



## COVID 19 Response and Preparedness Related Measures

Version 31 March 2020

This operational advisory note in relation to the COVID-19 outlines a number of priority actions to be undertaken by National Protection Clusters including the Areas of Responsibility. It is intended as a quick reference tool to support colleagues in the field who are working on preparedness and response to the outbreak. This advisory note is a living document. This advisory note is complemented by two annexes: 1- Overall protection programming considerations (V1 attached) 2-Considerations for specific protection programmes (coming next week).

### Key National Protection Clusters Actions

All national protection clusters are advised to take actions in the following priority areas:

#### 1- Advocacy

- **Develop a common set of COVID-19 advocacy messages** calling for i) equitable access to health care, ii) the inclusion of all – including groups at higher protection risks - in national preparedness and response plans, and iii) attention to the potential negative impacts of national plans and measures on the enjoyment of human rights. *Resources: GPC COVID-19 Advocacy; GPC Country specific advocacy notes ones from South Sudan, Mozambique and Myanmar.*
- **Carry out joint advocacy work** and messaging- create alliances, raise awareness and get the advocacy messages across - in support of the overall COVID-19 response and on behalf of groups at higher protection risks.

#### 2-Risk communication and engagement with communities

- **Decide on modality for risk communication and community engagement** defining the risks, working modalities and modes of communication with communities. Consider upscaling of effective communication channels taking into account connectivity and computer literacy. Develop and share regular, accurate tailored information. *Resources: IRC COVID-19 Risk Communication and Community Engagement Guidance COVID-19; UNHCR Risk Communication and community Engagement; UNHCR Age, Gender and Diversity Considerations –COVID-109.*
- **Participate in the Risk Communication/Community Engagement (RCCE) pillar** of the Covid Incident Management Team or Taskforce where they exist<sup>1</sup>

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<sup>1</sup> The coordination of disease outbreaks often involves activation of dedicated coordination platforms & Incident Management Teams to implement the response using a pillar system, with each pillar representing a key component of the public health response (e.g. surveillance, case management, risk communication and community engagement /RCCE). The interface between this IMT and existing humanitarian coordination platforms is important as humanitarian partners can contribute to the work of these pillars, based on their technical expertise & operational presence. The Protection Cluster should first liaise with the Health Cluster to determine where it could contribute e.g. through the RCCE pillar.

- **Adopt strategies to counter social stigma, misinformation and rumors.** In addition to health and hygiene promotion messaging, develop communication messaging on specific protection risks and mitigation measures, focusing on what people can practically do to reduce health and protection risks. **Include a positive narrative into the communication with communities**, focusing on available solutions and featuring examples of social collaboration and solidarity practices used by communities and individuals to deal with the pandemic.

### 3- Business continuity and remote working modalities

- **Prepare/update business continuity plans** adopting alternative modes of working modalities including teleworking arrangements, in line with WHO guidelines to prevent and mitigate the spread of the virus. Increase skills and capacities of protection actors to work remotely through tools and trainings, webinars and online tutorial and set up a country dropbox to facilitate sharing of information between members of the cluster.
- **Prepare a contingency plan and other preparedness measures to ensure continuity of critical protection services.** Identify operational solutions to **switch to remote delivery** as well as adapt relevant SOPs. **Ensure contact list of critical protection actors are up to date.** This list can include: i) protection service providers; ii) community focal points; iii) key governments and local authorities; etc.).
- **Ensure negotiation on humanitarian access** is taking place to enable partners to continue the delivery of critical humanitarian assistance and protection services, while i) avoiding unnecessary movements and observing social distancing, ii) ensuring the health and safety of members of the cluster through the provision of hygiene kits, hand gels and protective equipment, and iii) ensuring the security of staff through security assessment and prevention measures against stigmatization, xenophobia and scapegoating.

### 4- Analysis and monitoring

- **Adapt protection monitoring** focusing on the protection environment and the protection needs of the affected population, including as they relate to the impact of COVID-19 and government restrictions. **Actively engage with monitoring processes of partners and other clusters.** *Tip: Consider monitoring the issues listed in this guidance (IAWG)*
- **Conduct gender and protection analyses** to identify protection risks and needs, inequalities, gaps, and capacities that should subsequently inform the response plan and implementation. **Issue regular (weekly if possible) analysis and monitoring reports.**

### 5-Funds and Preparedness & Response Plans:

- **Prepare/update program criticality plans identifying i) the most critical activities that needs to be maintained** and can be realistically implemented in the current operational context; ii) ) **critical gaps and new activities that need to be implemented** to respond to the COVID-19 outbreak. *Tips: see here example from the Iraq Protection Cluster ([https://www.globalprotectioncluster.org/wp-content/uploads/NPC-Priority-HRP-activities-during-COVID-19-13-March-2020\\_FNL-002.pdf](https://www.globalprotectioncluster.org/wp-content/uploads/NPC-Priority-HRP-activities-during-COVID-19-13-March-2020_FNL-002.pdf))*
- **Engage in the revision of Humanitarian Response plans** and ensure that access to rights and protection services continue to be prioritized in the response. Advocate for the continuity of essential protection services while ensuring that the inter-sectoral humanitarian response takes into account the specific needs of people at higher protection risks.
- **Submit inputs to national preparedness and response plans to mainstream protection**, make visible the critical situation of people at higher protection risks, and ensure that health and government measures do not expose vulnerable population groups to additional protection risks.

- **Develop a COVID-19 protection cluster response package of services** the cluster intends to deliver. In close collaboration with other clusters, define what multisector package of services should be provided and by whom.

## 6- Coordination, partnerships and support to government

- **Adapt your coordination modalities and actively engage in the intercluster and other outbreak coordination mechanisms for COVID19 response**<sup>2</sup> Participate in relevant national COVID-19 coordination structures (COVID-10 Task Forces) and ensure coordination with public health ministries, Resident Coordinator, HCT/UNCT, WHO, the Health Cluster, and other relevant clusters/actors to ensure the inclusion of people at higher risks of protection and protection mainstreaming in national preparedness and response plans.
- **Ensure there is a protection cluster coordination focal point** and actively engaged in coordination structures of the government, OCHA, WHO and the Health Cluster. *Tips: are examples of the structures and where the protection cluster is active in Iraq, Ukraine, Chad and Burundi.*
- Step up collaboration with the government, WHO, HCT/UNCT, and other clusters through **sharing of protection information**, data and analysis, identification of critical protection gaps and risks faced by populations of concern.

## 7- Self-Care

- Ensure that all staff, cluster members, community members/leaders engaged in activities are trained on COVID-19 self-protection and have access to necessary personal protective equipment as per organizations "duty of care policy" can access medical and psychological support including through telemedicine, tele counselling and peer support networks.



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