



United Nations Population Fund
October 2024

Prioritizing the Needs of Women and Girls in Flood-Affected Bosnia and Herzegovina

Findings and Recommendations from a Rapid GBV Assessment

Table of Contents

Acronyms	3
Summary	3
Acknowledgements	5
Introduction	5
Methodology	6
Key Findings	7
1. GBV and Protection Services	7
2. Gaps in Services and Capacity Building Needs	8
3. Sexual and Reproductive Health Services	9
4. GBV and Protection Issues and Concerns	10
5. Feelings of Safety and Security for Women and Girls	12
6. Awareness and Access to Services	14
7. The role of Women Led Organizations and WGSS	15
8. Main Needs for Women and Girls	16
Recommendations	18
Annexes	25

Acronyms

GBV - Gender based violence

GBViE - Gender based violence in emergencies

MHPSS - Mental Health and Psychosocial Support Services

SRH - Sexual and Reproductive Health

CSW - Centers for Social Welfare

WLO - Women-Led Organizations

WGSS - Women and Girls Safe Spaces

CMR - Clinical Management of Rape

EC - Emergency Contraception

PEP - Post-Exposure Prophylaxis

PSEA - Prevention of Sexual Exploitation and Abuse

SEA - Sexual Exploitation and Abuse

PPE - Personal Protective Equipment

FGD - Focus Group Discussion

UNFPA - United Nations Population Fund

Acknowledgements

The assessment was conducted, and the report written, by Mariana Santoyo Bahamón (GBViE Specialist at UNFPA Eastern Europe and Central Asia Regional Office) and Emina Husagic (GBViE Programme Manager at UNFPA Bosnia and Herzegovina Country Office), with technical oversight provided by Ana Araujo (Regional GBViE Specialist at UNFPA Eastern Europe and Central Asia Regional Office).

Special thanks are extended to the government of Bosnia and Herzegovina for supporting the work by UNFPA, to the Centers for Social Welfare for guiding the team and sharing insightful information, to NERA, MOST, and Žene BiH for their relentless dedication to the empowerment of women and girls and their time and availability to meet with the assessment team, and to the affected communities, particularly women and girls, for their resilience, generosity, and strength.

A decorative graphic of white arrows pointing right, set against an orange background, runs horizontally across the top of the page.

Summary


The devastating floods and landslides that struck Bosnia and Herzegovina in early October 2024 left a trail of destruction, impacting communities across the country. While the immediate physical damage is readily apparent, it is crucial to recognize the less visible, yet equally profound, consequences for vulnerable populations, particularly women and girls. This report presents the findings of a rapid GBV assessment conducted from October 25-27 in the flood-affected municipalities of Konjic and Jablanica, including the remote areas of Butrovic Polje and Donja Jablanica. The assessment employed a mixed-methods approach, including a GBV Safety Audit, a general GBV rapid assessment, and focus group discussions with affected women and community volunteers.

The assessment revealed that women and girls in these communities face numerous challenges in the aftermath of the floods. Access to essential services, such as GBV and protection services, mental health and psychosocial support (MHPSS), and sexual and reproductive health (SRH) services, is limited, particularly in remote areas where damaged infrastructure and transportation barriers hinder service delivery. Existing services are further strained due to increased demand and limited resources.

The floods have also heightened the risk of GBV due to displacement, economic hardship, loss of safe spaces, and the breakdown of social support systems. Women and girls are experiencing significant psychosocial distress and trauma, with stigma surrounding mental health posing a barrier to accessing support. Furthermore, a lack of clear communication and information from authorities contributes to uncertainty and anxiety, leaving many women and girls unaware of available services and their rights.

Despite the widespread devastation, communities, and particularly women and Women Led Organizations (WLO), have demonstrated resilience and a commitment to rebuilding. However, the psychological impact of the floods was evident, with many individuals expressing anxiety, fear, and uncertainty about the future.

In Konjic, affected individuals were primarily staying with family or friends in temporary private accommodations. Basic utilities such as electricity and internet were restored after initial disruptions, and water was available. Buturovic Polje showed signs of recovery, with electricity restored and significant clean-up efforts underway. However, the extensive damage to property and land remained a concern. Jablanica faced challenges with ongoing debris and unstable terrain, posing risks to residents. The lack of clear

A decorative graphic of white arrows pointing to the right, set against an orange background, runs horizontally across the top of the page.

communication from authorities regarding damage assessment and future plans cause frustration among the affected population. Donja Jablanica was grappling with the catastrophic damage to homes and infrastructure. The psychological impact of the disaster was particularly pronounced in this community.

Overall, the floods and landslides significantly impacted the assessed communities, causing loss of life, displacement, damage to infrastructure, and psychological distress. The assessment highlighted the need for continued support to address the immediate and long-term needs of the affected population, particularly women and girls. Despite these challenges, women and girls have demonstrated remarkable resilience and leadership in responding to the disaster. Women-led organizations play a vital role in providing safe spaces, support, and empowerment, but they face challenges in securing resources and maintaining operations.

Based on these findings, the assessment highlights the need for urgent action to address the needs of women and girls in flood-affected communities. Key recommendations include:

- **Strengthening Services:** Increase the capacity and accessibility of GBV, MHPSS, and SRH services, particularly in remote areas. Ensure a survivor-centered approach and address barriers to accessing support, including mandatory reporting laws.
- **Empowering Women and Girls:** Support women-led organizations, establish and maintain safe spaces, provide economic assistance, and address safety concerns.
- **Improving Information and Access:** Establish clear communication channels, disseminate information widely, and address transportation barriers to ensure women and girls are aware of available services and their rights.
- **Advocacy and Policy Change:** Advocate for policy changes that prioritize the safety and well-being of women and girls, including the revision of mandatory reporting laws and the integration of GBV prevention and response into disaster risk reduction strategies.

Immediate needs include the deployment of additional MHPSS professionals, ensuring access to essential SRH services, securing safe spaces for women and girls, and improving communication and information sharing. By prioritizing the needs of women and girls and implementing these recommendations, humanitarian actors can contribute to their safety, well-being, and long-term recovery, enabling them to rebuild their lives and communities in the aftermath of the floods.

A decorative graphic of white arrows pointing right, set against an orange background, runs horizontally across the top of the page.


Introduction

The devastating floods and landslides that struck Bosnia and Herzegovina on October 4th, 2024 left a trail of destruction, claiming lives, displacing communities, and shattering livelihoods. While the immediate impact of these natural disasters is readily apparent in the shattered landscapes and disrupted lives, it is crucial to recognize the less visible, yet equally profound, consequences that unfold in the shadows, particularly for vulnerable populations such as women and girls who often bear a disproportionate burden in times of crisis. This report presents the findings of a rapid gender-based violence (GBV) assessment conducted in flood-affected communities in Bosnia and Herzegovina. The assessment aimed to understand the unique challenges faced by women and girls in the aftermath of the disaster, identify their immediate and long-term needs, and provide recommendations for targeted interventions to ensure their safety, well-being, and recovery.

The assessment, conducted from October 25-27, 2024, focused on two municipalities severely impacted by the floods: Konjic and Jablanica. Within these municipalities, the assessment team visited the municipal centers as well as the more remote and heavily affected areas of Butrovic Polje and Donja Jablanica. Through a mixed-methods approach, including a GBV Safety Audit, a general GBV rapid assessment, and focus group discussions with affected women and community volunteers, the assessment team gathered critical information on the availability and accessibility of services, GBV risks and vulnerabilities, and the specific needs of women and girls.

This report provides a comprehensive overview of the key findings, highlighting the challenges, gaps, and opportunities for intervention in the flood-affected communities. It also outlines a set of prioritized recommendations aimed at strengthening services, empowering women and girls, improving information and access, and advocating for policy change to ensure a survivor-centered and gender-responsive approach to recovery. The findings and recommendations presented in this report are intended to inform and guide the humanitarian response, ensuring that the needs of women and girls are prioritized and that they are meaningfully involved in the recovery and rebuilding process.

Both Konjic and Jablanica municipalities in Bosnia and Herzegovina suffered significant damage from recent floods. Konjic municipality saw damage to road infrastructure and fatalities in Buturović Polje, though the municipal center remains functional. While key infrastructure in Buturović Polje is intact and recovery efforts are underway, the village experienced 5 fatalities and

A decorative graphic of white arrows pointing right, set against an orange background, runs horizontally across the top of the page.

extensive damage to homes. In Jablanica municipality, Donja Jablanica was particularly hard-hit with 19 fatalities and catastrophic damage to homes and infrastructure. Although the municipal center is functional, access to Donja Jablanica remains challenging and wastewater management is a critical issue. In both municipalities, the Centers for Social Welfare are operational and providing support to displaced residents.

Methodology


A GBV rapid assessment was conducted in two communities in Bosnia and Herzegovina impacted by the floods and landslides. The assessment aimed to identify the immediate and long-term needs of women and girls, accessibility to lifesaving GBV, protection, and Sexual and Reproductive Health (SRH) services, GBV risks and vulnerabilities, and provide recommendations for interventions to address these needs. The assessment took place from October 25th to 27th, 2024.

This assessment employed a mixed-methods approach to evaluate the situation of women and girls in flood-affected communities in Bosnia and Herzegovina. The methodology included a GBV Safety Audit, a general GBV rapid assessment, and focus group discussions with women affected by the floods and community volunteers. These methods allowed for a comprehensive understanding of the needs, risks, and capacities within the affected communities. The assessment was conducted from October 25-27 in the municipalities of Konjic and Jablanica, including the remote areas of Butrovic Polje and Donja Jablanica.

Key Findings

1. GBV and Protection Services

Across all assessed locations, the **availability and accessibility of GBV and protection services** varies. While some services were available, challenges remain in ensuring sufficient capacity, accessibility, and a survivor-centered approach. Services are currently strained due to the increased demand following the floods. While in Konjic and Jablanica services are more accessible to women and

A decorative graphic in the top left corner of the page, consisting of a series of white arrows pointing to the right, set against an orange background.


girls (and most of them have relocated to these towns), Butrovic Polje and Donja Jablanica are remote areas and service providers struggle to reach both areas. There is a **Safe House for GBV survivors** in Mostar, and Association “**Žene BiH**” also provides GBV awareness raising and counseling services to women and girls at risk.

The **Centers for Social Welfare (CSW)** play a central role in providing GBV services in all locations. However, there is a need for further capacity building to ensure a survivor-centered approach and strengthen referral pathways. Additionally, **Women Led Organizations** in both locations play a critically important role in providing a safe space for women and girls, where empowerment, livelihoods and unstructured psychosocial support is provided. In Konjic, the WLO NERA was actively involved in supporting the community during the floods, but they have lost the space that was provided to them a few months back, so they have nowhere to gather. In Jablanica, the WLO MOST runs a safe space for women and girls, with around 200 members and volunteers, they are well organized and through their empowerment and livelihood activities, they are able to pay their monthly rent of the space. The main challenge in reach is the engagement of adolescent and younger girls.

Mental Health and Psychosocial Support Services (MHPSS) and social services are available in all locations, but their capacity to meet the needs of all those affected is strained due to the emergency response and increasing needs of the population. In Buturovic Polje, residents have access to MHPSS services through the Mental Health Center in Konjic, and in Jablanica, additional psychologists and a child psychotherapist are planned to be deployed to support the affected population. **Child protection** services are reportedly available, but their delivery and reach were unclear in some locations, based on conversations with affected communities.

The CSW has the capacity to provide survivors with **cash assistance or monthly food support**. And both Municipalities, in collaboration with the Red Cross, IOM and private volunteers, have organized a warehouse where non-food items, non perishable food and water is being stored. The team did not see a distribution and is unable to provide further information on how these are being organized.

The **mandatory reporting law** in Bosnia and Herzegovina, which requires survivors to file a police report before accessing social services (including safe houses for survivors), presents a significant barrier to seeking support. This policy can be particularly challenging in the context of a natural disaster, where survivors may be facing additional stressors such as displacement, loss of

A decorative graphic of white arrows pointing right, set against an orange background, is located at the top left of the page.

livelihoods, and trauma. The requirement to report to the police can deter survivors from seeking essential services, as they may fear retaliation from their abusers, lack trust in the legal system, or feel unprepared to navigate the reporting process while dealing with the aftermath of a disaster.


Furthermore, the mandatory reporting law can inadvertently perpetuate the cycle of violence. When survivors are unable to access support services without filing a police report, they may be forced to return to unsafe and abusive relationships due to financial dependence or lack of alternative options. This not only compromises their safety and well-being but also undermines their ability to recover and rebuild their lives after a disaster. **UNFPA emphasizes the importance of providing survivor-centered services that prioritize the needs and wishes of survivors. This includes ensuring access to confidential support services without mandatory reporting requirements. By removing barriers to accessing support, survivors can make informed choices about their next steps and receive the necessary assistance to heal and recover.**

2. Gaps in Services and Capacity Building Needs

Several gaps in services were identified during the assessment. A significant concern was the limited availability of a physical WGSS in Konjic, where no dedicated space existed for women and girls to gather and receive support. In Jablanica, the main challenge linked to the WGSS is the lack of capacity to provide specialized services for survivors. This gap limits the ability of women and girls to access critical services and support in a safe and empowering environment.

While available GBV response services demonstrate commitment to assisting survivors, opportunities exist to further strengthen their capacity to provide services that consistently prioritize the needs and wishes of survivors. This includes a revision of the mandatory reporting laws, where there is an emphasis on upholding the principles of a survivor-centered approach. Such an approach is essential to ensure that survivors feel safe, empowered, and in control of their recovery process.

Capacity building efforts should focus on strengthening the capacity of GBV response services to provide survivor-centered GBV services, improving referral pathways for CMR cases, ensuring the availability and accessibility of child protection services and PSS,

A decorative graphic of white arrows pointing right, set against an orange background, is located at the top left of the page.


increasing awareness of GBV services and reporting mechanisms among affected communities, establishing or strengthening safe spaces for women and girls, and training service providers on PSEA and survivor-centered approaches.

3. Sexual and Reproductive Health Services

Basic SRH services, including **antenatal care, family planning, and postnatal care**, are available in both Konjic and Jablanica. In Konjic, these services are provided at the primary health center and the general hospital. The general hospital also offers free breast cancer screening, pap smears, ultrasounds, and mammographies. In Jablanica, the Primary Health Center provides antenatal care, family planning, and postnatal care through home visits by midwives. C-sections are available at the Mostar Hospital, which serves as a referral center for both Konjic and Jablanica.

Referral pathways and protocols for the provision of Clinical Management of Rape (CMR), including forensic examinations, are unclear based on conversations with stakeholders. Access to **emergency contraception (EC) and post-exposure prophylaxis (PEP) for HIV prevention** is limited in both locations. Healthcare providers indicated that the availability of these medications is often linked to potential medical exposures, and did not mention standardized protocols for providing them to survivors of rape and sexual assault. There appears to be some confusion surrounding the availability and provision of EC and PEP in both Konjic and Jablanica. In Konjic, medical personnel indicated that PEP was only accessible in Sarajevo, and EC had to be purchased privately. Similarly, in Jablanica, medical personnel stated that EC was not provided by the government and had to be obtained privately, and they were unable to confirm the availability of PEP. This lack of clarity and access to essential medications could pose a significant barrier for survivors of sexual violence seeking timely medical care. While gynecologists at the Primary Health Center could potentially administer drugs for CMR, their unavailability at the facilities presents a significant barrier. Referral pathways for CMR service provision also need clarification and improvement. A lack of clear protocols and readily available resources could hinder timely access to essential medical and psychosocial care for survivors.

Furthermore, it is crucial to recognize that health centers are often the main entry point for survivors of GBV. As such, these centers should be equipped with comprehensive information regarding the reporting process, referral pathways, and available services for survivors. Medical personnel should be well-informed and able to provide at least basic information and support to survivors before

A decorative graphic consisting of a series of white arrows pointing to the right, set against an orange background, is located at the top left of the page.

referring them to law enforcement or specialized GBV services. This ensures survivors receive immediate care and are not left to navigate the complex process of seeking justice and support alone. A survivor should not have to go through the whole process alone; a coordinated and informed response from healthcare providers is essential for their well-being and recovery.


Furthermore, a concerning practice identified during the assessment was the requirement for **gynecologists to act as witnesses in rape and sexual assault trials**. Requiring gynecologists to testify can be re-traumatizing for survivors and may inadvertently prolong and introduce bias into legal proceedings, as their focus is on physical findings, which may not always align with the survivor's experience or the legal definition of sexual assault. It is urgent to emphasize the prioritization of the survivor's testimony and minimizing re-traumatization. Instead, UNFPA and WHO recommend strengthening forensic documentation practices, training legal professionals on how to effectively use forensic medical evidence, and protecting survivor's rights throughout the legal process.

Both Konjic and Jablanica have medical professionals available to provide SRH services. In Konjic, there was a gynecologist, general doctor, surgeons, midwives, and nurses. In Jablanica, the Primary Health Center has a female gynecologist who is also the director of the health center.

4. GBV and Protection Issues and Concerns

Across all assessed locations, communities expressed heightened **distress and anxiety stemming from uncertainty** about their future, particularly regarding shelter and the safety of their homes. The lack of information can create a sense of helplessness and fear, contributing to increased stress and anxiety, which can heighten the risk of GBV. The stress, displacement, and economic hardship caused by the disaster can increase tensions within families, leading to a heightened risk of GBV, particularly intimate partner violence.


This uncertainty was exacerbated by a **lack of clear communication and information** from authorities about future plans, leaving residents feeling uninformed and apprehensive. Poor communication can erode trust in authorities and service providers, making it more difficult for survivors to seek help and access support. In Donja Jablanica, this tension culminated in a road blockage by residents demanding information and support.

A decorative graphic element consisting of a series of white arrows pointing to the right, set against an orange background, is located at the top left of the page.

The need for **mental health and psychological support** was a recurring theme across all locations. Many individuals, having experienced significant loss and trauma, express a desire for mental health services. However, access to these services is hindered by stigma, particularly in Konjic, where there is reluctance to seek help from the Center for Mental Health. This highlights the need for alternative, community-based approaches to mental health service delivery that are more accessible and culturally sensitive. The traumatic experience of the disaster can have long-lasting psychological impacts, increasing vulnerability to GBV and hindering recovery.

While local municipalities, with support from Türkiye and Croatia, have provided **container housing as a shelter alternative**, these options have been met with low interest from the affected population. Several factors contribute to this reluctance. During the assessment visit, it was observed that the container sites were not yet ready for occupancy, lacking essential amenities such as adequate street lighting. Furthermore, their location poses significant challenges. In Butrović Polje, the containers are situated far from the center of the community, further isolating residents and potentially increasing their vulnerability to GBV, particularly in the absence of sufficient lighting. Conversely, in Jablanica, the containers are placed in the center of town, making those who have lost their homes easily identifiable and potentially increasing their risk of exploitation and abuse. These findings highlight the need for careful consideration of shelter alternatives, ensuring they are safe, accessible, and meet the needs of affected communities while minimizing the risk of GBV.

Freedom of movement was also a concern, particularly in Jablanica and Donja Jablanica, where roadblocks and ongoing safety risks from unstable terrain and damaged infrastructure restricted movement. Residents expressed fear of returning to their homes and communities due to uncertainty about their safety and the lack of information regarding the stability of the land and houses. Roadblocks and the inaccessibility to remote communities leave women and girls isolated and vulnerable to abuse, with limited ability to report incidents or seek help. Fear of returning to damaged homes can force women and girls into unsafe situations, potentially exposing them to exploitation and abuse. Moreover, the inability of service providers to reach these areas leaves survivors without crucial medical, psychosocial, and legal assistance, compounding the risks and leaving them trapped in precarious and dangerous circumstances. The loss of personal documents further compounded these challenges, further increasing their vulnerability and hindering access to essential services.


A decorative graphic in the top left corner of the page, consisting of a series of white arrows pointing to the right, set against an orange background.

Overall, especially in Jablanica, there was a notable **lack of open discussion about GBV**. The prevailing attitude seemed to be that "it doesn't happen here," suggesting potential underreporting and a need for increased awareness and sensitization within the community. When communities are reluctant to discuss GBV and handle such cases privately within families, it creates a dangerous environment that fosters abuse and silences survivors. This silence allows perpetrators to act with impunity and prevents survivors from receiving necessary support and justice. It normalizes violence, perpetuates harmful cultural norms, and discourages reporting, leading to underestimation of the problem and leaving women and girls trapped in a cycle of abuse with nowhere to turn for help. This lack of acknowledgment and action can have devastating consequences, perpetuating a culture of violence and impunity.

The assessment also revealed concerns about the **coordination of aid and the lack of community engagement mechanisms**. In Jablanica, there was a reported influx of volunteers, but aid efforts were not being centrally coordinated, potentially leading to gaps and inefficiencies in service delivery. The influx of private volunteers, while well-intentioned, can inadvertently increase the risk of sexual exploitation and abuse (SEA) in disaster-affected communities. The lack of oversight and vetting processes for these volunteers can create opportunities for individuals with predatory intentions to gain access to vulnerable populations. Furthermore, power imbalances between aid providers and recipients, coupled with the chaotic environment and weakened community structures, can increase the risk of exploitation. The presence of numerous outside individuals can also contribute to a breakdown in existing social norms and create a sense of impunity, further exacerbating the risk of SEA.

The absence of **feedback and complaints mechanisms** and **PSEA policies and messaging**, further underscores the need for stronger community engagement and accountability. The disruption of social support systems and the need for assistance can make women and girls more vulnerable to sexual exploitation and abuse, particularly in temporary housing and makeshift shelters (such as containers, in the middle of towns, which highlight where vulnerable people are living).

In Donja Jablanica, the devastation caused by the floods was compounded by the **destruction of livelihoods and damage to essential infrastructure**, including sewage systems. The lack of information about rebuilding possibilities and the emotional toll of losing loved ones and homes highlighted the urgent need for comprehensive support that addresses both the physical and psychological needs of the community.

A decorative graphic of white arrows pointing right, set against an orange background, runs horizontally across the top of the page.

Overall, the assessment revealed a range of GBV and protection issues and concerns across all locations. These concerns underscore the need for interventions that prioritize community engagement, address the psychological impact of the disaster, ensure safe and accessible mental health services, strengthen GBV prevention and response efforts, and provide clear and timely information to affected communities.


5. Feelings of Safety and Security for Women and Girls

Focus group discussions and field observations highlight a complex situation where concerns about personal safety, the availability of safe spaces, and an elevated risk of GBV are prevalent.

In Konjic, women gathered at a local hotel, which had served as a trusted safe space facilitating social interaction and mutual support. The imposition of rental fees during the summer months has led to the loss of this critical space, leaving a significant void in the social support network for women and girls. In terms of public safety, **women and girls state that several local cafes in Konjic are considered unsafe due to their predominantly male clientele.** The atmosphere in these cafes, with mostly men present, can be intimidating and unwelcoming to women and girls. Additionally, the physical damage caused by the floods, such as obstructed roads and debris, has further intensified their concerns about personal safety and mobility.

Fear of GBV is also present, as mentioned by the local psychologist who noted that **risk of both physical and psychological violence is expected to rise in the aftermath, exacerbating women's sense of insecurity.** Women are also financially dependent on men, limiting their ability to leave abusive situations, and reported protection mechanisms are insufficient, with perpetrators facing minimal consequences beyond certain measures and warnings.

Unlike in Konjic, in Jablanica there are no specific public places that women explicitly avoid. However, their overall sense of safety has been compromised by the flood's aftermath, particularly due to health risks posed by contaminated mud and debris. Women have expressed concerns about the potential for skin infections and other health issues, highlighting a critical need for Personal Protective Equipment (PPE) and clear safety guidelines during cleanup efforts. Moreover, there is a notable **gap in information dissemination from local authorities regarding available support services. Many women are unaware of existing psychosocial**

A decorative graphic in the top left corner of the page, consisting of a series of white arrows pointing to the right, set against an orange background.


resources, leading to increased feelings of isolation and uncertainty. This lack of communication from official channels has exacerbated their vulnerability, making it difficult for them to access necessary assistance and navigate their recovery process effectively. Adding to these challenges is the uncertainty faced by women who have lost their homes and livelihoods. **They report receiving little to no information from authorities about their future, including whether it is safe to return to their homes or what alternative shelter solutions may be available long-term.** The lack of clarity on long-term housing plans has severely diminished their sense of safety and stability, leaving many in a state of distress and insecurity.

The recent floods and landslides have had a disproportionate impact on women imposing a significant emotional burden. Despite experiencing trauma and loss firsthand, women have consistently demonstrated resilience and leadership in disaster response efforts. They have prioritized the needs of their families and communities, organizing aid distribution and providing crucial emotional support, often while men struggle to cope. Furthermore, lack of and the flooding of a designated safe space for women, coupled with the loss of homes and livelihoods, has created a heightened sense of insecurity and isolation within their immediate communities.

6. Awareness and Access to Services

The availability and accessibility of GBV and protection services across the assessed locations vary, with services available in the Jablanica and Konjic municipalities, but significant challenges remain. These include **insufficient capacity, difficulties ensuring accessibility, and a lack of a survivor-centered approach.** Service providers face additional strain due to increased demand following the recent floods. In Konjic and Jablanica, services are more accessible to women and girls, especially since many have relocated from remote affected areas to these towns. However, remote areas like Butrovic Polje and Donja Jablanica face greater challenges. Local communities struggle to reach services due to damaged road networks and limited public transportation options.

In the Konjic municipality, the vast 500 km² area and limited transportation options hinder access to services for remote communities. In Jablanica, while women are aware that CSW offers GBV support, trust in these services is low. Many are reluctant to report GBV due to stigma and doubts about the effectiveness of the support system.

A decorative pattern of white and orange chevrons pointing to the right, located at the top left of the page.


Economic hardship, worsened by recent floods and landslides, has further challenged access to essential services. Many families face **financial strain due to lost income and property**, while transportation challenges, especially in remote areas, hinder access to support services.

In Konjic, mobile services are urgently needed to reach isolated communities and provide essential information on available support. In Jablanica, women report limited or no information on available services, including psychological assistance, creating a critical gap in awareness and access. There is an **urgent need for more targeted communication to ensure women are informed about available services, their rights, and the confidential nature of GBV support, to empower them to seek help and trust the system.**

Following the recent events, a number of **elderly residents, including those with disabilities, of Donja Jablanica have been temporarily relocated to the Retirement Home in Jablanica.** These individuals, some of whom have tragically lost their homes, are now receiving round-the-clock care and assisted living services. Many are fully dependent on the care of others and require significant support with daily living activities. While the Retirement Home provides a safe and supportive environment for the time being, it is crucial to recognize that this is not a permanent solution. Efforts must be made to determine a long-term plan, including securing funding to cover the costs associated with their stay and exploring alternative housing options that can adequately meet their needs.

7. The role of Women Led Organizations and WGSS

The Women-Led Organizations (WLOs) in both Konjic, Jablanica and Mostar, such as "Nera," "MOST," and the "Žena BiH", have **long served as catalysts of change in their communities. These organizations, spearheaded by strong and dedicated women leaders have been at the forefront of community support since the war, they have not only provided safe spaces, income-generating and empowerment opportunities for women, but have also been at the forefront of advocacy for gender-sensitive initiatives at the local level.** The WLO "Žena BiH" also plays a crucial role in this network, offering protection and resources to survivors of GBV. Their efforts have significantly contributed to raising awareness about gender equality, advocating for improved access to healthcare services for women and girls with disabilities, and ensuring that the voices of women who have children with disabilities are heard.

A decorative graphic in the top left corner of the page, consisting of a series of white arrows pointing to the right, set against an orange background.

In Konjic, the need for a WGSS was highlighted by women within the WLO "Nera" even before it was formally assessed. Women expressed that such spaces are essential for discussing topics traditionally considered taboo in a secure and supportive environment. They emphasized the value of having a dedicated area for creative activities and open discussions without fear of judgment.

Similarly, in Jablanica, WLO "MOST," with its 200 members and volunteers, has successfully implemented various livelihood activities, enabling them to sustain their safe spaces. These WLOs are vital pillars in their communities, particularly during crises, providing crucial support that empowers women and fosters resilience against social and economic challenges. Their work underscores the transformative impact of WLOs in advocating for gender-sensitive initiatives and addressing the unique needs of vulnerable women, including those with disabilities and mothers of children with disabilities.

The social support dimension of WGSS is particularly significant. Women have often prioritized the needs of others during emergencies, neglecting their own well-being. WGSS, especially in Jablanica, offer invaluable informal gatherings that foster a sense of community and emotional support. These **safe spaces allow women to connect, share experiences, and start the healing process from the immense trauma they have endured, highlighting the crucial role of WGSS in enhancing women's well-being and recovery.**

The results of the FGDs further validated the importance of WGSS, with women in both Jablanica and Konjic identifying various activities they would like to see implemented. Primarily, there was a strong demand for psychological assistance within these safe spaces, underscoring the social support dimension that is crucial for their well-being. In Konjic, participants expressed particular interest in arts and crafts, including sewing, painting, and other creative outlets. The inclusion of sewing machines and artistic materials was specifically requested to facilitate these activities. Meanwhile, in Jablanica, the need to replace flood-damaged equipment, provide health programs for elderly women, and implement psychosocial support and engagement strategies for adolescents was highlighted. Supporting and strengthening the capacity of these WLOs is essential to continue their impactful work as beacons of empowerment and community resilience.

8. Main Needs for Women and Girls


The floods have devastated communities, leaving women and girls grappling with a multitude of urgent needs. Based on the discussions held with women, these are the main needs highlighted by them.

Mental Health and Psychosocial Support Services is a recurrent request. The psychological impact of the floods is profound, with many experiencing trauma, loss, and immense stress. In Konjic, the need for psychosocial support is paramount. However, stigma surrounding mental health, particularly for women, poses a significant barrier. Targeted efforts are needed to address this stigma and ensure women and girls can access crucial mental health services without fear of judgment. Specialized support is also required for women with children with disabilities, who are among the most vulnerable and marginalized.

This need for psychological support was strikingly evident during one of the FGDs with affected women. Initially, the atmosphere was heavy with grief, as the women were consumed by the trauma they had endured. They spoke of their losses, their fears, and their deep sadness, their words echoing the devastation they had experienced. However, when the conversation shifted towards the creation of a WGSS and their hopes and plans for the future, a remarkable transformation occurred. The women's spirits lifted, and they began to envision a brighter future. They engaged in lively discussions, sharing ideas and aspirations, and for the first time since the disaster, laughter filled the room. **This powerful shift highlighted the profound importance of providing not only psychological support to process their trauma but also a sense of hope and agency to rebuild their lives.**

The floods have decimated livelihoods, leaving many women and girls without income or resources. **Economic assistance** is essential to enable them to rebuild their lives. In Donja Jablanica, women have expressed a desire for autonomy and choice in the aid they receive. **Providing vouchers, rather than pre-selected items, empowers them to prioritize their needs and make their own decisions. Supporting their entrepreneurial spirit can foster long-term economic recovery and self-sufficiency.**

Access to safe and adequate shelter is a fundamental human right, acutely highlighted by the recent floods. While many affected women and girls currently find temporary refuge with family and friends, this is not a sustainable solution. They express a strong desire to return to their homes and rebuild with their communities, rather than relocate to container housing. However, the reality of

A decorative graphic in the top left corner of the page, consisting of a series of white arrows pointing to the right, set against an orange background.

limited options and the looming need to vacate temporary accommodations is forcing many to reluctantly accept container housing despite the associated risks. This situation underscores the urgent need for alternative shelter solutions that prioritize the safety, dignity, and long-term well-being of women and girls, enabling them to actively participate in the recovery and reconstruction of their communities.

Access to essential services such as clean water, sanitation facilities, and hygiene products is also highlighted as a main need for women and girls. Women have identified needing underwear, soap, shampoo, sanitary pads, nail clippers, hair/tooth brushes, as well as safety items like flashlights, whistles and waterproof bags for their phones and important documents. Ensuring access to these items, along with lifesaving information, is crucial for their well-being and protection.

The environment and breakdown of social structures in the aftermath of disasters increase the risk of GBV, which was particularly highlighted by a psychologist working with NERA in Konjic. **GBV protection mechanisms** must be put in place to ensure the safety and security of women and girls. This includes establishing WGSS, providing access to legal aid and psychosocial support for survivors, and raising awareness about GBV risks and mitigation strategies.

Clear and accessible information is vital for women and girls to make informed decisions and access essential services. This includes information on available aid, healthcare, legal assistance, and psychosocial support. Disseminating information through various channels, including community meetings, radio broadcasts, and mobile technology, can ensure that women and girls, even in remote areas, are aware of their rights and the resources available to them.

Recommendations

Area	Immediate	Short-term	Long-term	Responsible
Strengthening services	<ul style="list-style-type: none"> • Deploy additional psychologists, counselors, and social workers. Prioritize those with experience in trauma-informed care. • Support and strengthen WGSS led by WLOs, and ensure they are able to provide GBV response services. • Clarify GBV referral pathways and protocols for CMR and ensure the immediate availability of emergency contraception (EC) and post-exposure prophylaxis (PEP) in all health centers. Train healthcare providers on 	<ul style="list-style-type: none"> • Provide training to CSW staff and other GBV service providers on survivor-centered approaches, case management, and referral pathways. • Establish mobile outreach programs and transportation assistance to ensure GBV and MHPSS services reach women and girls in remote areas like Butrovic Polje and Donja Jablanica. • - Roll out and disseminate clear and comprehensive GBV referral pathways 	<ul style="list-style-type: none"> • Advocate for the revision of mandatory reporting laws to prioritize survivor safety and agency. Promote confidential reporting mechanisms and access to support services without requiring police involvement. • Provide ongoing training to healthcare providers on GBV, survivor-centered care, and referral pathways. Equip health centers with 	<ul style="list-style-type: none"> • Federal Ministry of Labour and Social Policy, • Ministry of Health, Labour and Social Policy of Herzegovina-Neretva Canton, • Centers for Social Welfare of Jablanica and Konjic, • Municipalities of Jablanica and Konjic, • UNFPA CO BiH

	<p>CMR procedures and survivor-centered care.</p>	<p>between different service providers (health, psychosocial, legal, and protection) to ensure a coordinated and holistic response.</p>	<p>up-to-date information on reporting mechanisms and available support services.</p>	
<p>Shelter and Alternative Accommodation</p>	<ul style="list-style-type: none"> Finalize the assessment of damaged homes to determine the feasibility and timeline for repair and reconstruction. Prioritize homes belonging to vulnerable households, including female-headed households and those with members with disabilities. Identify and secure safe temporary housing options within communities (and with community's feedback), such as vacant apartments, guesthouses, or community centers. Ensure these options are 	<ul style="list-style-type: none"> Prioritize the repair and reconstruction of damaged homes, ensuring that the specific needs of women and girls are considered in the design and implementation. Explore and support community-based shelter solutions, such as home-sharing programs or the construction of small, shared housing units within communities. - Strengthen coordination among government agencies, humanitarian organizations, and 	<ul style="list-style-type: none"> Promote sustainable housing solutions that prioritize the safety, accessibility, and long-term well-being of women and girls. This may include building back better initiatives and community-led housing projects. Address issues related to land and property rights to ensure women have secure access to housing and land ownership. - Integrate GBV prevention and response strategies 	<ul style="list-style-type: none"> Federal Ministry of Labour and Social Policy, Ministry of Health, Labour and Social Policy of Herzegovina-Neretva Canton, Centers for Social Welfare of Jablanica and Konjic, Damage Assessment Commissions at the Municipal, Cantonal and Federal levels. Municipality of Jablanica and Municipality of Konjic, Civil Protection Services of Jablanica

	<p>equipped with essential amenities (water, sanitation, electricity, and adequate security).</p> <ul style="list-style-type: none"> - Provide financial assistance to women and girls to support temporary accommodation in safe locations or to initiate minor repairs to their damaged homes, enabling them to return sooner. 	<p>community leaders to ensure a cohesive and effective approach to shelter and housing solutions.</p>	<p>into all shelter and housing programs. Ensure access to information, support services, and reporting mechanisms for survivors of GBV.</p>	<p>Municipality, Civil Protection Services of Konjic Municipality</p>
<p>Empowering Women and Girls</p>	<ul style="list-style-type: none"> - Secure safe and accessible spaces for women and girls in Konjic and ensure the continued operation of the WGSS in Jablanica. Prioritize the provision of vouchers for women and girls to be able to purchase hygiene products, menstrual health items and safety tools. 	<ul style="list-style-type: none"> - Provide financial and logistical support to Women-Led Organizations like NERA in Konjic and MOST in Jablanica. Invest in their capacity to deliver GBV prevention and response services, psychosocial support, and economic empowerment programs. 	<ul style="list-style-type: none"> - Provide clear and timely information about long-term housing plans and ensure women and girls have access to safe and adequate shelter. - Develop strategies to ensure the long-term sustainability of WGSS, including community ownership, local 	<ul style="list-style-type: none"> - Establish community engagement mechanisms to ensure aid efforts are coordinated and responsive to the needs of women and girls. Involve women in decision-making processes and empower them to participate in recovery efforts.

		<ul style="list-style-type: none"> - Provide immediate economic assistance to women and girls who have lost their livelihoods. Prioritize support for women-led businesses and income-generating activities. - Disseminate information on safety guidelines, health risks, and available support services through various channels, including community meetings, radio broadcasts, and mobile technology. 	<p>partnerships, and diversified funding sources.</p> <ul style="list-style-type: none"> 	<ul style="list-style-type: none">
Improving Information and Access	<ul style="list-style-type: none"> - Establish clear communication channels between authorities and affected communities. Provide timely and accurate information about future plans, shelter options, and 	<ul style="list-style-type: none"> - Conduct awareness campaigns to increase knowledge of available GBV, MHPSS, and SRH services, including reporting mechanisms. Address stigma and 	<ul style="list-style-type: none"> 	<ul style="list-style-type: none"> Centers for Social Welfare of Jablanica and Konjic, Centers for Mental Health, WLOs in Jablanica and Konjic, UNFPA CO BiH

	<p>available support services.</p> <ul style="list-style-type: none"> - Provide transportation assistance, organize mobile service units, and establish community-based service points to overcome transportation challenges. 	<p>promote confidential support services.</p> <ul style="list-style-type: none"> - Disseminate information on available services through various channels, including community meetings, radio broadcasts, mobile technology, and women-led organizations. Ensure information is accessible to women and girls in remote areas. 		
Advocacy and Policy Change	<ul style="list-style-type: none"> - Widely disseminate information on existing support services, reporting mechanisms, and legal rights related to GBV, sexual and reproductive health, and psychosocial support. - Inform communities on current efforts underway in finalizing the assessment of the damages to their home, 	<ul style="list-style-type: none"> - Advocate for the revision of mandatory reporting laws to prioritize survivor safety and agency. Promote confidential reporting mechanisms and access to support services without requiring police involvement. 	<ul style="list-style-type: none"> - Advocate for the revision of mandatory reporting laws to prioritize survivor safety and agency. - Integrate GBV prevention and response into national and local disaster risk reduction policies and strategies. 	<ul style="list-style-type: none"> Ministry of Security of Bosnia and Herzegovina, Federal Ministry of Labour and Social Policy, Ministry of Health, Labour and Social Policy of Herzegovina-Neretva Canton, Centers for Social Welfare of Jablanica and Konjic,

	<p>and actively include them (particularly WLO) in discussions around future plans and information dissemination methods.</p> <ul style="list-style-type: none"> - Ensure information is accessible to all, including those in remote areas and marginalized communities. 	<ul style="list-style-type: none"> - Advocate for the elimination of the requirement for gynecologists to testify in sexual assault trials. Promote the use of forensic evidence and prioritize survivor testimony. - Engage in a participatory process, including the communities, to develop and implement comprehensive emergency preparedness plans for flood-affected areas. This includes: <ul style="list-style-type: none"> 1. Establishing early warning and communication systems that are accessible to all, including those with disabilities and those in remote areas. 	<ul style="list-style-type: none"> - Strengthen coordination among government agencies, humanitarian organizations, and community leaders to ensure a cohesive and effective approach to GBV prevention and response in emergencies. - Invest in community-level resilience-building initiatives that empower women and girls to participate in disaster preparedness, mitigation, and response. 	<p>Municipalities of Jablanica and Konjic, CSOs, NGOs, and WLOs, UNFPA CO BiH</p>
--	--	--	--	---

		<ul style="list-style-type: none">● 2. Developing clear and concise safety instructions and advice on what to do when facing another natural disaster.● 3. Conducting community-level trainings and drills on emergency preparedness and response.● 4. Establishing evacuation plans and safe shelters that are accessible and inclusive.		
--	--	---	--	--

Annexes

1. GBV Rapid Assessment Tool

Part A – General information	
Date:	Organization:
Canton:	Team names:
City:	Collective shelter/Area/Site:
Estimated number of affected population: Female: Male: Total:	Type of visit:
Part B – General observations (from observation and general interaction with population)	
General observations about population	
<input type="checkbox"/> Sign of hunger/ Abnormal thinness <input type="checkbox"/> People with disability on sight <input type="checkbox"/> Crowded shelters <input type="checkbox"/> Enough food <input type="checkbox"/> Other (elaborate)	<input type="checkbox"/> Sicknesses <input type="checkbox"/> Elderly people <input type="checkbox"/> Enough spaces for IDPs <input type="checkbox"/> Enough clothing
	<input type="checkbox"/> People with injuries on sight <input type="checkbox"/> IDPs <input type="checkbox"/> WASH facilities <input type="checkbox"/> Enough clean water
Affected population observed:	
<input type="checkbox"/> Pregnant women <input type="checkbox"/> Female Headed Households <input type="checkbox"/> Women with disabilities <input type="checkbox"/> Other (elaborate, i.e. minority and vulnerable groups)	<input type="checkbox"/> Lactating women <input type="checkbox"/> Unaccompanied children <input type="checkbox"/> LGBTQI+
	<input type="checkbox"/> Single women <input type="checkbox"/> Adolescent girls <input type="checkbox"/> Sex Workers

Estimate of number of displaced households

- 100 -250
- 250 -500
- 500 - 750
- 750 - 1000
- 1000 - 1,500
- 1,500 - 2,000
- Other: _____

Availability of GBV/Protection services

- Yes No Functioning to some extent (elaborate):
- Medical Care Psychological First Aid Security (Police, Military, Community) Safe Shelter for Survivors
- Water Food Non-food Items Shelter Toilets Showers Electricity Internet
- GBV Case Management Psychosocial Support (group) Psychological Support (individual) Cash
- General Protection Child Protection Legal Assistance Complaints mechanisms PSEA Messaging
- WGSS OSC Child Friendly Spaces Community Centers

Availability of Reproductive Health services

- Yes No Functioning to some extent:

If yes/functioning to some extent, select below the available services:

- Antenatal Care
- Family Planning
- Referrals for delivery facility (natural deliveries)
- Provision of C-section
- Postnatal Care
- Midwife Nurse Gynecologist General Doctor Surgeons GBV focal point
- Clinical Management of Rape Services
- PPE Emergency contraception STI Medicines Hepatitis B vaccination Tetanus vaccination
- Forensics examination (on site or by referral)
- Any barriers in accessing health services?
- Other services and observations if possible from the location (privacy, confidentiality, etc):

People of the community can move freely in and out of the area Yes No

If No, select some of the reasons deterring people from moving freely (many can apply)

Road blocks

Insecurity due to instability in buildings from the floods

Destroyed buildings

Lack of identity documentation (many people lost their documents)

Restriction by armed group controlling the area

Insecurity on the road area

Concern of being arrested outside the area

Fear of movement

Sniping activities

Lack of transportation? Yes No

Land mine/unexploded ordnance

If yes, mention the reason: Not likely, but with the floods, landmines could have moved, although apparently it is not an area prone to this.

Other (elaborate)

If Some population groups, select these groups (many can apply)

People with medical treatment needs

Children (girls and boys under 18)

Students at time of exams

Women (18-59)

Public sector employees

Men (18-45)

IDPs

Refugees

Men (46-59)

People with connections to outside groups

Elderly

Other (elaborate)

Protection and GBV issues the community are exposed to:

Protection services available in the community (select below, many can apply)

- Registration of civil acts/availability of civil
- Services for children at risk (separated, orphan, child documentation head of household, etc.)
- Psychosocial services
- Services for women survivors of sexual or gender-based violence.
- Family reunion services
- Caring services for elderly persons
- Medical
- Children playground
- Psychosocial support
- Service for disabled persons
- Psychological first aid
- Legal assistance
- Other (elaborate)


Additional Comments:

2. Focus Group Discussion Guide

My name is _____ and this is my colleague_____. I work for _____ and she works for _____. We would like to ask you some questions about the issues affecting women and girls in your community so that we can better understand your needs and concerns about these groups.

We are not asking for your specific stories; please do not use any names. We are asking about things that you have heard of or know to be happening. The questions we are going to be asking you today are about the way you live every day. If you feel uncomfortable at any time you can leave. **Participation in the discussion is completely voluntary and you do not have to answer any questions that you do not wish to respond to. You may leave at any time.**

My organization and I are assessing needs and analyzing the opportunity for programming in_____ (specific location). I am conducting a series of group discussions to learn from different community members about community dynamics, services available, safety and security concerns and/or different types of barriers and violence affecting the community with a focus on women's and girls' experiences. Your answers will help me to understand whether and how to establish (or renew) a Women and Girls Safe Space.

A decorative pattern of white and orange chevrons pointing to the right, located at the top left of the page.

A safe space _____ (add the local name for your WGSS or the term used in general in the setting) is “a structured place where women’s and girls’ physical and emotional safety is respected and where women and girls are supported through processes of empowerment to seek, share, and obtain information, access services, express themselves, enhance psychosocial well-being, and more fully realize their rights. In this sense, safe spaces can be a key means of building women’s and girls’ social assets.

We have nothing to offer other than listening; there will be no other direct benefits related to this time we spend together today.

We do not want your names and will not be writing your names down. We also will not present any other potentially identifying information in anything that we produce based on this conversation. We will treat everything that you say today with respect and confidentiality, and we will only share the answers you give as general answers combined with those from all the people who speak to us.

We ask that you keep everything confidential, too. Please do not tell others what was said today.

_____ is taking notes to make sure that we do not miss what you have to say. I hope that this is OK with you?

We really want to hear what you have to say, and I want you to answer my questions however you want. Please feel free to talk and share whatever you want to share with us. Having different answers is ok. There is no right or wrong answer to any question. Our goal is to understand the problems so that we can improve our services and best meet your needs.

I expect our discussion to last for about one hour maximum.

Do you have any questions before we begin?

Location: _____ Serial number of FGD: _____

Date of FGD: _____ Duration (start time & end time): _____

Name of moderator: _____ Name of note-taker: _____

Population: (Refugees/Host?)

Age range of respondents (e.g. 20-23 y/o):

Characteristics of FGD participants

Number of participants by age and ethnicity groups

Age & Ethnicity	10-14	15-19	20-24	25-40	>41
Host community					
Refugees/Migrants					

A. We would like to ask you a few questions about the security of women and girls after the flood:

1. In this community, which are the places women / adolescent girls feel safe and acceptable to go to?
2. In this community is there a place where women and girls feel unsafe or try to avoid? (Day? Night?) What is it that makes this place unsafe?
3. From whom can women and girls seek assistance in case of a security problem?
4. According to you, what could be done in this community to create a safe environment for women and girls?
5. Do you think women and girls are at risk of any type of violence after the floods?
6. What happens to the actors of these acts of violence against women and girls? Are they punished?
7. What do women and girls do to protect themselves from violence? What does the community do to protect them?

B. We would like to ask you some questions about the services and assistance available since the crisis (the community mapping tool can also be used to approach this topic):

1. When a woman or girl suffers this kind of violence, where does she feel safe and comfortable going to receive medical treatment?
2. Are there other services or support (counseling, women's groups, legal aid, etc.) available for women and girls that have experienced or are experiencing violence?
3. While many services support women and girls in different ways, the WGSS provides the essential space where women and girls can recover from violence and have enough safety, support and space to shape their strengths and skills to contribute to their community. Help us imagine how this space would look like (times, activities, location).

D. We would like to ask you some questions about your needs, and the items we are providing you with today

- Do you feel that these kits help women/girls take care of themselves better and manage their personal needs?
- Where would be a good location to distribute these items to women and girls? At what time? Who would you think is the most appropriate to give the kits?
- What are the basic hygiene products that you need to stay clean and healthy?
- Do you have what you need for washing your body? If not, what would be useful?
- What kind of items would help you to move around more freely and to spend time outside your shelter/camp/residence? (e.g. probe existing kit items including preferred garments for covering/modesty, safety items like portable lights/whistles, or weather-appropriate footwear etc.)
- Do you need any specific clothing items to carry-on your daily tasks?
- What items do you miss from home that, if you had them, would provide comfort?
- What types of sanitary materials do you usually use during menstruation?
- If the answer to the question on types of sanitary materials is reusable cloth, also ask:
 - Do you have safe access to water to wash the cloth?
 - If you use disposable items, how and where do you dispose of them in the area?
- What kind of packaging would you like items to be in? What is more useful? (bag, pack, bucket).

A decorative pattern of white and orange chevrons pointing to the right, located at the top left of the page.

CONCLUDE THE DISCUSSION

3. Thank participants for their time and their contributions.
4. Remind participants that the purpose of this discussion was to better understand the needs and concerns of women and girls since the crisis.
5. Remind participants of their agreement to confidentiality.
6. Remind participants not to share information or the names of other participants with others in the community.
7. Ask participants if they have questions.
8. If anyone wishes to speak in private, respond that the facilitator and secretary will be available after the Meeting