Gender-Based Violence Working Group

LEBANON

Dignity Kits | Guidance Note

JUNE 2025

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1.Introduction and background on the Dignity kits Guidance Note

This guidance note aims to guide partners of the Gender-based Violence (GBV) sub-sector in Lebanon as well as other protection and sectoral actors with a strategic framework on the linkages between prevention and response activities implemented under the GBV Working Group (GBV WG) and the distribution of dignity kits for women and girls of reproductive age.

Gender Based Violence is an umbrella term for any harmful act that is perpetrated against a person's will and that is based on socially ascribed (i.e. gender) differences between males and females. Worldwide, women and girls face increasing disadvantages regarding social power and influence, control of resources, their bodies, and participation in public life. In humanitarian emergencies, the risk of violence, exploitation, and abuse is heightened, especially for women and girls, mainly because these gender inequalities and power dynamics are exacerbated, national systems, community, and social support networks tend to weaken, and there is an elevated environment of impunity that contributes to a lack of accountability for perpetrators.[1]

Over the last few years, and particularly during 2024, Lebanon has faced a series of crises that have strained the country's social, economic, financial, and environmental stability.[2] The escalation of hostilities along Lebanon's southern border and the expansion of conflict and displacement to other areas of the country exacerbated existing challenges and humanitarian needs of the different population groups requiring humanitarian aid. Lebanon has been grappling with unprecedented, compounded crises of multilayered nature, including severe economic crises and deflation of the Lebanese currency and sociopolitical instability. Lebanon's socio-cultural context is shaped by entrenched patriarchal values and a legal system that has persistently fallen short in protecting the rights of women and girls.

These humanitarian emergencies massively increase existing vulnerabilities and place individuals at higher risk of experiencing all forms of GBV.

In addition, following a humanitarian emergency, lifesaving services might have been disrupted, preventing survivors of GBV from accessing key information and from being referred to specialized protection and support services. In such a situation, women and girls often struggle to meet essential material needs including menstrual health and hygiene items. The situation further exacerbates if the distribution of dignity kits is not done effectively for vulnerable women and girls during the crisis. This note provides guidance for partners in Lebanon to ensure:

- an adequate, effective and harmonized distribution of dignity kits to women and girls to support their essential needs
- sets standards of distribution of vulnerable women and adolescent girls but also enables the partners to strategize the dignity kits for GBV prevention and response. It also enables the engagement of men and boys in GBV prevention, effective monitoring and reporting, and promote

"Do No Harm" principle and dignity and autonomy of women. To meet these goals, GBV WG has established a guidance note for distributing and standardizing dignity kits based on cultural sensitivity and localization approach.

Dignity kits (DKs) are items specifically distributed to women and girls, and not to the whole households nor to the men and boys. DKs provide the essential material needs that women and girls often struggle with in order to enhance their safety, maintain dignity, facilitate basic hygiene, and enable access to humanitarian settings.[3]

The GBV Working Group (WG) Lebanon developed this guidance note to support best practices and facilitate a standardized but context-specific approach to developing and distributing dignity kits. It is based on input from and experiences of GBV WG members and field-based partners in different locations of Lebanon. Moreover, the guidance note is developed based on: *UNFPA Dignity kit Programming Guidelines 2012*,[4] *Beyond Basic Needs: Understanding the Role and Difference of Dignity kits and Hygiene Kits in Humanitarian Assistance.*[5]

[1] *IASCGuidelines for IntegratingGender-Based ViolenceInterventionsin HumanitarianAction, 2015*
[2] *Human Rights Watch (2015)Unequal and Unprotected:Women'sRights under Lebanese PersonalStatusLaws."*
[3] *Beyond Basic Needs: Understandingthe Role andDifferenceofDignity kits and HygieneKits inHumanitarianAssistance*
[4] *UNFPA Basic Dignity Kit*
[5] *ibd*

2. How Dignity kits Support Women and Girls during a humanitarian crisis?

Dignity kits help enhance women's and girls' safety, health, and comfort in the following ways:

- **Provides information** about hygiene, reproductive health, GBV related issues, and services through the inclusion of health and protection information (such as leaflets, etc.).
- **Improves the mobility** of women and girls by providing specific sanitary items and clothing items they may need to feel comfortable to go out in public and even accessing humanitarian assistance. Such items contribute to women and girls' resilience and survival during times of crisis.
- **Contributes to psychosocial and physical wellbeing** of women and girls, by including items such as sanitary pads, which help women and girls maintain their personal hygiene and feel comfortable in situations that are not normal for them.
- **Contributes to the protection of women and girls,** by including items such as flashlights and whistles, so that women and girls do not have to walk in the dark and feel that they can call for assistance if needed.
- **Reduces economic pressure by providing dignity kits free of charge** and contributes to women being able to buy other necessary items, such as food and reduces 'period poverty' concerns and,
- **Allows budget substitution** for families to purchase important items, such as food.

In line with global GBV guidelines[6] in Lebanon dignity kits can be used in the context of GBV programming in several ways, including:

- As an **entry point to begin** working with women to identify the GBV risks in the community and to advance GBV prevention and response programs.
- **To raise awareness** during distribution, encouraging communities to engage in discussions on important topics such as preventing and responding to GBV.
- **To share information** on where women can access GBV services. In particular, the distribution of dignity kits can be focused on reaching women at risk: GBV survivors, pregnant and lactating women, women head of household, women and girls with disabilities, women and girls living in remote areas.
- **To extend additional support to GBV survivors** if the distribution is carried out in collaboration with GBV service providers.
- To enhance **income-generating activities** for women affected by the crisis by engaging them in the assembly of dignity kits. In addition to the important economic support, bringing affected women together for kit assembly also presents opportunities to organize awareness-raising sessions, educational chats, or group counselling sessions.

3. Coordination of the Distribution of Dignity kits

To avoid duplication of menstrual health services and to maximize the impact, prioritizing the most vulnerable women and girls across sectors through intersectoral collaboration and coordination is required. Partners should also ensure adherence to the standard package and quality standards and to mitigate negative impacts on the supply chain and markets. All organisations should coordinate with the national and subnational coordination structures and share information on the location, identification of the target population and figures (planned and completed) distribution data. For actors providing both hygiene and dignity kits and covering areas where other actors are providing hygiene kits, coordination on the kits' contents should be discussed to avoid duplication of materials and ensure coverage of essential female sanitary items. The Basic Assistance, Water, Sanitation and Hygiene (WASH), and other sectors providing support to hygiene and basic needs should regularly be provided with information about dignity kit distributions to monitor needs and targets. The GBV WG, in coordination with partners, shall put in place monitoring and information management protocols to compile dignity kit data, ensure best practices, and share lessons learned with the members of the working group.[7]

The GBV WG team should share available needs assessment data with all partners to avoid duplicative assessments.

The GBV WG team is also responsible for using this data and partner feedback to plan for and advocate for dignity kit resource mobilization as part of humanitarian funding processes. GBV WG chairs can guide partners planning to distribute dignity kits and facilitate context-specific training sessions to help staff and volunteers plan for and deliver the dignity kits to the affected communities.

3.1 Always keep in mind the principle of 'do no harm'

It is essential that organisations liaise with the GBV WG about their plans to distribute dignity kits, coordinate the location and identification of the target population and share precise (planned and completed) distribution data. A GBV WG regularly compiles a Dignity kit Tracking Sheet. This tool allows for disaggregated data analysis for programme accountability and improvement. Always keep in mind the principle of 'do no harm'. Dignity kits entail distributing items to a small number of people. Potential risks should be assessed, and all measures should be taken to eliminate them. It is important to ensure that humanitarian interventions and the environments in which these are provided do not further expose people to physical hazards, violence or human rights abuses. It is also essential to have a clear prioritization framework when selecting beneficiaries if this can be done safely and transparently.

[6] *See Interagency Minimum Standards for GBV in Emergencies programming.*
[7] *See Annex 2 for the preparedness assessment and Annex 4 for Post - distribution monitoring tool*

4. Programmatic considerations

4.1 Decision Tree for Dignity kits Programming

GBV WG partners in Lebanon, will use the following decision tree to help organizations, identify the program design and implementation hat best suits their capacities and context.

1. Can Dignity kits be used as a strategic entry point for humanitarian programming? Such as opportunities for information and sensitization, links to GBV and other services through referral, and encourage participation by affected communities. **IF YES**
2. Can the Dignity kits programme be coordinated with appropriate partners? Such as other service providers and actors. **IF YES**
3. Can DK be procured in a timely manner? Consider funding availability, human resources, and storage/distribution. **IF YES**
4. Launch/Design DK as a GBV Programme

If the above scenarios are **NOT** possible, **ADVOCATE** for the inclusion of culturally appropriate personal and menstrual hygiene items as part of Core Relief Items (CRI) distribution among Sectors and NGOs.

4.2. Organisational Preparedness Assessment

An organization considering procurement of dignity kits to support GBV programming should first assess its capacities to store the kits effectively, possibly coordinate with the GBV WG, distribute the kits safely and appropriately, and provide pre and post monitoring feedback. The following aspects should be taken into consideration before procuring the kits or receiving the kits from a donor entity:

- Availability of basic GBV services in the organisation's operational area to ensure linkages between kits and services
- Availability of storage place.
- Capacity to ensure transportation of the kits from the storage site to the distribution site.
- Capacity to ensure distribution respecting distribution principles (including the availability of female staff able to explain how to use the kits and provide information on services available)
- Capacity to ensure post distribution focus group discussion and provide feedback[8]

4.3. Needs Assessment

If the organisation has the potential preparedness to integrate dignity kits into GBV programming approaches, it should determine if there are unmet needs that it may be able to fill with a specific dignity kit intervention. An indispensable step in selecting the appropriate modality for dignity kit distribution is to assess the needs of women and adolescent girls in host and IDP sites. Wherever possible, information from multi-sector needs assessments and other data sources (e.g. GBV safety audits, Protection monitoring, WASH assessments, multi sectoral need assessment(MSNA), Displacement tracing matrix(DTM), etc.) should be compiled and used to evaluate needs and plan. Partners should also consult the GBV WG to find out if there are areas or volumes that are specifically needed to implement the GBV WG's planned response. If broader needs assessment and appropriate demographic data are unavailable, pre-distribution focus group discussions (FGD) should help assess the needs of women and girls in specific areas and help understand how to organize the distribution and select beneficiaries.[9]

4.4. Dignity kits content

To identify relevant, appropriate contents of dignity kits, organizations should consider the following basic parameters: ***relevance of the items, cultural sensitivity, context, environment, quantity, frequency of distribution, and price.*** For areas within ongoing conflict, the security situation is ever changing, it may be helpful to involve female security staff in reviewing and approving the contents of the dignity kits. Checking the final contents of the kits is also very important. In the experience of organizations working in this context, this has helped prevent problems.

The appropriate items should be identified in consultation with affected women and girls. Specific items can be included to address cultural needs or protection concerns. Valuable items could include ministerial Health, Essential clothing items, personal hygiene, and safety items. Assessments and consultation with affected people should be the main source of information for defining the kits' contents.

Table 1: The below list is a recommended list of standard items that should be included in the Dignity kit in Lebanon. The list of essential Dignity kit items that can last three months contains the following items. GBV WG members endorsed these items in March 2025

No	Description of Materials/ Services	Unit of Measure	Quantity
1	Menstrual pads (with wings, unscented, long)	Packet	3
2	Underwear (cotton, dark color, full brief)	Pairs	3
4	Shampoo	ML	700
5	Toothbrush	Pieces	3
6	Toothpaste	Tubes	3
7	Hand Torch (solar charge)	piece	1
8	Whistle	Piece	1
9	Emergency card with PSEA and other compliant reporting contact numbers such as Hotlines	Piece	1
10	Packing Bag: Organizations are encouraged that a plastic or fabric bag or bucket with the logo of the GBV actor and donor be used. It must be large enough to accommodate all items easily.	Piece	1

Additional items to be considered: sponge, loofah, razors, deodorant, hairbrush or comb, nail clipper, tweezers. This will be confirmed by partners and consulted by GBV WG Co chairs.

[8] *Please refer to Annex 2 for the Preparedness and Planning Checklist.*
[9] *Please refer to Sample FGD questions in Annex 1*

This content may vary over time according to the needs and feedback of the affected population. The GBV WG will review the contents of the kits based on post-distribution monitoring conducted by organizations. For actors providing both hygiene and dignity kits and who are covering areas where other actors are providing hygiene kits, coordination on the contents of kits should be discussed so as to avoid duplication of materials and to ensure coverage of essential female sanitary items. The WASH and Shelter sectors should be provided with information about Dignity kit distributions regularly and coordinated as needed.

4.4.1. Vulnerability Criteria – Dignity kits Distribution

The GBV WG, in collaboration with members, developed the following vulnerability/selection criteria for Dignity kit distribution:

1.At risk women and Adolescent girls: GBV partners will be responsible for providing Dignity kits to survivors and those at risk of GBV. GBV partners should have a supply of Dignity kits to enable confidential and timely provision.
2.Adolescent girls: The GBV and Child Protection Working Groups and their partners are encouraged to link the distribution of Dignity kits and supplies to interventions targeting adolescent girls. This includes women and girl safe spaces (WGSS), including unaccompanied, adolescent girls in alternative care, as well as adolescent girls reached through MHPSS, WASH and Education activities.
3.Women and girls with disabilities, Female Headed Households, Older Women, Pregnant Women: All partners of WASH, Protection, Health, and Shelter Working Groups are encouraged to identify women and girls with special needs, including those who are unable to join queues at distribution points to ensure that they receive.
4. Any other women of reproductive age from marginalized and minority groups, including transwomen, migrant domestic workers, widowed or abandoned women.

4.4.2. Procurement, Transportation and Storage

A. Local Procurement in Emergency Context

When possible, local procurement is preferred. An assessment should be made of the availability and reliability of local capability before sourcing from outside Lebanon. Reputable local or regional transporters and freight forwarders have valuable knowledge of local regulations, procedures, and facilities and can help to ensure compliance with the laws of the host country and expedite deliveries.

In an emergency condition like conflict, the vetting of service providers should be especially rigorous. Care needs to be taken to ensure that sourcing locally does not cause or exacerbate hostilities and do more harm to the community. Transparent contracting procedures are essential to avoid suspicion of favouritism or corruption. To maintain an audit trail, sufficient procurement documentation and forms (waybills, stock ledgers, reporting forms, etc.) should be available at all locations where goods are received, stored, and dispatched.

When considering dignity kit assembly as a potential income-generating activity for women, it is important to look at whether all materials are available locally and whether the organization has the capability and capacity for supply chain and distribution management.

B. Storage

When selecting a warehouse for the storage of dignity kits, consider the following factors: security, capacity, ease of access, structural solidity, and absence of any direct threats. In some areas, it might be challenging to keep stock, including dignity kits, for any period of time due to the security risks. When selecting storage for dignity kits, attention should be given to:

- **Location:** Ensure appropriate road access for the largest vehicles that may need to come to the warehouse. Avoid warehouses situated on low-lying land.
- **Accessibility:** If possible, locate the warehouse in a place where the kits can be easily received and distributed.
- **Security:** In many situations, security guards are employed to reduce looting or theft.
- **Capacity/space:** Warehouse facilities must have sufficient capacity for both storage and handling.

C. Culturally Appropriate and Context Specific Items

Examples of culturally appropriate items, identified based on focus group discussions with affected women and girls, are important for women. Context-specific protection items may include solar powered torches or flashlights in the absence of electricity. The risk of sexual violence incidents happening heightens at night, mainly because of inadequate lighting within the collective shelters or camps. Culturally adapted dignity kits may also mean not including certain items (which can be identified through needs assessment, and periodic safety audits),

D. Environmental Considerations

When choosing dignity kit contents, keep environmental considerations in mind. Avoid unnecessary waste (e.g., plastic wrappers). Consider including solar-powered flashlights (torches) rather than battery-powered; batteries will run out quickly, or rechargeable batteries, because electricity may not be available. If batteries are supplied, consider how they can be disposed of safely.

4.4.3 Distribution Standards and Principles

An organisation should meet at least three basic conditions before undertaking any intervention, including dignity kits.

- Dignity kits should always be distributed as **part of an integrated, coordinated response.**
- Dignity kits should be procured and distributed in a **timely manner,** as determined by the exigencies of the emergency.
- Dignity kit provision must serve as **an entry point** for broader protection and health programming, Gender Based Violence (GBV), and/or psychosocial support for women and girls.
- Dignity kit distribution should be understood as distinct from and not a replacement for CRI distributions. Therefore, and in contrast to the hygiene items of other sectors, **the distribution of dignity kits cannot be a standalone activity for GBV or other sector actors**. Discussions, information sharing, and awareness raising on GBV, PSEA and other protection services must accompany it. The distribution of kits provides an opportunity to meet and speak to women and girls, share information, and better understand their concerns.

However, dignity kits may be distributed alongside other relief items, household kits, food, and other CRI. For instance, information on critical issues can be shared before distribution, such as where/how to access humanitarian services and information on reproductive health, legal rights, childcare, hygiene, and GBV. The distribution also presents an opportunity to raise awareness on hygiene issues, such as how and where to wash or dispose of menstrual items, and explain each item in the kit. Dignity kits entail distributing items to a small number of people. Potential risks should be assessed, and all measures should be taken to eliminate them. It is important to ensure that humanitarian interventions and the environments in which these are provided do not further expose people to physical hazards, violence, or human rights abuses. A clear prioritization framework when selecting beneficiaries is also essential if this can be done safely and transparently. Receiving a dignity kit can be very embarrassing for some women and girls, especially in conservative or remote rural communities. Therefore, some women may be hesitant to collect dignity kits. When organizing distribution, consider potential safety and security risks, specifically GBV-related risks, and seek to devise ways to address these.

4.4.4 Standards to ensure distributions are safe for women and girls

There are several ways in which organizations distributing dignity kits can ensure that distribution is safe and appropriate and that the kits go to targeted women and girls:

- Involve women in the process of selecting the distribution points and dates, providing information prior to the distribution (what, when, where, how) so women and girls can plan to collect their dignity kit safely and discreetly.
- Organize the distribution in a discreet place, by women staff to women/ girls', usually preferred.
- If other distributions are taking place at the same time (food, shelter, etc.) designate a separate space for dignity kits.
- Avoid locations a long way away from shelters, as these may increase GBV risks.
- Encourage women to create collectives to stay together during the kit collection journey.
- Consider using female or male porters.
- Sensitize any male volunteers who need to stay out of women-only spaces and ask them to assist in creating safe entry and exit points for women and girls.
- Consider if the distribution time allows women to return home before dark.
- Audit dignity kit distribution as part of safety audits, if trained staff are available, select a security focal point for the distribution.
- Prepare the activity tools (distribution list, pre and post activity survey etc.) to ensure attention to gathering disaggregated age and gender data.
- Ensure the distribution personnel know the referral pathways and services available so that they can provide information and assist GBV survivors if necessary.
- Ensure there are special lines for pregnant women and girls, individuals living with disabilities, and the elderly. Distributions for these persons can be done at a different time, and/or volunteers can bring the kits directly to them – it all depends on how they feel more comfortable.

4.4.5 Dignity kit Messages

When distributing dignity kits, ensure to include key messages. These messages may include additional information on various contents of the dignity kit, 'handling, and disposal the importance of organizing distribution', and consider potential safety and security risks, specifically, information about Gender based violence, PSEA, referral mechanisms, services availability and importance of seeking services within 72 hours among other messages as the context in collaboration with the different sectors may deem necessary. Below is a Dignity kit message insert prepared by the GBV WG. Also, SEA leaflets are available here.

[10] *https://www.unfpa.org/resources/unfpa-basic-dignity-kit*

Figure 1: Below is a recommended sample of the Dignity Kit message.[10]

Gender-Based Violence (GBV) refers to any harmful act inflicted upon an individual against their will, rooted in socially constructed differences between males and females. GBV encompasses a range of actions that cause physical, sexual, or psychological harm or suffering, including threats, coercion, and various forms of deprivation of liberty affecting women, girls, boys, and men. Such acts can occur in both public and private settings.

WHAT CAN I DO IF GBV HAPPENS TO ME OR IF SOMEONE DISCLOSES TO ME

- **Come to a nearby WGSS or health facility within 3 days:** The risk of HIV can be reduced if HIV post-exposure prophylaxis for **Prevention of HIV is received within 72 hours.**
- **Come to a nearby WGSS or health facility within 5 days:** The risk of unwanted pregnancy can be reduced if emergency contraception for **Prevention of Pregnancy is received within 120 hours.**
- **Come to a nearby WGSS or health facility as soon as possible, within 2 days:** Should the survivor request evidence collection for legal purposes, medical examination may be arranged and recorded for **Evidence Collection within 48 hours.**

Remember

You can also ask a humanitarian worker you trust for up-to date and accurate information about support and services available near you.

All information provided, are and should be treated confidentially.

It is prohibited for humanitarian workers to have sex with people under the age of 18.

If you hear this happening in your community report it to a humanitarian worker, you trust.

- All assistance provided by humanitarian organization is based on need and is **free of charge for everyone, including women, men, girls , boys, the elderly, and persons with disabilities.**
- **HELP PREVENT SEXUAL EXPLOITATION AND ABUSE (PSEA)**: If you feel you have been discriminated upon or you have been asked by someone working in a humanitarian organization (Officials, activists and volunteers, drivers, security personnel, food distributors, health workers, social workers, or technicians) to do something inappropriate, demand any kind of favour or sexual favour from you in return for their help, **please report to an organization or authority you trust.**

4.4.6 Post-distribution Monitoring and Feedback from women and girls

Pre and post assessments, as well as monitoring and evaluation efforts put in place alongside the distribution of Dignity kits, will inform future programmatic interventions and contribute to their improvement by analyzing and sharing lessons learned. Above all, this will contribute to ensuring your interventions positively impact the lives of affected women and girls and contribute to their safety and wellbeing, which ultimately is the purpose of these items.

It is a best practice to conduct post distribution focus group discussions with women and girls **1-3 months** after receiving the dignity kits to assess or evaluate the effectiveness in the lives of vulnerable women and girls of reproductive age. In line with global standards, it is recommended that approximately **5-10%** of the women and girls receiving the kits should be involved in the post distribution FGDs.

[10] *https://www.unfpa.org/resources/unfpa-basic-dignity-kit*

ANNEX I:
SAMPLE QUESTIONS TO GUIDE THE FGDs — Post-distribution Monitoring

1. Were the contents of dignity kits appropriate and culturally sensitive?
2. Who received dignity kits, and how were the women and girls selected?
3. Were dignity kits delivered on time to serve their purpose?
4. Do you feel the dignity kits helped meet women's hygiene needs?
5. Do you feel that the kits helped restore women's dignity?
6. Was the distribution of the kits organized effectively? If not, how would you suggest to reorganize the distribution in the future?
7. Do women and girls receive information on how to use the kits?
8. Do women and girls receive information or other GBV/women empowerment services during the distribution?
9. Were women able to access other services as a result of using items in the kits?

Organizations distributing the kits should collect the FGD results and share them with the GBV Coordinator for review within one month of distributing the kits.

ANNEX II: SAMPLE PREPAREDNESS AND PLANNING CHECKLIST

This checklist outlines the minimum requirements that should be in place in the preparedness stage and when you are planning to conduct distributions of Dignity kits. Please do not proceed with the distribution until you can check "**yes**" to all requirements or have at least an alternative plan you have discussed with and agreed upon with the GBV Coordination Mechanism.

SN	Organisational Preparedness	Yes	No	I don't know
1.1	Will the Dignity kits distribution support a specific GBV programming intervention? Please explain.			
1.2	Does your organization have the procurement capacity to comply with the guidelines for kit contents? (If the answer is no, there is a possibility that GBV WG partners may be able to help or that your organization can partner with another one to ensure all contents adhere to the guidelines.			
1.3	Does your organization have adequate storage space for the kits (or an official agreement with a storage facility), and for how long?			
1.4	Does your organization have transportation and distribution systems for the kits? (This includes transporting the kits to the storage facilities and from the storage facilities to the distribution sites)			
1.5	After the distribution of these kits, how many kits do you have in your contingency stocks, and where are they stored?			
2	**Needs Assessment**	**Yes**	**No**	**I don't know**
2.1	Is there a GBV Coordination mechanism activated in your country?			
2.2	And if so, have you discussed organizing Dignity kits distributions in collaboration and with technical support from the chairs of this group?			
2.3	What Needs Assessment tool will be used to plan the distribution? Please note that partners are encouraged to use pre-existing needs assessments and should only do an assessment if one does not already exist.			
2.4	Have you conducted or planned for conducting pre-distribution assessments and consultations with the affected communities to inform the contents of the kits and how/where distributions should be conducted?			
2.5	Are staff who will be conducting these consultations, trained to respond to safely GBV incidents and refer survivors to services?			
2.6	Have you obtained informed consent from women who will be a part of these consultations?			
2.7	Do you have access to the updated GBV Referral Pathway?			8
2.8	Do you have a set criterion that will be used to select the women and girls' beneficiaries of the kits? Please explain.			
2.9	Do you have a date set for when you will conduct the distribution post-assessment? (Please provide a copy of the assessment report to the GBVWG within two weeks of its completion)			
2.10	Do you plan to conduct a GBV safety audit during the distribution?			
3	**Dignity kits contents and packaging**	**Yes**	**No**	**I don't know**
3.1	Informed by the consultations with affected women and girls has your organization developed a standard content for the kits, that is designed to last for three months?			
3.2	Can all items be procured locally?			

ANNEX III: SAMPLE QUESTIONS FOR DIGNITY KIT NEEDS ASSESSMENT

The following questions may be helpful in planning how to assess the need for dignity kits, in FGDs with women and girls, or informal discussions:

SN	Recommended Questions	Responses
1	What are the basic hygiene products that you need to stay clean and healthy?	
2	Do you have what you need to wash your body? (If not, what would be useful?)	
3	Do you have what you need to wash clothes? (If not, what would be useful?	
4	What items would help you move around more freely and spend time outside your shelter? (probe: Underwear)	
5	Do you need any specific clothing items to carry on your daily tasks	
6	Do you need any other items for your daily life here (in the camp/shelter/gathering centre)?	
7	What items do you miss from home that would provide comfort if you had them?	
8	What types of sanitary materials do you usually use during menstruation?	
9	If the answer to the question on types of sanitary materials is reusable cloth, Do you have safe access to water to wash the cloth?	
10	What kind of packaging would you like items to be in? What is more useful? (bag, pack, bucket)	

ANNEX IV:
EXAMPLE OF DO'S and DON'TS DURING DISTRIBUTIONS

DO
Always ensure the distribution area is a safe space for women and girls
Do make sure the distribution area has access to toilets and drinking water
Do make space for a "waiting area "where women and girls can be briefed around the kits they are receiving, and where they can ask questions
Do set up a private space that can be designated to breastfeeding and/or individual support for women and girls who may need to be referred to services
Always make sure you know all areas where Dignity Kits have been distributed, to avoid duplication
Do distribute cards/tokens in the area where the distribution will take place, with information about where the distribution will take place, the time, etc.
Do keep extra distribution cards/tokens with you in case there are women and girls who did not receive a kit in previous days
Do allow women and girls who don't have a card/token to ask questions or enter the distribution space – they might need a safe space or could benefit from information.
Do assign specific roles to the staff and volunteers who are supporting the distribution
Do start the day with a briefing session for staff/volunteers and end the day with a debriefing
Do make sure all staff and volunteers have received training on GBV and PSEA, have signed a Code of Conduct, and understand the GBV referral pathways

DON'T
Do not allow men to enter or hang around the distribution area, they may make women and girls uncomfortable
NEVER shout or push women and girls who are queuing, as part of crowd management
NEVER actively target survivors of GBV for the distribution of dignity kits – this will need to be conducted in a safe space as part of GBV case management services and in complete confidentiality
Don't send away women and girls who don't have distribution cards, take the time to explain the process and understand if they have specific concerns
Don't distribute Dignity Kits to men or boys
Don't take pictures of individuals collecting the kits, this is invasive to their privacy. You can take pictures from afar, from the staff or without showing faces of affected persons, only if informed consent has been provided.

ANNEX V:
SAMPLE DISTRIBUTION REPORT FORM

CONTENTS	DESCRIPTION
Date or time period of the distribution • *Enter date and time of distribution* • *Enter name of the Focal Point Responsible for the Distribution*	
Distribution Site • *Enter name of site or service point targeted (including the* • *geographic location)* • *Enter # of women and girls targeted* • *Enter information of relevant authorities and agencies contacted for this distribution and state the reason why you contacted them and what information was shared.* • *Enter description of the distribution point, and explicitly state who has access to the distribution site.*	
Number of DK distributed • *Enter # of Dignity kits distributed; disaggregated by age, residential status, disability* • *Enter # of women and girls targeted*	
DK delivered directly to households. • *State #, general overview of reasons why they were delivered at home, who delivered them, and any challenges faced.*	
Comments on the DK regarding quality, type of items provided by women and girls during distributions • *Please include general observations from women and girls, complaints and suggestions.*	
Please give an overview of how the outreach and distribution were conducted. • *Enter a description of how outreach was conducted, team compositions, materials brought to women and girls, who gave you the information of where to find women and girls, how much time it took, etc.* • *Enter information on how the distribution was conducted, in general, the challenges, lessons learned, etc.*	
Describe briefing and debriefing sessions with staff and volunteers, and their comments	
Name and position of staff present during distributions and number of volunteers (female and male)	
Any other comments	

ANNEX VI: DIGNITY KITS POST-DISTRIBUTION MONITORING/ LESSONS LEARNED REPORT TEMPLATE

ABSTRACT

- Introduction
- Context
- Overarching research question/objective
- Sub-Monitoring questions/objectives:
  - *e.g. Are the DKs fulfilling their purpose (as described in the DK guidance note)? (i.e. Providing information, improving mobility, contributing to psychosocial and physical wellbeing, allowing budget substitution, contributing to protection)*
  - *e.g. How effective are the items in the DK in improving the mobility, health and safety of women and girls? (Evaluate DK effectiveness)*
  - *e.g. How are the DKs affecting the lives of women and girls? How are the items useful/used?*
- Purpose of post-distribution monitoring
- Outline of report sections
- Purpose of post-distribution monitoring
- Outline of report sections

METHODOLOGY

The methods section provides the information by which a study's validity is judged. Therefore, it requires a clear and precise description of how an experiment was done, and the rationale for why specific experimental procedures were chosen. The methods section should describe what was done to answer the research question(s)/objective(s), describe how it was done, justify the experimental design, and explain how the results were analyzed. It should include the following:

- Selection of site
- Target population
- Population sample (size and socio-demographic background)
- Data collection tool: FGDs
- Informed consent process & how to protect confidentiality
- Data recording (field notes, audio recording, transcripts)
- Analysis

RESULTS

- Narrative storytelling approach (collectively shared experiences) – very flexible approach
- This section can recall women's stories and anecdotes related to their use of DK items and their DK distribution experiences.

RECOMMENDATIONS

- Selection of DK items, DK distribution process, Areas of opportunity for collaboration between GBV partners, and across sectors
- Annex
- Dignity kits Post Distribution Questionnaire

ANNEX VII: EXAMPLE OF GOOD PRACTICES FROM AROUND THE WORLD

- **Complement In-kind or voucher-based** support by other interventions at the individual (e.g. protection) or facility (e.g. health center, collective center, social institution) level.
- **Consult with women and girls** to inform dignity kit content selection. Whenever possible, questions related to dignity kits should be integrated into other assessments (e.g. sexual and reproductive health, GBV) or activities to minimize duplication and avoid overburdening women and girls.
- Community consultation should be undertaken where feasible **to understand voucher or in-kind approach requirements**. Similarly, consultation with the target groups ahead of kit assistance to ensure kit contents are necessary and appropriate, and that other needs (e.g. adult diapers) or other tailored kits (e.g. MHM) are not needed additionally or in place of standard kits.
- Ensure all people involved in identification, consultation, and kit distribution have **signed a code of conduct**, are aware of SEA risks/mitigation, and are knowledgeable about handling/referring disclosures. Where relevant, personnel would benefit from other training related to MHPSS and be aware of protection services available in the area for referral.
- Ensure recipients are aware of **what to expect, and how to flag concerns or register complaints.**
- Conduct **post-distribution monitoring** of in-kind or voucher-based support to improve/refine the recommended kit contents, communications, and delivery modalities.

REFERENCES

- Inter-Agency Minimum Standards for Gender Based Violence in Emergencies Programming, GBV AoR 2019.
- IASC Guidelines for Integrating Gender-Based Violence, Interventions in Humanitarian Action, 2015.
- Dignity kit Programming Guidelines, UNFPA 2012.
- Dignity kits Guidance Note | Protection, Gender & Inclusion, IFRC 2012.
- Primary data from GBV WG member's review and validation inputs.