This brief is a summary of the key insights from the full 2019 Global Protection Cluster (GPC) Annual Review, which can be found here. The review considers the status of the centrality of protection in humanitarian action, including progress of its development and implementation. It builds on the previous GPC-led Centrality of Protection Annual Reviews which presented a range of findings based on thematic issues and country case studies. Although the review intends to set the scene for progress of the centrality of protection in 2019, many of the reflections also apply to the current situation in 2020, especially against the backdrop of the COVID-19 pandemic reinforcing the requirement of a joined-up protection-oriented approach for any humanitarian response.

**OBJECTIVES OF THE REVIEW**

- Have an inclusive process to collect information and examples related to the centrality of protection in 2019.
- Provide insights and examples of what the centrality of protection looks like in practice to a variety of actors, regardless of whether they are expressed in formal ‘protection language’.
- Identify existing and proposed elements of the centrality of protection in practice – ways in which collective protection outcomes can be pursued.

The 2013 IASC Statement on the Centrality of Protection in Humanitarian Action was the culmination of serious reflections within the humanitarian system about the place of protection and human rights. The experiences and actions of the United Nations in its humanitarian operation in Sri Lanka were reviewed in detail in the Secretary-General’s Internal Review Panel. The conclusion that the ‘UN’s failure to adequately respond to events like those that occurred in Sri Lanka should not happen again’ resonated powerfully within the humanitarian community. The resulting Human Rights Up Front Initiative and the 2013 IASC Statement on the Centrality of Protection firmly placed human rights and protection at the core of humanitarian action; explicitly setting out the accountability of ‘Humanitarian Coordinators, Humanitarian Country Teams and Clusters to implement this commitment in all aspects of humanitarian action’ alongside the responsibility of leadership by the IASC Principals. Building on the IASC’s commitment to the centrality of protection, the 2015 Whole of System Review of Protection provided a detailed look at how ‘humanitarian actors relate to protection, from a conceptual, strategic and operational perspective’. Its reflections and findings remain substantially relevant to the current role of protection in humanitarian action.
‘Protection of all persons affected and at risk must inform humanitarian decision-making and response, including engagement with States and non-State parties to conflict. It must be central to our preparedness efforts, as part of immediate and life-saving activities, and throughout the duration of humanitarian response and beyond.’

_IASC Principals of the Inter-Agency Standing Committee (IASC), December 2013_

**IASC Policy on Protection in Humanitarian Action 2016**

The IASC Protection Policy articulates the main aspects of the IASC Statement on the Centrality of Protection by detailing methods and processes for a system-wide strategic approach to protection risks and violations; contributing to protection outcomes (including those related to the most critical and urgent risks and violations); and pursuing accountability through identified complementary roles and responsibilities. Reflecting many of the Whole of System Review recommendations, the Protection Policy describes the main roles and responsibilities for realising the centrality of protection ‘in all aspects of humanitarian action and across the HPC,’ and emphasises the importance of all humanitarian actors’ involvement ‘irrespective of their sector-specific expertise.’ In the Protection Policy, this involvement is captured by four primary concurrent commitments:

1. Addressing protection issues that intersect with formal mandates and sector-specific responsibilities.
2. Engaging collectively to achieve meaningful protection outcomes.
3. Mobilising other actors within and beyond the humanitarian system.
4. Evaluating commitments and progress of the centrality of protection.
KEY ISSUES AND INSIGHTS ABOUT THE CENTRALITY OF PROTECTION

The points below are the result of a desk review and conducted interviews. They highlight how the centrality of protection should be more than protection mainstreaming and not only implemented by protection-specialised actors. Furthermore, having a collective and system-wide approach to protection, using the comparative strengths of each actor, as set out in the IASC Protection Policy, needs more strategic efforts from global and country humanitarian leadership to become operational.

Recognition of the centrality of protection not yet matched by its presence

- Within the humanitarian system, protection is recognised and mostly considered essential. In addition to the IASC Protection Policy, there are many tools designed to support its implementation - global and national support documents such as frameworks, toolkits, guidance, and checklists. However, the visibility and acknowledgement of the centrality of protection is not matched by its implementation in practice. In practice, the relevant humanitarian leadership does not always use protection as a strategic tool to lead on addressing ‘the most critical and urgent risks and violations.’

- There are many references to protection crises in humanitarian response plans, HCT protection strategies and other processes to place protection at the core of humanitarian action. However, these references are not consistently and concretely featured in programming and response activities.

- Challenges to implementation involve:
  - Finding a common language across sectors and amongst all actors in which to come together to articulate and implement protection as the basis for humanitarian action.
  - Not having the foundations for any system-wide protection response - such as regularly updated protection risk analyses; criteria for identifying critical protection issues; quality protection mainstreaming.
  - Lack of coherency in implementing the centrality of protection.
  - Identifying ways to define and measure intended impact.
GOOD PRACTICE

Global framework on integrated protection approach

CP-EiE Collaboration in Coordination Framework: Child Protection AoR and Global Education Cluster

Initiated in 2019, this framework aims to strengthen the collaboration between Child Protection and Education coordination groups. The two sectors have identified the opportunity to enhance the quality, coverage, and accountability of their responses. The framework provides the steps, tools and examples to support predictable and coherent collaboration throughout the HPC, including needs assessment and analysis, response planning, targeting and costing, implementation and monitoring.
Identification of system-wide protection priorities remains difficult

- Making unanimous HCT decisions on priorities from a system-wide perspective and then finding agreed ways to address these collectively remains an obstacle to the centrality of protection, particularly at HC and HCT levels.

- There are many efforts to systematise data collection and subsequent analysis to identify risks, vulnerabilities and coping strategies of people affected by crisis. Nevertheless, it can be difficult to prioritise these issues for a system-wide response and understand how different actors are contributing to such a response.

- Actors may concentrate on activities in which they:
  - have experience
  - have already planned or received funding for; or
  - consider a priority from the perspective of their mandate, expertise or available capacity.

- Actors may focus on themes with which they are most familiar, such as displacement issues, with little attention to non-displaced people. There is not always sufficient understanding of the vulnerabilities faced by all people affected by crisis, with too much focus on identifying people based on their actual or perceived status.

- Some protection issues may be considered too sensitive or political for humanitarian actors to address, especially when they involve the authorities as a party to conflict; raising them could hamper delivery of assistance; or could contribute to exacerbating protection risks.

Efforts to balance the operational aspects of providing humanitarian assistance with strategic engagement with parties to the conflict and other duty-bearers are not always consistent amongst humanitarian actors and their leadership.
GOOD PRACTICE

Identifying system-wide protection priorities

Iraq: Camp Departure Follow-up Survey

Developed in response to 2019’s wave of camp closures by the Iraqi authorities and related forced returns, the Protection and CCCM Clusters, jointly with the Iraq Information Centre conduct follow-up calls with households within one month of their departure from camps. The focus is on finding out about people’s situation upon return, including protection issues faced, and setting these out in a dashboard. This data can be analysed and used for increased monitoring of returns and to identify appropriate response activities (for all stakeholders including humanitarian and development actors) as the Iraqi Government has announced its plans to close all camps by the end of 2020.
Challenges with measuring and achieving collective protection outcomes

- Measuring the impact of any protection outcome is difficult. This is partly because of the challenge to measure the reduction of risk in objective ways. There are often few baselines from which to measure progress against and humanitarian programming is not long-term enough to see the incremental change that usually is the result of programming aimed at risk reduction and strengthening coping strategies.

- Differentiating between the various strands of protection programming (whether standalone, integrated or mainstreaming) can also be challenging. Identifying how these types of protection activity each contribute to achieving protection outcomes can help to measure impact.

- Collective protection outcomes are not always articulated using the language of protection programming but might still be reducing risks. This can also be helpful for nexus programming where risks faced by people are reduced but may be framed in development or peace language - such as conflict-sensitivity, risk reduction or having a human rights approach.

- Outcomes can only be reached by being able to see the bigger picture; setting realistic milestones; understanding how needs interact and how all the aspects of a response address these needs.

Finding better ways to include the protection of civilians

- Having a consistent approach to enhancing the protection of civilians in armed conflict within the wider approach to the centrality of protection has proved to be challenging.

- In conflict contexts where protection of civilians is identified as an HCT protection priority, the barriers to finding ways to reduce risks throughout the response means that other priorities can receive more attention. This can be due to mandates of humanitarian actors; challenges linking concretely with peacekeeping colleagues (if present); or lack of consensus about how to strategically engage with parties to the conflict. Some actors are cautious to raise protection issues with the relevant state or other duty-holders because of how this may impede the ability to provide assistance.

- For integrated UN peacekeeping missions, having an embedded human rights section can be complicated with challenges to maintaining independence when raising protection and rights violations. Multiple concurrent responsibilities of double or triple-hatted UN leadership can make actual or perceived separation of mandates difficult.
Matters related to the protection of civilians are often considered sensitive and involve dealing with governments and duty-bearers, who are parties to the conflict. Many humanitarian actors consider that engagement on these matters is a vital part of the humanitarian response. However, other humanitarian actors may consider these issues only from a security or political perspective and determine that they are not for humanitarian actors to address or that they do not ‘have the appropriate staff or skill set to do so.’

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**GOOD PRACTICE**

**Protection of civilians – data collection**

**WHO Surveillance System of Attacks on Healthcare (SSA)**

Since late 2017, WHO and partners have been collecting data regarding attacks on healthcare in complex emergencies. The SSA uses a standard methodology across countries to collate information about frequency of defined types of attacks, including violence, abduction/arrest of healthcare personnel, removal of healthcare assets, militarisation of healthcare assets, obstruction to healthcare delivery and sexual assault. This data is reported per country and provided publicly online with details kept confidential. It is used to produce regular reports, identify trends and patterns, and allow comparisons between regions and contexts.
Inter-cluster approach to coordinating the implementation of the centrality of protection

- While clusters and their partners acknowledge the relevance of protection, they are not always certain about how to take on their responsibility in practice. Most cluster efforts have been related to protection mainstreaming which has frequently been represented in cluster strategies and humanitarian response plans.

- In many contexts, the Protection Cluster and the AoRs are presumed to be responsible for most of the centrality of protection work and this can sometimes be reinforced by the HCT. As the Protection Cluster and the AoRs do take on this responsibility, it can subsequently become difficult for other clusters to know how they can join in and be part of pursuing collective protection outcomes.

- Although there have been many efforts to strengthen protection mainstreaming in every cluster’s work, more integrated approaches, links to standalone protection programming, and contribution to protection outcomes are still not coherent. There are many cluster and cross-cluster tools and guidance on how to strengthen the protection perspective of their work, but these are not used consistently or meaningfully, with too much of a focus on one-off trainings.

- Many actors consider that they are unable to proceed with protection work (beyond mainstreaming) because they do not have in-house protection technical capacity and are not always confident in articulating how their programming is designed to reduce risks and strengthen coping strategies. However, from the examples collected for this review there are many efforts to reduce risks through programming and these should be encouraged more, feature more prominently in humanitarian response strategies (at system and organisational levels) and come together for a more collective approach. Humanitarian actors should be able to use their resources strategically to fund their contributions to collective protection outcomes and ensure that system-wide priorities have secured resources.
GOOD PRACTICE

Inter-cluster approach

Safety audits in Somalia

These safety audits are a multi-agency, multi-sector approach to understanding better the GBV risks in displacement sites. Mainly GBV, CCCM, Shelter and WASH actors use a standard audit tool to collect data on GBV-related risks. This data is jointly analysed and shared with relevant stakeholders. In 2019, the information was used to inform the HRP and HCT Centrality of Protection strategy, as well as sector-specific improvements in programming. Examples include increased locks on the inside of WASH facilities; more shelters with private sleeping areas; and more fencing around sites.
Protection Cluster support required but is not yet consistent or sustainable

- At global, regional, and national levels the Protection Cluster and protection-specialised agencies provide technical support to all actors, including those who are not protection-specialised. This support is not always structured, consistent or incremental and can take the form of global guidance which is not always field focused in practice.

- There remain some core foundations of protection work – such as protection risk analysis frameworks; participation and AAP systems; referral mechanisms; development of vulnerability criteria - that are not solidly in place and continue to be developed, often from the global level. Specialised protection support is needed to help the humanitarian system identify protection issues – including those that need an immediate response. However, the Protection Cluster and AoRs should not be expected or seek to address all of these by itself.

- Understanding the big picture and then identifying which actors have a comparative advantage to address identified issues is still needed. More work is required to support all actors to be able to see the larger picture, have a strategic approach, problem-solve, and put guidance into practice at field level.

- There is an important role for the Protection Cluster and AoRs in providing this technical capacity in ways that are sustainable and effective. Finding ways to engage with actors beyond the circle of actors usually working on protection remains a challenge.

- Engaging with other stakeholders – within multi-mandated agencies and externally – should help to transfer skills and build sustainable capacity on protection.
GOOD PRACTICE

Protection data for system-wide analysis

Somalia: Protection Monitoring System (SPMS) 26

The SPMS was designed in 2017-2018 and rolled-out in 2019 to strengthen systemwide protection data collection and analysis in order to inform effective programming and advocacy. The approach is a jointly implemented, rights-based framework with aims to be the evidence base for advocacy; longer-term programming and identifying community concerns to strengthen self-reliance. The dashboard provides data on the types and trends of protection concerns; the most affected groups; and community coping strategies.
Role of HCT and HCT members - their leadership and oversight of a system-wide approach to the centrality of protection

- In accordance with the IASC Protection Policy, having an overarching and decisive approach to protection at leadership level remains crucial. Establishing and maintaining a joint approach by all HCT members can depend on their various approaches to protection and human rights.

- The ultimate lack of consensus about protection in practice highlights the power differences between HCT members, depending on the agencies or entities they represent. There can often be differences of perspective regarding prioritisation of issues; the distribution of roles and responsibilities; and consideration of how advocacy regarding certain protection issues can affect the ability of humanitarians to provide assistance.

- From a global perspective, action by the IASC to support the implementation of the centrality of protection is not always clear. The IASC commitments are set out in the IASC Protection Policy but how this is implemented in practice remains inconsistent. As a priority workstream under the IASC’s Results Group 1 on Operational Response, the establishment of the IASC Sub-group on the centrality of protection has been a valuable step. Priority areas of its work include mainstreaming protection throughout the humanitarian response; agreeing specific indicators on the centrality of protection in practice; and commissioning a review of the IASC Protection Policy.

- Understanding each HCT member’s comparative advantage to contribute to collective protection outcomes (at HCT level) requires having a holistic view and identifying relevant actors (including NGOs, government bodies, donors, etc.) outside of the HCT and the humanitarian architecture.

- Another key part of achieving protection outcomes, is the relevance of advocacy and how it is used strategically and diplomatically by the HC and HCT. Lack of a coherent and consistent protection advocacy framework leads to HCT members and other relevant actors having a disjointed approach which is noticeable when dealing with external actors, particularly with parties to conflict.

Accountability to Affected Populations (AAP) as a foundation for the centrality of protection

- With numerous terms used, AAP is a fundamental part of achieving protection outcomes and protection mainstreaming, and is used here to include all aspects of communicating with and involving all people and communities affected by crisis throughout the HPC and beyond. AAP is one of the HCT’s mandatory responsibilities and should be a core part of implementing the HCT’s strategic approach to protection. Similarly to protection mainstreaming, it should not be confused as equivalent to the centrality of protection but an integral part.
The processes related to AAP, as ways that consider all matters from ‘the perspective of the affected population’, 31 may be considered catalysts for pursuing protection outcomes. In addition, the inclusivity and involvement of affected people in addressing the protection risks and vulnerabilities they face can be part of achieving collective protection outcomes.

Although a foundation for the centrality of protection, AAP is not always a solid part of the humanitarian architecture and approaches. Weak coordination of efforts to substantively involve affected populations leads to duplication of approaches and many superficial attempts at consultation. There is often minimal representation of different groups within communities and any engagement by humanitarian actors is sporadic and not built on a relationship of trust or consistency.

Putting available AAP guidance and lessons learned into practice is still needed, particularly as locally as possible and involving existing civil society which represents all groups. Until this is done more systemically, coping strategies may not be fully understood and there will remain a power imbalance between humanitarian actors and affected communities.

Also important is the ability to work with communities on preparedness efforts so that protection issues are built into response activities as soon as possible and risk prevention becomes part of programming much earlier on. This is one of the fundamental reasons to include protection as a component of the humanitarian-development-peace nexus so that people can increasingly cope with crisis, especially in protracted situations.
GOOD PRACTICE

Communications for affected populations

Central African Republic: access to information on available humanitarian assistance

Following an assessment in 2019, the Emergency Telecommunications Cluster designed three initiatives to improve people’s access to information in CAR. These are: (1) The Information and Learning Hub, hosted by the CAR Red Cross; (2) Common Feedback Mechanism in IDP sites; and (3) with INTERSOS, designated phone booths in IDP sites for people to use for communicating with family members and humanitarian helplines.
Building more sustainable approaches to protection concerns

- Many protection risks and vulnerabilities are exacerbated by crisis. Understanding the root causes and drivers of these risks and vulnerabilities is necessary to achieve protection outcomes that are ultimately sustainable.

- This also helps affected communities to deal with crisis, especially in contexts where there are frequent shocks requiring humanitarian response.

- The links between humanitarian, development, and peace actors (through the nexus or any equivalent) can provide this incremental and longer-term risk reduction and help to leave no one behind by strengthening people’s ability to cope in crisis.

- Understanding better how communities cope in reality and working to strengthen the positive aspects of this should be one of the tenets of any response.
GOOD PRACTICE

Longer-term approach

Cox’s Bazaar: Development of self-reliance activities for Rohingya refugees

To respond to longer-term needs of the Rohingya refugee population, in 2019, Food Security Sector (FSS) partners in Cox’s Bazar started implementing self-reliance activities in the camps. The main objectives are to build the skills and capacities that can help with their sustainable return and reintegration in Myanmar when conditions become conducive. The majority of interventions were for micro gardening – seeds, tools and technical training – followed by inputs and training for tailoring, handicrafts, carpentry, catering, ICT, aquaculture, and block printing. FSS partners complemented their interventions with life-skills training (e.g. functional literacy, leadership) and awareness raising, or behaviour change communication on topics such as nutrition, hygiene, gender and GBV.
This updated guidance provides for planning and implementation of UN development activities at country level, focusing on the UN’s 2030 Agenda to achieve its Sustainable Development Goals. There is great opportunity for the strengthening of protection in this updated approach, throughout its four key objectives of: (1) a collective response to help countries work towards meeting the SDGs; (2) partnerships with all stakeholders for leveraging strength and driving transformative change as core to the 2030 Agenda; (3) leaving no one behind as a tangible action for people on the ground; and (4) providing country teams with the necessary tools to tailor specific country responses for supporting national implementation.

The rights-based approach to ‘meeting immediate needs and investing in the medium to long-term to reduce vulnerabilities and risks affecting communities and wider economic and governance systems and contribute to sustainable development and sustained peace’ resonates with all the ambitions of the centrality of protection. Some of these opportunities throughout the planning and implementation phases of action include those set out below.

- **UN Common Country Analysis (CCA)**: this underpins the Cooperation Framework and provides expansive cross-sectoral data and analysis of the vulnerabilities and risks facing communities. It aims to track situational development and inform response activities on a continuous basis.

- **Theory of change**: this is developed to show how actors will come together to contribute to the desired change. Key areas to be considered include ‘structural barriers to equality, resources and opportunities, and any discriminatory laws, social norms and stereotypes that perpetuate inequalities and disparities.’

- **Collective outcomes**: these are strategic tools which aim to address risk and vulnerability. More details of how these can be developed as part of strengthening the humanitarian-development-peace collaboration have been set out in the recent IASC Policy on Collective Outcomes which explores how the various stakeholders can come together to leverage their respective comparative advantages.

- **Partnerships**: there should be a broad range of stakeholders involved with a focus on national development of achieving strategic aims and priorities. This supports its ‘integrated and multidimensional programming approach.’

- **Human rights-based approach**: this is anchored in all established international human rights law and principles - equality and non-discrimination, participation and accountability.

- **Commitment to leave no one behind**: as core to the Cooperation Framework, there is an emphasis on working with all people in a country, especially the most marginalised and vulnerable. This includes meaningful participation of all people in every aspect of the process and programming.
ELEMENTS OF THE CENTRALITY OF PROTECTION

Identifying critical elements for operationalising the centrality of protection

From using the examples collected and reflecting on how humanitarian actors have been approaching the centrality of protection (either implicitly or explicitly), several recommended steps for operationalisation can be identified. These are proposed elements and do not all currently exist in every context. Depending on each context and humanitarian response structure at country level, some or all these elements may be formulated to operationalise the centrality of protection and can also be used as a baseline for measuring the progress in that context.

These proposed elements are based on what is already being done to (1) understand risks, violations, vulnerabilities and capacities; and (2) respond to them with activities either as part of a sector or, as relevant and possible, across sectors. This approach tries to move away from the more abstract descriptions of protection and find ways to encourage ‘sound programming geared to addressing or mitigating patterns of harm that put lives at risk.’

Some of the underlying features of the proposed elements below include:

- Identifying a more systematic and coherent operationalisation of the IASC Protection Policy using the overarching commitments set out in the policy.
- Using recommendations from the GPC, HCT Protection Strategies Review 2020.
- Approaching protection as a strategic way of problem-solving in an incremental way, depending on the identified risks, vulnerabilities, and coping capacities in each context.
- Considering how to define the actors responsible for contributing to each element of the centrality of protection in practice – with the HC, the HCT and Clusters in country having ultimate accountability.
- Not every actor has to do everything – understanding the context and the resources an capacities available can support identifying who has the comparative advantage for each element. How to implement the elements selected should be agreed at country level, based on available capacities and resources.
Table of proposed elements of the centrality of protection

The table below sets out the main IASC Protection Policy commitments and proposed elements to support achieving these. A more extensive version of the table providing examples and insights of each element can be found in the full 2019 CoP review.

### IASC PROTECTION POLICY COMMITMENTS

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<thead>
<tr>
<th>IASC PROTECTION POLICY COMMITMENTS</th>
<th>PROPOSED ELEMENTS</th>
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<tbody>
<tr>
<td>Accountability of humanitarian actors – with focus on HC, HCT, Clusters.</td>
<td><strong>Formulation of collective protection outcomes</strong> in relevant processes, including:</td>
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<td>o Every cluster/system-wide strategy/action plan</td>
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<td>o Humanitarian Response Plan (HRP)</td>
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<td>o Projects funded by country-based pool funding</td>
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<td>o Donor requirement in proposals/projects</td>
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<td>o HCT protection strategies</td>
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<td>o HCT and HC Compacts</td>
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<td>Collective engagement to achieve meaningful protection outcomes that reduce overall risks to affected persons by decreasing threats, reducing vulnerability and enhancing capacities</td>
<td><strong>Context-specific criteria</strong> to identify HCT protection priorities (HCT-specific/critical protection priorities) and regular use of criteria to identify HCT protection priorities (at specific intervals or triggered by any relevant event).</td>
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<tr>
<td>Protection informs decision-making in the HCT. Protection priorities are identified and result in collective action.</td>
<td><strong>Differentiation</strong> between HCT protection priorities and HRP and/or cluster protection priorities.</td>
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<td></td>
<td><strong>Funding plan</strong> for HCT strategic approach to protection.</td>
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<td></td>
<td><strong>Identification of strategies/action plans/frameworks</strong> which link to protection priorities and identify concrete joint/complementary actions (e.g. nexus plans, durable solutions, GBV accountability framework, resilience, peacebuilding, conflict reduction strategies).</td>
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<td></td>
<td><strong>Inter-agency senior protection technical capacity</strong> at global and country levels, including for HC/HCT and humanitarian actors.</td>
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<td></td>
<td><strong>Regular HCT reporting</strong> on its four IASC mandatory responsibilities: (1) the centrality of protection; (2) AAP, (3) PSEA, (4) GBV.</td>
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2. Continuous analysis of risks people face - of threats, vulnerabilities and capacities of affected persons and of the commitment and capacities of duty bearers to address risk factors

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<tr>
<td>Analysis provides the evidence-base for programming, advocacy and dialogue for the purpose of influencing and changing behaviours and policies in support of a more favourable protection environment.</td>
<td>Inter-sector indicators based on protection, which reflect the overall context, to be included in:</td>
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<tr>
<td></td>
<td>- Humanitarian Needs Overview (HNO)</td>
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<td>- Protection/other cluster monitoring or assessment</td>
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<td>- UN Common Country Analysis</td>
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<td>- Every context assessment for humanitarian action</td>
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<td></td>
<td><strong>Overall context analysis</strong> including identification of protection risks, threats, vulnerabilities, and coping capacities of people affected by crisis.</td>
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<td></td>
<td><strong>Plan for regular protection risk analysis updates (by clusters or inter-cluster) for HCT,</strong> which may lead to changes in protection priorities. For each context, the Protection Cluster/AoRs can provide a framework for this protection risk analysis, including how each cluster can feed into it.</td>
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<td></td>
<td><strong>Advocacy plan for achieving collective protection outcomes. Stakeholder mapping for advocacy at all levels of response.</strong></td>
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3. Protection demands meaningful engagement with affected persons during all phases of a response in a manner that recognizes and is sensitive to age, gender and diversity

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<tr>
<td>Meaningful engagement should enable humanitarian actors to respond to the priorities of affected persons and determine the impact of humanitarian action (or inaction) on them.</td>
<td>System-wide AAP structure in place, including evidence-based feedback loop to people affected by crisis.</td>
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<td>System-wide PSEA structure in place.</td>
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<td>Meaningful engagement should further inform the design, implementation and adaptation of activities that address or prevent patterns of violence, abuse, coercion and deprivation and assist people to claim their rights.</td>
<td>Collective protection outcomes based on people-centred analysis and response.</td>
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<td></td>
<td>Community-based protection mechanisms that allow programming to be developed and implemented with crisis-affected people.</td>
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4. Reinforce complementary roles, mandates, and expertise of all relevant actors.

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<tr>
<td>Address protection issues that intersect with formal mandates and sector-specific responsibilities.</td>
<td>Minimum protection approach for each cluster / actor to reflect risk reduction and strengthening capacities of crisis-affected people to cope in the context.</td>
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<tr>
<td>Complementary, coordinated and collaborative actions by multiple organizations and authorities are required.</td>
<td>Protection outcomes in each cluster/actor’s strategy and each project.</td>
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<tr>
<td>Protection in assessments.</td>
<td>Protection in programme design.</td>
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<td>Protection mainstreaming/safe programming/quality programming:</td>
<td>Protection mainstreaming/safe programming/quality programming:</td>
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<tr>
<td>• Indicator: cluster level, per activity type – who is at risk, from what/whom, why.</td>
<td>• Define how each activity reduces identified risk/vulnerability and increased positive capacity coping strategies.</td>
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<td>• Standalone protection activities.</td>
<td>Standalone protection activities.</td>
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<td>• Referral mechanisms for specialist protection support.</td>
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<td>• Integrated programming activities with defined protection outcome.</td>
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5. Mobilize other actors within and beyond the humanitarian system, as appropriate, to contribute to collective protection outcomes.

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<tr>
<td>Mobilize other actors to contribute to collective protection outcomes.</td>
<td>Protection within other system-wide strategies, including identifying entry points.</td>
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<td></td>
<td>Protection as part of the nexus approach to collective outcomes.</td>
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<td></td>
<td>Identify leverage of different roles/capacities of each entity at HCT level and other relevant stakeholders, including outside the humanitarian system.</td>
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6. Evaluate commitments and progress towards placing protection at the center of the humanitarian response.

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<tbody>
<tr>
<td>Regularly monitor and evaluate progress in working collectively to achieve protection outcomes and reducing the exposure of affected persons to risks and violations, as well as in supporting affected persons to enjoy their rights without discrimination.</td>
<td>Protection priority and outcome audit.</td>
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<td>Monitoring and evaluation plan for HCT protection priorities and outcomes.</td>
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<td></td>
<td>Monitoring and evaluation plan for each cluster/actor’s approach to protection outcomes, mainstreaming, integrated, standalone approaches.</td>
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<td></td>
<td>Align concretely with HRP/other strategic processes.</td>
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</tbody>
</table>
CENTRALITY OF PROTECTION IN PRACTICE – Examples across clusters and organisations

The information provided below is from inputs provided by the respective cluster and interviews with global or national colleagues. This was supplemented with documents provided by organisations, clusters and documents from the literature review.

**Camp Coordination and Camp Management (CCCM) Cluster**

The focus of CCCM programming embodies an operational approach to protection by identifying risks and vulnerabilities and working with communities to address these and strengthen their positive capacity to cope in crisis. Activities to strengthen the safety and security of affected populations is relevant during the entire life cycle of a site: from planning and set-up, to care and maintenance, and through to site closure and longer-term solutions. Key components of these activities comprise aspects of AAP, representation, participation, monitoring services, referral pathways, inclusion, and women’s participation.

Examples of overall CCCM processes to reduce protection risks include those set out below.

- **Participation, community engagement and leadership:** There is a focus on a community-based participatory approach to governance and feedback, emphasizing that affected populations are leaders and key partners in developing strategies related to their assistance and protection. CCCM community governance and participatory structures allow for a process of direct consultation and dialogue with all members of communities, including women, girls and other at-risk groups.

- **Physical safety in and around sites:** As an essential component of CCCM work, physical safety for the camp population and staff is pursued in various ways. Responding to protection risks can be through effective information management and coordination, as well as facilitation and monitoring of established systems. Methods to determine the most appropriate methods include coordinated risk assessments, consultation with all community groups and developing SOPs for coordinated response to emergencies, such as fire, landslides, extreme weather conditions and civil unrest. Other methods used are multi-sectoral site safety audits, GBV safety audits; liaison with local authorities and working with community security patrols.

- **Host community relations:** As part of social cohesion efforts, understanding the concerns of the host community and having a conflict-sensitive approach from the outset of any programming is key. CCCM responses include measures to maintain or improve a mutually
beneficial relationship with the host community in order reduce possible tensions and security risks to displaced population, as well as contribute to durable solutions and community integration.

- **Population data, registration and profiling:** CCCM data collection activities allow for the better identification of vulnerable and marginalized groups. In turn, this analysis permits for a tailored multisectoral response considering relevant protection risks and individual and collective profiles. Furthermore, displacement and population data provide a framework for ensuring inclusion and accountability.

- **Coordination:** Working closely with the administration and management of sites, as well as with a range of different partners at all levels, in order to identify displaced people’s needs, and advocate for gap filling, and thereby ensuring assistance and protection of displaced populations. The Camp Management Agency, in close collaboration with site residents, the Camp Administration, the Cluster/Sector Lead Agency and service providers, is in charge of making sure that efficient coordination mechanisms and monitoring systems are in place, both for the whole site and different sectors or working groups. This is essential to: ensure gaps in assistance are filled, avoid duplication of activities; ensure equitable provision and access to services; and ensure that agreed upon standards are respected by all service providers.

### Iraq: Civilian Character of Camp Incident Tracking Matrix

This is a joint initiative of the CCCM and Protection Clusters which focuses on incidents related to the presence of armed military/security actors in camps. Any actor can report confidential information about specific incidents. The data is collated, analysed and available on the Protection Cluster’s website. It can be used to support advocacy efforts, including by the humanitarian leadership.

### Iraq: Camp Departure Follow-up Survey

Developed in response to 2019’s wave of camp closures by the Iraqi authorities and related forced returns, the Protection and CCCM Clusters, jointly with the Iraq Information Centre conduct follow-up calls with households within one month of their departure from camps. The focus is on finding out about people’s situation upon return, including protection issues faced, and setting these out in a dashboard. This data can be analysed and used for increased monitoring of returns and to identify appropriate response activities (for all stakeholders including humanitarian and development actors as the Iraqi Government has announced its plans to close all camps by the end of 2020.)
Child Protection AoR

Child and Adolescent Survivor Initiative (CASI) 51

CASI aims to provide inter-agency support to improve the quality of and access to services for child and adolescent survivors of sexual abuse in emergencies. In September 2019, Phase II was launched which expanded the range of activities available, including in-country coordination and missions support by deployable staff, remote technical support, and a global community of practice for child protection and GBV practitioners.

Child Protection and Food Security Reference Group 52

The Global Child Protection AoR and the World Food Programme are leading a joint initiative to dedicate resources on developing better analysis and proposing solutions from an integrated perspective on child protection and food security. In 2019, a Child Protection and Food Security Reference Group was formed by the Global Food Security Cluster, UNICEF, Plan international, Save the Children, International Rescue Committee and War Child. The Reference Group works on building a solid foundation for knowledge management of best practices, along with generating evidence needed to capture specific linkages between child protection and food security to build a platform for obtaining better collective outcomes. Currently, the Reference Group is carrying out activities in CAR, DRC, Mali, 53 and South Sudan and expects to expand to other countries.

Education Cluster and Child Protection AoR

CP-EiE Collaboration in Coordination Framework: Child Protection AoR and Global Education Cluster 54

Initiated in 2019, this framework aims to strengthen the collaboration between Child Protection and Education coordination groups. The two sectors have identified the opportunity to enhance the quality, coverage, and accountability of their responses. The framework provides the steps, tools, and examples to support predictable and coherent collaboration throughout the HPC, including needs assessment and analysis, response planning, targeting and costing, implementation and monitoring.

This was developed consultatively with Education and Child Protection partners. It sets out the main education and child protection concerns in Somalia and objectives, outcomes, outputs, and activities to address these. Identified risks include limited access to protective learning environments, GBV, early marriage, lack of gender-sensitive facilities, recruitment by armed groups, attacks on schools and kidnapping. Classrooms are often overcrowded, and teachers are not trained to manage classes in a sufficiently child-friendly manner. In order to address these risks, the main objectives include ensuring (1) emergency affected children have equal access to a safe and protective learning environment; and (2) vulnerable children are engaged in life-saving learning that promotes personal well-being and social cohesion. Adoption of the framework is mandatory for Education Cluster members applying for country based pooled funds.

South Sudan: Education-Child Protection collaboration on delivering school-based mental health and psychosocial support (MHPSS)

Education partners facilitate and organise teacher training for MHPSS in schools and the Child Protection sector leads the technical design of the required tools. There is a School Level Checklist for Education partners to monitor minimum key MHPSS and child protection elements in schools they are supporting. In addition, there are school-based referral mechanisms and training for teachers on safe identification and referral of any child protection matter.

Emergency Telecommunications Cluster (ETC)

The Global ETC provides a range of services for communities under its ‘Services for Communities’ (S4C) project. These include (1) two-way communication between humanitarian actors and local communities; (2) access to information to affected communities. In emergency settings, the ETC starts by conducting an information, communication and technology needs assessment for affected populations and then works with stakeholders to address identified issues.

Central African Republic: access to information on available humanitarian assistance

Following an assessment in 2019, the ETC designed three initiatives to improve people’s access to information in CAR. These are: (1) The Information and Learning Hub, hosted by the CAR Red Cross; (2) Common Feedback Mechanism in IDP sites; and (3) with INTERSOS, designated phone booths in IDP sites for people to use for communicating with family members and humanitarian helplines.
Mozambique: rehabilitating community radio stations

As a response to the damage caused by Cyclone Idai in March 2019, the ETC partnered with the National Forum of Community Radios in Mozambique to assess and rehabilitate six community radio stations which had been severely damaged. These radio stations are essential ways for local communities to be informed on a range of issues, including access to humanitarian assistance.

Food Security Cluster

People-Centred Approaches and Cross-cutting Dimensions

The Global Food Security Cluster’s Programme Quality Working Group has best practices, tools, and guidance on a range of cross-cutting issues. The Working Group focuses on three core themes: (1) assessment and response analysis; (2) monitoring and evaluation; and (3) programme quality issues. As noted above, with Kenya and Mali as case studies, the Food Security Cluster and its partners have drafted a position paper, with key recommendations, on the links between child protection and food security.

CAR: Emergency Food Security and Nutrition Assessment

The household survey questionnaire has been updated to include proxy indicators for child protection. These indicators aim to understand better the situation for child-headed households and their negative coping mechanisms, such as dangerous work and leaving school.

Cox’s Bazaar: Development of self-reliance activities for Rohingya refugees

To respond to longer-term needs of the Rohingya refugee population, in 2019, Food Security Sector (FSS partners in Cox’s Bazar started implementing self-reliance activities in the camps. The main objectives are to build the skills and capacities that can help with their sustainable return and reintegration in Myanmar when conditions become conducive. The majority of interventions were for micro gardening – seeds, tools and technical training – followed by inputs and training for tailoring, handicrafts, carpentry, catering, ICT, aquaculture, and block printing. FSS partners complemented their interventions with life-skills training (e.g. functional literacy, leadership and awareness raising, or behaviour change communication on topics such as nutrition, hygiene, gender and GBV.)
South Sudan: strengthened capacity, analysis and response to GBV

WFP, World Vision, the GBV Sub-Cluster and the Food Security and Livelihoods Cluster (FSLC) commenced collaboration in 2019 to strengthen capacity, analysis, and responsiveness to GBV across FSLC activities and sites. Next steps planned include safety audits and training on gender and GBV. The results of the audits (scheduled for 2020) will then be analysed to identify required response activities and strategic opportunities.

Gender Based Violence AoR

Key complementary and overarching commitments to GBV include those set out below. These can be seen in conjunction with the Guidelines for Integrating GBV Interventions in Humanitarian Action and the Inter-Agency Minimum Standards for Prevention and Response to GBV in Emergencies.

Real Time Accountability Partnership (RTAP) / GBV Accountability Framework

Established in 2016, the RTAP is an inter-agency approach to system-wide accountability for GBV prevention and response being prioritised, integrated and coordinated in emergencies. RTAP, with the GBV Accountability Framework at its core, was piloted in Iraq and South Sudan in 2019 and progress monitored and assessed in an end-line evaluation. More involvement of actors not usually engaged on GBV was identified and stakeholders reported that GBV was increasingly included on relevant agenda. In South Sudan, findings included engagement of high-level humanitarian leadership and GBV mainstreaming through clusters. A key recommendation from the evaluation was that, instead of being a standalone project, RTAP should function more as a systematic inter-sector mechanism to support improved attention to GBV prevention, risk reduction and response in humanitarian action.

Call to Action on Protection from GBV in Emergencies (the Call to Action)

As a global initiative of stakeholders, its mission is to ‘drive change and foster accountability from the humanitarian system to address GBV from the earliest phases of a crisis.’ Members of the Call to Action, states, donors, UN agencies and NGO have committed to take collective action to address GBV. The global Call to Action 2016-2020 Road Map included the development of the Northeast Nigeria Road Map (2018-2019) and the DRC Road Map (2019-2020).
Nigeria: Call to Action Road Map (2018-2019)

The Nigerian Ministry of Women Affairs and Social Development, chair of the GBV Sub-Working Group in Northeast Nigeria, worked with stakeholders to develop this two-year Road Map for Borno, Adamawa and Yobe. Priority areas included strengthening coordination; improving access to quality services for survivors; strengthening the capacity and engagement of local partners; securing sufficient funding; and engaging security actors. The Road Map was linked to the Nigeria HCT Centrality of Protection Strategy with progress indicators to show how response activities complemented both approaches.

Safety audits in Somalia

These safety audits are a multi-agency, multi-sector approach to understanding better the GBV risks in displacement sites. Mainly GBV, CCCM, Shelter and WASH actors use a standard audit tool to collect data on GBV-related risks. This data is jointly analysed and shared with relevant stakeholders. In 2019, the information was used to inform the HRP and HCT Centrality of Protection strategy, as well as sector-specific improvements in programming. Examples include increased locks on the inside of WASH facilities; more shelters with private sleeping areas; and more fencing around sites.

Health Cluster

Health and Protection Clusters: Joint Operational Framework (JOF)

The respective global clusters developed this JOF following a review in 2019 which identified key factors for strengthening integrated coordination and response for health and protection. The JOF aims to be an ‘entry point for strategic and operational collaboration between’ the respective clusters, particularly at country level. It is structured around the six core cluster coordination functions: (1) support service delivery; (2) inform strategic/leadership decision-making; (3) plan and implement strategy; (4) monitor and evaluate performance; (5) build national capacity in preparedness and contingency planning; and (6) support advocacy mechanisms. Suggestions and examples are included in the JOF, including promising practices in OPT, where protection and GBV colleagues have provided identification and referral trainings regarding protection cases. Also, there has been collaboration between MHPSS and the Health Cluster on information products and data collection; and the Health and Protection Clusters have worked together on the Humanitarian Response Plan.
Quality of Care in Humanitarian Settings

In 2019, the Global Health Cluster established a Quality Improvement Task Team to consider how best to assure and improve the quality of health care in humanitarian settings. Following an inter-agency meeting, in September 2019, a guidance paper was developed, setting out ‘what quality of care entails in humanitarian settings, its definition, scope and key issues.’ The guidance sets out key linkages with other aspects of humanitarian programming, including AAP, PSEA, protection mainstreaming and the centrality of protection.

WHO Surveillance System of Attacks on Healthcare (SSA)

Since late 2017, WHO and partners have been collecting data regarding attacks on healthcare in complex emergencies. The SSA uses a standard methodology across countries to collate information about frequency of defined types of attacks, including violence, abduction/arrest of healthcare personnel, removal of healthcare assets, militarisation of healthcare assets, obstruction to healthcare delivery and sexual assault. This data is reported per country and provided publicly online with details kept confidential. It is used to produce regular reports, identify trends and patterns and allow comparisons between regions and contexts.

Occupied Palestinian Territory (OPT): WHO monthly reports on health access

These monthly reports provide information about health access for people in the OPT, including healthcare referrals, physical access and geographic updates. Information is collated from partners and analysis is provided with case studies and updates on specific issues. The 2019 annual report on the right to healthcare also provided deeper analysis, conclusion and recommendations on how to improve Palestinians’ rights and access to physical and mental healthcare.

Housing Land and Property AoR

As part of the HLP AoR’s 2019 global strategy, thematic priorities were security of tenure, addressing barriers to women’s HLP and HLP in assessments, including inclusion of HLP across all sectors. Support for implementation of the new Sphere standard on security of tenure was a focus, underlining the significance of housing and land for most humanitarian and development response activities.

Iraq: HLP and Mine Action project

Mine Advisory Group (MAG) and Norwegian Refugee Council (NRC) in Iraq partnered in 2019 on a project for HLP support to humanitarian mine clearance in Ninewa. In addition to programming objectives, the pilot project recorded insights into how humanitarian mine action actors can improve identification and mitigation of complex HLP issues as part of their operations.
The project set out HLP issues during three main stages of the MAG process, before, during and after clearance. This resulted in improving the integration of HLP considerations at all stages and tailoring legal services to support clearance operations and provide direct support to people needing assistance to resolve HLP issues.

Nigeria: due diligence on land for all sectors

As part of its support and service provision to other sectors and stakeholders, the Nigeria HLP Sub-Working Group provided training and guidance on how to conduct housing and land due diligence regarding part of programme design and implementation. This was particularly relevant for colleagues undertaking projects for Shelter, CCCM, WASH or Food Security/Livelihoods. Understanding the status and situation of land prior and during programming provides more certainty, reduces the risk of eviction, promotes community involvement and prevents exacerbating or initiating HLP-related disputes.

Mine Action AoR

In 2019, the United Nations Mine Action Service (UNMAS) began implementation of its 2019-2023 strategy with strategic outcomes: (1) Protection of individuals and communities from the risks and socioeconomic impacts of explosive ordnance strengthened; (2) survivors and family members affected by explosive ordnance have equal access to health and education; and (3) national institutions effectively lead and manage mine action functions and responsibilities. Also included are cross-cutting strategic outcomes which include strengthening mainstreaming of gender, human rights, peacebuilding, stabilisation and sustainable development.

Explosive ordnance child casualties: prevention and response

Responding to the increase in the reported killing and maiming of children as a result of explosive ordnance, the Child Protection AoR, Mine Action, AoR, Education Cluster and Health Cluster committed to working together for a joint approach to better protection of children from explosive hazards and ensure access to victim assistance. The respective AoRs and Clusters are working together on a prevention and response package to support more systematic inclusion for affected children in the HPC. The four main outcomes are: (1) reduce the number of children who have an accident with an explosive ordnance; (2) increase the survival rate of child casualties; (3) increase personal capacity of child survivors; and (4) increase inclusion of child survivors in family, community and school life.

Afghanistan: Mainstreaming mine action

Mine action was included in multisectoral needs assessments, such as the UN-led Whole of Afghanistan assessment. This provided data and analysis for stakeholders to understand better the impact of explosive ordnance contamination on people’s lives and needs generated, including psychosocial, physical health or access to basic services.
Colombia: Public advocacy on mine action

In December 2019, the Mine Action AoR held a series of public events to increase the visibility and public awareness of mine action in Colombia. The objective was to raise the challenges of mine action in the post-peace agreement and target messages to influence the Government of Colombia in their mine action strategic review.

Iraq: Victim and accident reporting processes

Humanity & Inclusion led a study to increase understanding of the victim and accident reporting and data management processes related to explosive ordnance in Iraq. Findings and recommendations were shared with humanitarian, community, and government stakeholders. Data collected indicated that youth, herding, and rural communities are most at risk and so should be targeted for explosive ordnance risk education. Continued data collection will be used to understand better needs, plan referrals to services and meet immediate medical and physical rehabilitation. In addition, this information has provided evidence to advocate for legislative change and concrete actions that will ensure access to education, employment and other livelihood opportunities with the aim of reducing the vulnerability of survivors and other persons with disabilities in the longer term.

Protection Cluster

Colombia: rapid protection assessment tool

In January 2019, the local humanitarian team in Cauca promoted a collective protection response in Guapi, a municipality affected by the armed conflict where more than 66,000 people needed humanitarian assistance. Joint analysis of data collected identified protection needs for the Afro-Colombian and indigenous communities living in the area. This analysis was used to advocate with the relevant authorities to encourage them to prioritize assistance and protection for these communities.

Mozambique: support to clusters

The Protection Cluster reviewed each available cluster strategy from a protection perspective to support objectives that were protection oriented. Key considerations for relocation and a protection mainstreaming checklist were developed for use by each cluster and supported with training activities for clusters and their partners in the field. The Protection Cluster also prepared an overview of protection mainstreaming using standard indicators to identify which cluster activities and services were protection centred.
Philippines: multi-sectoral needs assessment

In June 2019, UNHCR led an inter-agency (UN agencies, international and national NGOs) multi-sectoral joint needs assessment in evacuation centres and temporary shelters where IDPs had been living since the Marawi conflict in 2017. The main objective was to understand the needs and gaps in key services; and use this information to improve assistance and protection to those in need. Key sector issues included those related to shelter, camp management, education, protection, food security, health, nutrition and WASH. 89

Somalia: Protection Monitoring System (SPMS) 90

The SPMS was designed in 2017-2018 and rolled-out in 2019 to strengthen systemwide protection data collection and analysis in order to inform effective programming and advocacy. The approach is a jointly implemented, rights-based framework with aims to be the evidence base for advocacy; longer-term programming and identifying community concerns to strengthen self-reliance. The dashboard provides data on the types and trends of protection concerns; the most affected groups; and community coping strategies.

Ukraine: campaign for IDP voting rights

In 2019, the Protection Cluster and its partners took part in large scale campaigns to advocate for IDPs to be able to vote in local elections. They joined up with local organizations, engaged local authorities; and supported drafting legislation. Recommendations included working with humanitarian and development actors to continue raising awareness among IDPs about the procedure to register for voting in the upcoming presidential and parliamentary elections, to address the gaps in their awareness, including the misconceptions that IDPs cannot vote in these elections. 91

Venezuela: capacity building on protection

The Protection Cluster and its sub-national colleagues conducted a series of capacity building activities for all clusters established for the Venezuela crisis. The objectives of these activities were to demonstrate the importance, relevance and practicality of incorporating the centrality of protection; provide support on protection mainstreaming; and promote commitment to the incorporation of the centrality of protection in programming. As a follow-up, for projects submitted under the HRP 2020, each cluster had to indicate how its proposed projects would aim at promoting respect for human rights, ensure effective access to services, guarantee accountability to affected populations and ensure participation of beneficiaries in all aspects of project design, implementation and monitoring.
The Global Wash Cluster’s Quality Assurance and Accountability Project has developed a range of guidance and tools for national WASH Clusters and partners. In addition to tracking activities and reach, the guidance provides practical ways to understand whether the response is ‘safe, inclusive, participatory and effective’ while also ‘strengthening accountability to the affected population.’ The QAAS framework includes guidance on key standards, indicators benchmarks and data collection approaches which can then be used for systemised reporting and analysis on which to base improved programming and support decision making at the cluster level. In addition to monitoring processes and outcomes, the QAAS including perception monitoring — collecting information on how the response is perceived by people affected by crisis. Providing feedback to the affected community forms part of improving programming and addressing gaps in quality. The QAAS sets out how best to collectively monitor inclusion, safety, participation and feedback. This includes ‘integrating the views of the affected population into quality monitoring.’

Rohingya response, Cox’s Bazaar: Gender, GBV and inclusion audit of the WASH sector and capacity development assessment

This 2019 audit and capacity assessment aimed to advise UNICEF and the WASH sector on strategies and approaches for gender, GBV and inclusion and integration. The assessment set out positive efforts made to respond to identified gender, GBV and inclusion concerns; as well as the challenges and gaps. Recommendations and a draft roadmap emphasised the significance of adopting a mindset to see the different needs and barriers that different people face. Having such an approach will help those struggling to meet their WASH needs and address potential negative impact on their lives, including on health, dignity, safety and quality of life. Consulting and involving different groups of people — women, adolescent girls, older people, people with disabilities, men, boys — was needed at scale.

The draft roadmap included key foundations and practical advice on the following areas: (1) building capacity; (2) integration; (3) cross-sectoral collaboration; (4) proactive engagement with people facing greater barriers; (5) modify existing facilities and programmes; (6) strengthen enforcement, monitoring and feedback.
CONCLUSION

The current context of the global Covid-19 pandemic has further emphasised the need for coherence when analysing contexts; understanding risks; and having a collective humanitarian response. Despite the structural challenges of the humanitarian system and beyond (including the respective development and peace systems), efforts towards the centrality of protection have continued. Whether articulated as reducing risks, achieving system-wide collective protection outcomes or the centrality of protection, the objective is the same – namely to support and strengthen affected people’s capacity to cope with crisis and to ensure that the most critical and immediate risks and violations are recognised and addressed.

Areas which still require substantive work include finding ways to understand crisis from the perspective of all those affected; seeing more of the bigger picture (including historically and socio-economically); meaningfully involving all humanitarian actors regardless of mandate; and challenging the familiar habits of a siloed response. Programming must be demand-led and not based on what humanitarian action may have looked like in other contexts. A protective response is a strategic approach to ensuring there is an inclusive system in place which can respond to violations of international human rights and humanitarian law. Using the centrality of protection approach as a tool to build the necessary foundations and lead strategically remains underutilised. Nevertheless, it still has the power to address the issues that are generating the needs for humanitarian assistance and be ready to respond to the most urgent and immediate risks and violations. Putting all of this into practice with the people who need protection is critical. Protection and human rights can be the organising principles of any response and using some or all of the review’s proposed elements of the centrality of protection will build on all that has come before to strengthen and make responses more comprehensively protective for all people affected by crisis.
ENDNOTES

1 GPC centrality of protection reviews for 2016, 2017 and 2018 can be found at the GPC website, https://www.globalprotectioncluster.org/news-and-events/gpc-publications/

2 IASC, Statement on the Centrality of Protection in Humanitarian Action, December 2013


4 Ibid, page 35


6 IASC, Statement on the Centrality of Protection in Humanitarian Action, December 2013, page 1

7 Ibid, page 3


9 Any violation of international human rights or international humanitarian law. As set out in Annex 1 of the IASC Protection Policy in Humanitarian Action (2016), the normative framework for protection includes international, regional and national human rights, humanitarian and refugee law.


11 Ibid, page 25

12 Ibid, page 2

13 Ibid, page 4

14 Ibid, page 4


17 https://app.powerbi.com/view?r=eyJrIjoiZjRiNDq5MmMtZjQgOC00NjdilWJ3MmYtNmMzMzYsTE1NjE5liwidCi6imU1YzM3OTgxLTY2NjQtNDEzNCO4YT8jLTY1N1NkMmFmODBiZSIsMiI6Ijhh9
This is a reference to the protection of civilians in settings of conflict or where there is a peacekeeping operation (usually UN). For more of a discussion about the definition, see HPG, Sarah Adamczyk, Policy Brief 74, 'Twenty years of protection of civilians at the UN Security Council', page 3 and page 6, https://www.odi.org/publications/11348-twenty-years-protection-civilians-un-security-council


Double-hatted or triple-hatted leadership refers to the situation where the head of the UN in country is head of the humanitarian, development and/or peace UN entities.

InterAction, Embracing the Protection Outcome Mindset: We All Have A Role To Play’, A Results-Based Protection Briefing Paper, page 6

https://extranet.who.int/ssa/LeftMenu/Index.aspx

Ibid


IASC Results Group 1 on Operational Response has a Sub-group on Centrality of Protection – https://interagencystandingcommittee.org/results-group-1-operational-response. This Sub-group is co-chaired by OCHA and InterAction.


Protection mainstreaming comprises (1) prioritising safety and dignity and avoid causing harm; (2) meaningful access; (3) accountability; (4) participation and empowerment, https://www.globalprotectioncluster.org/themes/protection-mainstreaming/


InterAction, Embracing the Protection Outcome Mindset: We All Have A Role To Play’, A Results-Based Protection Briefing Paper, page 9


46 Any protection outcomes should be realistic over a specified time period. They may be formulated as sub-outcomes or milestones which are contribution/steps to ultimate outcomes, also taking into consideration longer-term and development objectives. See InterAction Results-Based Protection approach for this incremental approach, https://docs.google.com/viewerng/viewer?url=https://protection.interaction.org/wp-content/uploads/2019/06/2019_inaction_memo.pdf.

47 These indicators need to take the bigger picture into consideration. They require an understanding of the context and the appropriate response options, in which the provision of assistance is only one. The response needs to consider being demand-led – what do people need to be or feel safer or reduce other risks they face?


49 https://www.humanitarianresponse.info/en/operations/iraq/protection-cluster. The tool was piloted across all Ninewa camps in 2018; and was rolled out in April-May 2019.

50 https://app.powerbi.com/view?r=eyJrIjoiZjRiNDg5MmMtZTg0OC00NjdiLWI3MmYtNmMzFhYTE1Njg5IiwidCI6IYmU1YzM3OTgxLTY2NjQtNDEzLTY1NDNkMmFmODBiZSIsImMiOjh9

51 https://www.cpaor.net/node/670

52 https://www.cpaor.net/foodsecurity_driverCPissues

54 CP-EIE Collaboration in Coordination Framework, July 2019,
https://educationcluster.box.com/s/9mqshd102rzwwwi7cpobxxo0jc4cmkg

55 Education-Child Protection Response Framework, August 2019,

56 https://educationcluster.box.com/s/jx2vczziztjrj28t1yz30hs24amnmtpa

57 https://www.etcluster.org/services/services-communities-s4c

58 https://fscluster.org/programme-quality-and-cross-cutting


60 https://gbvguidelines.org/en/

61 https://www.unfpa.org/featured-publication/gbvie-standards


63 In 2016, there were baseline assessments in Iraq, Myanmar, Nigeria, South Sudan, Syria (cross-border from Turkey). These concluded that the humanitarian community is not doing enough to address GBV in emergencies.

64 Real-Time Accountability Partnership, Endline Evaluation, June 2019

65 https://www.calltoactiongbv.com/

66 https://www.calltoactiongbv.com/who-we-are


70 Call to Action on Protection from GBV in Emergencies: Northeast Nigeria Road Map 2018-2019, https://drive.google.com/file/d/1Z4hoxya10cVhgVYbjUOmjq4eFTbLaPcv/view


72 The Steering Committee included members from the GPC, Child Protection AoR, GBV AoR, Mine Action AoR, Inter Agency Working Group on Reproductive Health in Crisis; and Working Group on Mental Health and Psychosocial Support.


74 Global Health Cluster, Quality Improvement Task Team, Quality of Care in Humanitarian Settings, May 2020

75 Ibid, page 4

76 https://extranet.who.int/ssa/LeftMenu/Index.aspx
77 Ibid
78 https://www.who.int/emergencies/attacks-on-health-care/surveillance-system/en/
79 http://www.emro.who.int/pse/publications-who/monthly-referral-reports.html
81 https://handbook.spherestandards.org/en/sphere/#ch008_008
85 Ibid, page 25
90 https://protection.drchub.org/
93 Ibid, page 4
94 Global WASH Cluster, Quality Assurance and Accountability Systems, Modular Analytical Framework for Quality and Accountability, page 5
95 Ibid, page 22
97 Ibid, page 17