

## PROTECTION CLUSTER COMPONENT OF HUMANITARIAN OPERATIONAL PLAN FOR KP

<b>Cluster lead agency(ies)</b>	UNHCR and IRC Co-Lead Sub-Clusters/Working Groups include Child Protection, GBV, Rule of Law and Justice, Registration, Age and Disability, Housing, Land and Property lead by designated agencies as outlined in cluster organogram
<b>Implementing agencies</b>	Includes NRC, IRC, CERD, FRD, Intersos, RIPORE , IOM, Khwendo Kor, Kado, EHSAR, the edifiers, PADO, Just Peace, SPADO, Hayat Foundation and many others
<b>Number of projects</b>	Currently - UNHCR/IRC protection project in Jalozai camp, community services in three camps, and UNHCR/NRC ICLA centres in Peshawar and Kohat. There are child friendly spaces in Jalozai and New Durrani camps.
<b>Cluster objectives</b>	<ol style="list-style-type: none"> <li>1. <b>Registration of All IDPs</b></li> <li>2. <b>Equitable access to assistance and are protection from rights abuses</b></li> <li>3. <b>Access to safe and voluntary durable solution for IDPs</b></li> <li>4. <b>Ensure that children at risk in each stage of displacement are provided with adequate support and timely response</b></li> <li>5. <b>Provide holistic multi-sectoral response to GBV and ensure survivor centred services</b></li> <li>6. <b>Meet the Information needs of IDPs</b></li> </ol>
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### Needs analysis

- a. **Fresh displacements – According to estimates by FDMA and OCHA, the total of number of families that would be displaced over 2012 is estimated at 15,000 families.**

Newly displaced IDPs will need to be registered. Currently, IDPs are registered when the head of household has a CNIC and is from a conflict notified area. Barriers to registration must be overcome, as in the past a significant number of IDPs have been unable to register.<sup>1</sup> Issues identified by protection cluster, including through assessment missions and IDP Vulnerability And Profiling (IVAP) include:

- Lack of documentation (separated/widowed women face particular barriers when they do not have their CNICs, because they do not have their late husbands CNICs, or because their husbands are living with their second wives).
- Lack of information on the registration process and/or how to obtain civil documentation
- Non-verification by local authorities i.e. NADRA (e.g. because they had registered elsewhere before, because the head of household was suspected in engaging in militant/criminal activity)
- Place of origin falling outside notified areas

The registration process needs to be technically upgraded and a widely accepted strategy, that would ensure inclusion of all IDPs on a needs basis, needs to be developed and implemented. As the registration process provides a unique opportunity to profile the needs of IDP communities and support informed protection interventions, it is vital that all women and children (under 18 and regardless of vulnerability) are registered. While this was done in some instances in 2011, it is a must in all instances.

No systematic monitoring has been undertaken of protection issues during flight, but protection concerns continue to be raised with the protection cluster, especially with respect to vulnerable groups. Monitoring and assessments are required to identify needs during flight and to determine appropriate interventions such as advocacy, psycho-social support, and the establishment of protective spaces for newly displaced women and children. Rapid Protection Assessments also need to be conducted in the immediate period following displacement in order to identify and provide initial insight of the protection situation of affected persons.

- b. **Protracted displacements - 133, 234 families at start of the year**

Unregistered IDPs who missed their “registration window” should be identified and then registered or provided with exceptional support.<sup>2</sup>

<sup>1</sup> According to IVAP, some 34 per cent of IDPs in protracted displacement are not registered

<sup>2</sup> 12,800 protracted IDP families with CNICs from notified areas were identified by IVAP and will be registered in the early months of 2012. Several thousand additional protracted IDPs remain unregistered including because they could not access a registration centre, did not have the correct civil documentation, or were from areas that were not notified

The level of services provided in the three different camps varies, with more services available to IDPs in Jalojai than in Togh Serrai or New Durrani camps. While there are community service programs in the three camps, Jalojai is the only camp where there is a grievance redressal mechanism system and protection monitoring in place (e.g. for IDPs who have been blanket de-registered or denied assistance). There are child friendly spaces in two camps<sup>3</sup> and community services programming in all three camps. Interventions to support children, women, elderly and people living with disabilities need to be continued and strengthened.

The majority of IDPs (some 90 per cent) stay with host families or in rented accommodation. Registered IDPs are provided with food and NFIs but little additional support in most districts; they often lack information on services available and decisions affecting them. Many have now been in displacement for over one or two years, and the risks they face have changed. Key concerns relate to barriers to access livelihood opportunities, educational and medical services.<sup>4</sup> Apart from ad hoc monitoring and assessments that can be done by protection cluster missions, there is a desperate need for monitoring of off-camp IDPs access to services and enhanced information regarding return intention and continued obstacles for return. Monitoring and appropriate interventions to protect the safety and security of off-camp IDPs and to promote access to justice is also needed, especially as evidence points to an increase in risks to IDP women and children such as early marriage, domestic violence and sexual abuse of women and children.<sup>5</sup> Provision of timely and accurate information to the IDPs regarding life-saving assistance and policy level decisions by the government becomes a challenge in absence of a coherent system of information dissemination for the IDPs.

Finally, there are pockets of families within host communities that have become more vulnerable over the last couple years. Assistance inside these districts should also include and responds to their needs where possible. Programs for IDP and host families, including life skills, vocational training with market opportunities, documentation support including universal birth registration, DRR are required.

**c. Transitional period - According to estimates by FDMA and OCHA, the total of number of families that would return over 2012 is estimated at 80,000 families.**

It is imperative IDPs are provided with assistance to access a durable solution, and also that safeguards are included in any returns process to ensure that returns are safe and voluntary. This includes access to information about the safety and suitability of the returns area, independent monitoring of the informed and voluntary nature of the return process, and provision of grievance redressal mechanisms. Mine risk awareness is important prior to return, particularly for children. Likewise, as are programs targeting vulnerable groups including women and young people in life skills, vocational skills and self protection – as prevention of potential recruitment. Support is also required to strengthen government structures such as the Child Protection Units and the police to increase capacity to monitor and respond to identified protection, child protection and GBV issues.

According to IVAP, 94 per cent of IDPs in KP do want to return home; 6 per cent however do not and either need to be supported to access an alternative durable solution. Others, such as the Loesum corridor group of 1,200 from Bajaur, are not able to return are in need support for an alternative.

In addition to the 2012 caseload, there are also a number of residual IDPs from areas that were de-notified in 2011 (mostly from Bajaur and Mohmand) who have been blanket de-registered. A grievance redressal mechanism must be available to those who would not be safe if they returned to appeal de-registration. Furthermore, a mapping exercise would be valuable in determining whether any persons in this group do want to return but have been unable to do so without assistance.

## **Revised strategy**

### **a. Coordination and capacity building**

UNHCR and IRC will maintain and strengthen coordination of protection cluster in 2012. UN-Habitat and UNDP will take the lead in activating, and coordinating the protection work related to HLP and access to justice/rule of law, in addition to the longstanding GBV and CP sub-clusters led by UNFPA and UNICEF respectively. Working groups will concentrate on specific issues, e.g. registration, assessment/information management, and Age and Disability. Focal points will be identified to mainstream protection with other clusters. In addition to focused trainings provided to the provincial cluster and government

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<sup>3</sup> Jalojai and New Durrani camps

<sup>4</sup> In the protection cluster mission to off-camp Sadda hosting communities in Kurram in November 2011, for example, delegates were told that IDP children had been turned away from local schools which were already under huge strain

<sup>5</sup> Includes cluster assessments, Save The Children studies in 2010 in Kohat and Hangu

stakeholders, district level coordination mechanisms, established in 2011, will be strengthened. The protection cluster will continue to coordinate with government authorities in KP and FATA.

**b. Access:**

The protection cluster will advocate with other clusters and agencies to support the implementation of the camp SOPs. The protection cluster will also liaise with relevant stakeholders to support advocacy for improved access to IDPs as it is expected that access will remain a concern 2012.

**c. Registration:**

The protection cluster will support development and implementation of a registration strategy at the same time as it provides support to those excluded (prioritising fresh displacements). The strategy will include the introduction of relevant technology (hard and software) to improve efficiency of registration process, including data collection, management and analysis of registered IDPs. Mobile registration units would also assist unregistered IDPs and advocacy will be required to overcome barriers.

**d. Grievance mechanisms:**

Currently limited to Jalozai, grievance desks – staffed by males and females - must be available as a top priority in camp and off camp communities. This will be particularly critical in areas where returns are taking place to ensure that IDPs can register if they need special assistance to return, or to appeal de-registration if they would be at risk on return. Follow-up monitors working closely with the grievance desks would enable the validity of concerns registered at the desk to be determined, if necessary. The protection cluster will support efforts to ensure the timely follow-up of concerns registered. Grievances desk should cover all issue referred to them, a mechanism is needed to link them with host communities Muslahathi committees, Shura and Jirga. As the IDPS's are more used to with indigenous system of Jirga and less aware of the legal system of Pakistan. Capacity building in Updating of jirga with restorative justice system, conflict transformation and linkages development with local host shura and jirga and police and developing proper referral mechanism

**e. Monitoring:**

Monitoring at all stages of the displacement process is crucial to identify vulnerable groups and rights issues. Monitors can refer vulnerable IDPs to services, solve problems locally where possible, and share information on persistent concerns with the protection cluster for follow-up and advocacy as appropriate. Monitoring during the transition process is a priority to ensure that de-notified areas are safe for returns, and that decisions taken to return are informed and voluntary. Monitoring of off-camp IDPs and their access to services including health, education and social welfare, as well as safety and security concerns, is also crucial. In the absence of any funded protection monitoring programs, members of the cluster will undertake joint assessment missions on an ad hoc basis, this is however no substitute for systematic monitoring. Local Shura needs training and capacity building in monitoring, to update their knowledge to address vulnerable groups issues, record it and referred it to other implementing partners.

**f. Humanitarian Communications:**

Humanitarian Communications will focus on meeting the information needs around the registration and transition process to inform IDPs of decisions that affect them, assistance available and redressal mechanisms possible. Communicated messages will be rights based and will be coordinated with protection cluster to also address key needs and issues such as prevention of separation of children, mine risk awareness, prevention and response to GBV and available services. Awareness raising in all these subject are important since GBV and children cases are taken as family issues in the Pukhtoon culture.

**g. Case management including legal/administrative advice, referral and assistance and psycho-social support**

Case management including and in addition to the two current centres that exist in Peshawar and Kohat are required. These will include support IDPs who are struggling to access civil documentation, need assistance with legal documents or require legal aid. Off-camp areas remain a priority. Psycho –social awareness raising & treatment is the crux of the problem, as in the high context society of IDP's, shame, honour, what other will say or think and taunting are the immediate causes of any violent conflict

**h. Priority intervention to support children at risk**

The strategies and response have been guided by the CCC and the KP and FATA Child Protection policies to ensure targeted response to the different needs of vulnerable children. Priority is given to ensure that universal birth registration takes place, that all children are registered and that their status is monitored. In addition, strengthening the capacity of agency and district governments and of the local communities to respond to child protection needs is a priority. The concentration on community based child protection response is therefore highlighted. Building the resilience of communities to identify risky situations and respond by preventing expose of vulnerable groups to risks is enhanced through DRR and awareness sessions conducted at the community level. Mapping of service providers across sectors is also prioritized so that comprehensive multi-sectoral response is provided to women and children in need. Its need in every camp a HJJRA( Pukhtoon traditional community centre) where all elders sit in the morning time, while youth and children at afternoon and evening. Information are shared at all level of the community, Reactivation of Hujra will help a lot in prevention, prior intervention and rehabilitation process of women and children

**i. Priority interventions to support women at risk of or experiencing GBV**

The priority response to and prevention of GBV is women friendly spaces with provision of psychosocial support. In addition, to ensure the multi-sectoral needs of the survivors, GBV multi-sectoral case management is prioritized. Income activities (vocational skills development) for women and vulnerable families to ensure their economic support and minimize the risk to GBV including sexual exploitation, survival sex, forced marriages, and forced labour. Tribe, clan, sub clan based Shura and jirga where each tribes elders are given a chance to check and address women issue in their own tribes.

**Cluster objectives**

<b>Objective one: All IDPs are registered</b>		
<b>Outcomes</b>	<b>Indicator</b>	<b>Activities</b>
Technically advanced registration and data management	Upgrade in Technology in use (hardware and software)	Solicitation and delivery of available PDAs
	Decrease in labour intensive data management	Software and database development
	Complete and timely monthly fact sheets issued by registration working group	Training for local authorities and IPs
	Disaggregated date of women and children (under 18 and regardless of vulnerability)	Additional/consistent data collection during registration
Registration of new and protracted IDPs	80 per cent of fresh IDPs registered	Registration including mobile units and monitoring
	Percentage of unregistered IDPs drops from 34 per cent	Advocacy and support (including to remove barriers to registration or re-open registration desks)
	(searching for a baseline number of some kind relating to vulnerable groups)	Case management of IDPs who have not been able to register e.g. because they do not have CNIC
<b>Objective two: IDPs have equitable access to assistance and are protected from rights abuses</b>		
<b>Outcomes</b>	<b>Indicator</b>	<b>Activities</b>
Identification of vulnerable IDPs and protections concerns	Number/nature of vulnerable groups identified and documentation of protection concerns	Monitoring
		Advocacy
		Referrals/mapping of service providers and the quality of services
IDPs are supported to access services	IDPs using services; number of grievance desks; number of advocacy interventions	Humanitarian communications
		Case management
		Grievance desks
IDPs protected from rights abuses including discrimination, GBV and violations of children's rights	Concerns addressed through advocacy and cases managed through protection centre in each district	Monitoring and advocacy
		Case management
<b>Objective three: IDPs able to access to safe and voluntary durable solution</b>		
<b>Outcomes</b>	<b>Indicators</b>	<b>Activities</b>
IDPs are protected from return to risk	Number of FGDs undertaken with IDPs asked to return; number of assessments of safety of return areas; number of appeals resolved at grievance desks	Return monitoring including FGDs with transition IDPs; independent assessment of safety of return areas
		Grievance desks for IDPs who would be returned to risk and follow-up
		Hum communications and rights awareness to ensure IDPs know their rights and remedies, and area of origin information

IDPs are assisted to return or to access another durable solution	Number of percentage of off-camp IDPs that benefit from 'transition assistance' to return; number of individual concerns regarding return addressed; number of transition packages that enable IDPs to make their own choice of durable solutions	Hum communications and rights awareness to ensure IDPs know their rights and remedies
		Advocacy to ensure vulnerable off-camp IDPs provided with return support and that camp and on-camp IDPs who need special assistance to return can access support
		Advocacy to ensure that transition support is also available to de-registered IDPs who wish to resettle/reintegrate
<b>Objective four: Ensure that children at risk in each stage of displacement are provided with adequate support and timely response</b>		
All children are in their families; separated and unaccompanied are in family-based or an appropriate alternative care	Percentage of separated / unaccompanied children that are united with their families or receiving appropriate alternative care	Monitoring of risks to children
		Grievance redressal and referral
		Rolling out of SOPs on separated, mission and unaccompanied children at district level.
Strengthened child protection mechanisms at community, camp and in communities who are returning.		Community based child protection centres, protection spaces for women and children in an integrated approach
Targeted response to needs of children In protracted displacement situations and in transition to areas of return.		
<b>Objective 5: Provide holistic multi-sectoral response to GBV and ensure survivor centred services</b>		
GBV Case Management: Multi sectors needs of the GBV survivors are ensured, a functional referral mechanism in place, to facilitate the survivors who reported cases of violence;	-Linkages developed with the other sectors like health, protection, Food etc - GBV cases are linked to health services while 80% of the cases get psychosocial support.	Strong referral linkage with the other sectors so as to ensure holistic multi-sectoral GBV response and to facilitate women through the Women Safe Spaces (can be integrated/linked with protective child friendly spaces?)
		Initiate GBV case management to ensure improved access of GBV survivors to secure and appropriate reporting, follow up and protection
		Provide health services providers (Reproductive Health) with relevant training and supplies(Rape Treatment Kit & PEP kits) and ensure appropriate psychosocial interventions are in place
Vulnerable groups are provided with psychosocial support	70% of Vulnerable groups/individuals are provided with psychosocial support	Women/child friendly spaces
		Provision of psychosocial support to women and adolescent girls affected by conflict, with special focus on survivors of gender based violence;
Livelihood, skills development opportunities available for the women and adolescent girls.	Number of women and adolescent girls provided with vocational skills trainings	Vocational skills training
<b>Objective 6: Meet the Information needs of IDPs</b>		
<u>IDPs have access to relevant and required information about the registration processes, return</u>	<u>-Number of formal and informal information campaigns</u> <u>-Number of people reached</u>	<u>Broadcast of radio campaigns</u>
		Print campaigns

<u>process, protection issues, available services etc.</u>	<u>through awareness sessions (gender segregated)</u>	Awareness sessions in the target areas
		Dissemination of information products