

Checklist for operating Women’s and Girls’ Safe Space and Women-only spaces during Covid

Purpose and background: This document is a checklist for operating women’s and girls’ safe spaces or women-only spaces in the context of Covid. It is based on the Trócaire [Template for adapting Protection of women and girls services in the context of Covid](#) (March, 2020). This document also includes additional checklists on operating remote services and delivering health responses to GBV in the context of Covid. In addition, [Trócaire guidance and protocols for implementing remote case management services and helplines](#) (9th April, 2020) is available for programme teams and partners implementing these services.

Who is this for? Programme staff and partners who are operating women’s and girls’ safe spaces, women’s centres, women-only spaces or other facilities where group activities take place during Covid 19. These facilities may be classified as essential services or Covid related restrictions may have eased to the point where it is possible to reopen.

When should I use this checklist? When planning for, or operating, women’s and girls’ safe spaces or women-only spaces in the context of Covid 19.

How can I get further support on this? Please reach out to Fiona (Fiona.shanahan@trocaire.org) for protection and GBV programme support and Carol (carol.wrenn@trocaire.org) for Women’s Empowerment programme support.

Checklist for operating Women’s and Girls’ Safe Space and Women-only spaces during Covid	Check/Remark
Operating WGSS and women-only spaces during Covid	
Procure and install handwashing stations, cleaning supplies and print IEC materials.	<input type="checkbox"/>
Practice rigorous infection prevention and control measures in WGSS and women-only spaces in line with WHO and national guidance. This usually includes; <ul style="list-style-type: none"> • Social distancing: maintaining a distance of 2 metres between people significantly reduces the risk of infection, a distance of 1 metre is less safe and is the minimum recommended distance between people who are not in the same household at all times. • Handwashing before and after sessions, before and after eating, after coughing or sneezing, after using the toilet/ latrine, before and after touching your face. • Cough etiquette – asking people to cover their mouth and nose with a tissue or their elbow when coughing or sneezing. • No physical contact between people, including not passing objects to each other. • Asking symptomatic people and their close contacts to self-isolate at home for 14 days. • Sharing key messages on Covid prevention and support available, including GBV services. • Regular cleaning and disinfecting of surfaces, materials, supplies before and after use. Ensure that all regularly touched surfaces (e.g. door handles) are cleaned before and after each session. 	<input type="checkbox"/>
	<input type="checkbox"/>
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	<input type="checkbox"/>
Consider redesigning the WGSS or women-only spaces to avoid congestion (using one door as entrance and other as exit, marking spaces on the floor with tape to show distance that should be maintained e.g. 2 metres apart).	<input type="checkbox"/>
Even during early phases or low-risk recovery phases of the COVID-19 response amend the schedule of group activities and reduce the number of participants per group to allow for enough space for recommended social distancing measures.	<input type="checkbox"/>

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Share information on COVID-19, including information on prevention, mitigation, actions to take when sick, and available health services.	<input type="checkbox"/>
Women and girls who are not well should be asked not to visit WGSS or women-only spaces and given information on how to access remote support and/or healthcare.	<input type="checkbox"/>
Ensure WGSS are accessible to all women and girls, particularly women and girls with disabilities and those who may be discriminated against, even though restrictions may be placed on the number of people who enter WGSS at any one time.	<input type="checkbox"/>
Assess and possibly increase staffing in line with increased workload (as facilitators will facilitate extra sessions to reach the same number of people)	<input type="checkbox"/>
Adapt group PSS activities according to level of risk, and to ensure that all PSS activities or exercises allow participants to maintain social distancing. A Trócaire template is available to help to do this.	<input type="checkbox"/>
Facilitate discussions on how to prepare for further restrictions or lockdown and how women in the group might be able to continue to keep in touch with services. Facilitate discussions with women and girls about protection risks that might increase/emerge during the COVID-19 response and accompanying restrictions on movement and how they can access support. Include discussion of how women and girls can seek help during lockdown; <ul style="list-style-type: none"> • Over the phone (what’s needed – Freephone number, airtime, access to phones from supportive family members?) • Low tech alert systems (e.g. if women or girls wear a piece of green material while in public or at a health facility, it is a signal that she needs help to ensure her safety – this material could be included in dignity kits or distributed at the WGSS) • Advocate with local authorities to ensure people seeking help are exempted from any movement restrictions • Arrange with private taxis/ motorbikes to provide transport to health facilities in emergencies for women and girls (could these be accessed through contact with case managers?) • Access to basic needs assistance (emergency cash provided through mobile money, community volunteers etc.?) • Other ideas that women and girls have about how they could safely access support if lockdown or other restrictions are brought in 	<input type="checkbox"/>
Implement action plans based on discussions with women and girls by reallocating funding	<input type="checkbox"/>
Distribute dignity kits, including IEC on COVID-19 and available GBV services.	<input type="checkbox"/>
Involve women and girls in preparedness and response planning. Consult with women and girls about their concerns and needs and elevate their views to humanitarian and government decision makers.	<input type="checkbox"/>
Where possible, offer one-on-one GBV case management and psychosocial support services through WGSS, maintaining appropriate precautions for staff and clients (link to Model 1b)	<input type="checkbox"/>
Extra considerations when reopening WGSS or women’s only spaces after a period of closure (in addition to those above)	
If you have posted information on the reason for closure outside the space, update this with more detailed information on plans to re-open.	<input type="checkbox"/>

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Communicate with staff, community animators, focal points and women and girl participants about plans to re-open and safety measures that will be in place.	<input type="checkbox"/>
Clean and disinfect the space prior to reopening, ensure that cleaning staff have appropriate information, cleaning supplies and equipment (e.g. gloves) to ensure their comfort and safety.	<input type="checkbox"/>
Update protocols for staff and member safety and orient teams, this should include updated protocols for rigorous infection prevention and control measures and all necessary supplies.	<input type="checkbox"/>
Update service mapping and referral pathways.	<input type="checkbox"/>
Update IEC materials on infection prevention and control measures, Covid key messages and access to GBV services.	<input type="checkbox"/>
Transfer WGSS materials and files from safe storage to the WGSS, in line with safe information management and data protection protocols.	<input type="checkbox"/>
Revise work-plans and session outlines and train teams.	<input type="checkbox"/>
Re-institute WGSS services and activities, based on a risk assessment and revised work plan.	<input type="checkbox"/>
Extra considerations when implementing individual PSS and Case management through WGSS or women-only spaces (in addition to those above)	
Practice rigorous infection prevention and control measures in line with WHO guidance (2m distance between all people at all times, handwashing before and after sessions, frequent cleaning of surfaces, cough etiquette, no physical contact and symptomatic people or contacts to self-isolate at home).	<input type="checkbox"/>
Translate and use Poster for WGSS to explain IPC measures, this can be edited using the following link: is.gd/trocaireipc and video explainer.	<input type="checkbox"/>
Ensure all staff and participants understand and practice these measures	<input type="checkbox"/>
PSS/GBV staff discuss the changing climate and contingency plans with women and girl participants, including survivors.	<input type="checkbox"/>
Review individual safety plans with current individual case management participants and update in preparation for further restrictions including lockdown or freedom of movement restrictions. Particularly relevant for those living with their abusers. Including agreed plans for safe contact if possible, risks of phone contact, plans to mitigate risks.	<input type="checkbox"/>
Put in place practical support to facilitate safe contact (e.g. participant arranges with trusted person to use their phone if they don't have one, saves PSS staff/case managers' number in phone under a code/safe name, agreed time for contact, provide airtime/ phone card)	<input type="checkbox"/>
Provide cash assistance to implement safety plans where available in your programme, using the cash assistance request form and tracking sheet.	<input type="checkbox"/>
Discuss safe storage for existing paper files in the static women's center in case of lockdown and data storage protocols for remote GBV Case Management or remote individual PSS	<input type="checkbox"/>
Discuss with participants options for potentially shifting to phone-based case management, if they wish to do so obtain informed consent. Collect phone numbers of participants and store them with the consent form, separately from the case files.	<input type="checkbox"/>

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Update referral pathway (GBV sub-cluster) with a focus on health facilities and medical service providers as these are most likely to remain open even during mitigation or lockdown. Include COVID-19 services and reflect changes to existing services as a result of COVID-19. Inform key communities and service providers about the updated pathways.	<input type="checkbox"/>
Maintain access to health responses to GBV, including Clinical Management of Rape and IPV survivors (ensure classified as essential, increase referral costs, provide emergency cash through mobile money or focal points with continued access to communities including Covid response teams, camp management committees etc.).	<input type="checkbox"/>
Expand service access (plan for low-tech alert systems, remote PSS and case management services, helplines)	<input type="checkbox"/>
All: Ensure staff care and support	
Ensure all pre-existing staff support and supervision measures are continued remotely and that any disruptions are minimised. Discuss with teams whether increasing the frequency of support sessions would be helpful.	<input type="checkbox"/>
Discuss with programme teams (e.g. facilitators, community animators, GBV case managers) what kind of additional support would be helpful to them to ensure they feel safe and secure at work during this time. This might include practical support with working hours, childcare, transport, communications, healthcare etc.	<input type="checkbox"/>
Managers supervising frontline staff should check in on a daily basis and at least once a week have a 30 minute phone conversation individually with all staff to check on their wellbeing, share accurate information updates and assess any support needs.	<input type="checkbox"/>
Ensure accurate, clear information is regularly communicated to staff regarding the crisis, organisational responses, security and wider staff safety and care measures (link to wider Trócaire and partner staff care actions)	<input type="checkbox"/>