Code of Conduct is a voluntary, selfregulatory industry code of good practice which Australian Red Cross is committed to and actively embeds in our work. The Code aims to improve the outcomes of international development and increase stakeholder trust by enhancing the transparency and accountability of signatory organisations. It includes a separate but linked Quality Assurance Framework, Good Practice Toolkit and compliance responsibilities for members. Australian Red Cross representatives sit on several working groups including those for safeguarding and prevention of sexual exploitation, abuse and harassment (PSEAH).

Australian Red Cross notes and supports standard 19 of the Minimum Standards for Child Protection in Humanitarian Action¹⁶ which requires that 'All children without protective and suitable care receive alternative care according to their rights, specific needs, wishes and best interests, prioritising family-based care and stable care arrangements'.

¹⁵ Australian Red Cross, 'Safeguarding: protecting children and adults engaged with Red Cross'.

¹⁶ The Alliance for Child Protection in Humanitarian Action, '<u>Minimum Standards for Child Protection in</u> <u>Humanitarian Action</u>' (2019).