

**THINK PROTECTION!**  
**A QUICK GUIDE TO INTEGRATING PROTECTION INTO DISASTER RESPONSE IN THE PACIFIC REGION**

**What is humanitarian protection & how does it relate to disaster response across sectors?**

Humanitarian protection is about improving safety, well-being and dignity for crisis-affected populations. Protection refers not only to what we do but the way we do it. It involves actively applying core protection principles and responsibilities to our humanitarian work across all sectors. Core principles include:

- Do no harm
- Non-discrimination
- Identifying the most vulnerable and their specific needs with attention to age, gender, disability and other relevant aspects of diversity according to the context
- Safe and dignified access to basic services
- Community participation & empowerment
- Identifying and strengthening existing positive community protection strategies/building local capacity

Humanitarian protection also includes being aware of specific protection issues that arise in emergencies and may come to your attention in the course of your sectoral work, but do not fall within your sectoral or organisational mandate or capacity. These issues require information-sharing, advocacy and/or referral to specialised actors for appropriate response. Such issues include:

- Child protection concerns (eg identifying and assisting separated and unaccompanied children)
- Gender-based violence
- Sexual exploitation and abuse
- Protection of people with disabilities
- Protection of people displaced by disaster

Remember: providing humanitarian assistance in itself is not enough. Prioritizing safety and dignity for crisis-affected populations is a fundamental responsibility. Respect for basic human rights and protection principles must be part of the way we carry out our work. In our efforts to save lives and relieve suffering in a disaster, we must ensure that we:

- ❖ Identify and reach the most vulnerable, excluded or 'invisible' within an affected population
- ❖ Do not cause further harm or create new risks of harm through our well-intentioned actions and interventions
- ❖ Do not ignore serious protection concerns – such as violence, abuse, exploitation - that come to our attention in the course of work
- ❖ Take steps to prevent and/or respond to protection problems through our assistance activities and through information-sharing, referral and advocacy with other relevant actors. Emergency relief alone is not enough if vulnerable people are experiencing threats to their safety, wellbeing and dignity, particularly if these threats arise as a consequence of our humanitarian programs and the manner in which we implement them.

**Protection in Disasters – A Shared Responsibility**

In a disaster, various protection problems – in addition to the risks and harms caused by the disaster itself – may arise to threaten the safety, wellbeing and dignity of those affected by the disaster. Protection problems may arise in the form of discrimination, violence, abuse, exploitation, deliberate deprivation or neglect of vulnerable individuals/groups (eg religious & ethnic minorities, people with disabilities, women, children, youth, older people etc) within the affected population. Some of these problems may have existed in the community before the disaster, and may increase with the shock and stress of the disaster. Others may arise as a consequence of humanitarian assistance and the way in which emergency relief activities are designed and delivered (eg inappropriate, inaccessible or unfair distributions). When humanitarian actors fail to engage communities in identifying threats, vulnerabilities and capacities and fail to analyse the risks associated with our own actions, we may ultimately cause harm. Humanitarian action that is “protection-blind” can lead to further harm, reinforce existing inequality and exclusion, and/or fail to reach the most vulnerable.

## A QUICK GUIDE TO INTEGRATING PROTECTION INTO DISASTER RESPONSE ACROSS SECTORS

Below is a list of issues to consider in ensuring a protection approach to disaster response. It is not exhaustive, but provides some basic guidance to support protection-oriented relief and recovery activities across sectors.

### General

- Natural disasters affect people differently based on their age, gender, disability and many other factors. Men, women, boys, girls, older people, people with disabilities, people living with serious illness, ethnic minorities, religious minorities etc, all face different risks and different barriers to accessing assistance and services before, during and after disaster. These diverse needs should be reflected in assessment and response across all sectors. At minimum age and sex disaggregated data should be gathered in sectoral assessment and monitoring processes
- Humanitarian actors across all sectors should strive to ensure that the assistance/services we deliver are (i) appropriate and accessible to all those in need within an affected population and (ii) provided in a manner that does not expose vulnerable people to further risk of harm.
- Humanitarian actors across all sectors should ensure that the most vulnerable are targeted with specific actions when appropriate (eg where one group is more at risk of harm/abuse than others in the population, special measures should be taken to ensure that group benefits from assistance in safety and with dignity).
- Humanitarian actors across all sectors should ensure that information on relief and recovery activities is effectively communicated to the affected population and reaches the most vulnerable in an accurate and timely manner

### Emergency Assessments

In assessing needs of the affected population across all response sectors:

- Analyse the composition of the affected population in some detail including for example:
  - No. and average size of households
  - Population/household composition disaggregated by age & sex
  - No of single-headed households (disaggregated by man/woman/boy/girl head of household)
  - No. of pregnant/lactating women
  - No. of unaccompanied boys and girls
  - No. of elderly men and women
  - No. of men, women, and children with disabilities (disaggregated by type of impairment)
  - No. of men, women and children with serious/chronic illness
- Assess the situation of *all* displaced people (including those in temporary settlements, those dispersed in smaller groups and those living with host families)
- Identify existing coping strategies adopted by the affected population to respond to the disaster and prevent further harm (ie. positive and negative coping strategies)
- Based on the above information, sectoral staff should then consider what arrangements are needed for males and for females with specific needs (such as those in the population groups listed above) to ensure that they are able to access humanitarian assistance/services in safety with dignity (eg privacy, safety, mobility, dignity).

## FOOD ASSISTANCE

- Which government agency and other national actors are responsible for provision of food assistance? Are you taking steps to work together with the responsible government authority?
- All agencies providing food assistance to the affected population should identify the most vulnerable individuals/groups within the community – and be aware of the specific needs of any group according to age and gender. This information should guide the design and delivery of food assistance to ensure that the most vulnerable are able to access food in safety and dignity
- In registering families/households for food assistance, avoid registering only the male head of household. Do not exclude the registration of other adult family members or unaccompanied minors.
- Disaggregate beneficiaries by age and sex
- Include host community in food security and nutrition needs assessments to avoid tensions arising between displaced people and host communities
- Engage community representatives (including women, men, youth, ethnic minorities, older people) in the design and implementation of food distribution processes (eg food committee) to ensure that food assistance is culturally appropriate and that the distribution times/locations/processes are appropriate
- Consider the gender balance of distribution teams to ensure that there are enough women available as a contact point for women in the community.
- Consider the quantities of distributed food taking into account distance from distribution point to the place where beneficiaries are staying. Are beneficiaries able to carry the food home safely?
- Explore options for home delivery of food assistance where necessary (eg for people with disabilities who cannot access the distribution point; elderly, child-headed households etc)
- Arrange supplementary feeding for older people or people suffering from severe/chronic illness, if needed
- Ensure that any differences in amount/content of food packages on the basis of need, are clearly communicated to, and understood by recipients
- Provide information on food distributions through a range of different communication methods (ie poster, radio, loudspeaker, TV, newspaper etc) to ensure that information reaches all beneficiaries (eg literate, illiterate, people with disabilities, minority language groups among affected population)
- Check that the distribution *site* is safe & accessible for all groups within the affected population and not too far from places of residence. Beneficiaries should not have to pass through dangerous areas to access food assistance
- Check that the distribution *time* is safe for beneficiaries to travel to the distribution point and return home without exposure to further risk of harm
- Establish measures to prevent, monitor and respond to safety concerns, including any intimidation, coercion, violence or exploitation associated with food distribution. Ensure that all staff/community representatives involved in food distribution are aware of these processes
- Provide clear information to the affected population explaining that vulnerable people do not have to pay or provide services/favours to anyone in exchange for receiving food assistance. Ensure that this information is communicated to women and girls in the affected population
- Set up a confidential complaints mechanism for people to report concerns, including incidents of intimidation, violence and sexual exploitation committed by community members and/or humanitarian personnel.
- Keep personal data and lists of recipients firmly restricted to concerned actors and safe from unintended use.
- In ongoing monitoring of food security programs, include the following inquiries:
  - o Does the affected population face any barriers/obstacles in accessing food assistance?
  - o Are women, men, girls and boy of different ages and backgrounds able to access food assistance safely?
  - o Is there any group in need of food assistance who is not able to access it?
  - o Does the distribution system create or increase any protection risks?

## HEALTH & NUTRITION

- Which government agency and other national actors are responsible for provision of health services? Are you taking steps to work together with the responsible government authority and local health providers?
- Ensure safe and equal access to inclusive and non-discriminatory health services
- Take steps to ensure that health services gender-sensitive. (Does the health facility have both male and female staff? Who provides health care to whom - what are the local beliefs and practices concerning consultation with same-sex or opposite-sex health professional?)
- Involve local health workers where possible – ensure that the ethnic and gender balance of community health workers and staff at health facilities is appropriate to meet the needs of the population
- Ensure that health staff are aware of cultural beliefs and practices regarding pregnancy, birthing, menstruation, and women's & men's reproductive health.
- Provide training to male and female health professionals on clinical management of rape
- Provide training to male and female health professionals on assisting people with different disabilities (ie persons with impaired hearing/vision/ mobility/cognitive ability/mental health)
- Provide assistive devices for people with disabilities or referral to appropriate agencies to obtain assistive devices
- Be aware of rehabilitation services for referral of those with newly acquired disabilities as a result of the disaster
- Provide culturally appropriate mental health services. Note that trauma counselling and psychosocial services should not be provided by untrained staff. Where psychosocial support is not available in the health facility, ensure that health workers are aware of referral agencies and procedures. Where appropriate referral services are not available, bring this to the attention of humanitarian coordinators and advocate for their establishment.
- Ensure that health workers are trained to respond appropriately to GBV survivors. Develop protocols with clear standards of care and treatment for children and women, and create procedures to protect the privacy of victims of violence
- Liaise with UNFPA for provision of PEP kits for health facilities
- Ensure that patient consultations and documentation are private and confidential
- Ensure that nutrition programs take into account the special needs of vulnerable groups (eg pregnant/lactating women; children under 5 years, elderly)
- Document and register the presence of unaccompanied minors and inform relevant child protection actors (eg UNICEF, Save the Children, Ministry of Social Welfare)
- Mechanisms are in place (and staff are aware of them) for monitoring and reporting instances of abuse and exploitation
- Ensure a code of conduct is in place for all medical staff, including respect for confidentiality and informed patient consent
- Enhance the capacity of community health workers to monitor, report and refer protection issues, ensuring they are aware of the need to report protection cases in confidence
- In ongoing monitoring of health & nutrition programs, include the following inquiries:
  - o Are some groups affected more than others with health problems requiring medical treatment?
  - o Are women, men, girls and boys of different ages and backgrounds able to access health services safely?
  - o Are there any obstacles faced by GBV survivors in accessing appropriate healthcare (eg no female health professionals available to respond to medical needs of GBV survivors)

## WATER/SANITATION/HYGIENE (WASH)

- Which government agency and other national actors are responsible for provision of WASH services? Are you taking steps to work together with the responsible government authority?
- Consult with the disaster-affected (including women, children and vulnerable groups) on the design and location of water points and sanitation facilities and identify any safety and access concerns they may have.
- Design sanitation facilities to ensure *privacy and safety*. Separate lockable toilets and bathing facilities should be provided for men and women, boys and girls. Bathing and toilet facilities should have doors, be well-lit, and located in visible central locations. Pit latrines should be constructed taking into account child safety.
- Design water and sanitation facilities in a way that is *accessible* for all (including children, older people and people with disabilities).
- Water points should be safe and easy to operate by children as well as adults
- Ensure that women, children and other vulnerable groups are given priority in receiving water where water sources are limited
- Provide the host community with WASH services on an equitable basis where they are also experiencing shortages in access to water and basic sanitation
- Ensure that facilities are not dominated or controlled by a particular social group and that vulnerable groups have equal access to water resources (eg access to water should not be subject to discriminatory conditions, such as requiring displaced persons to pay a tax in order to access it)
- Is there a mechanism for individuals or groups to raise concerns about the water and sanitation facilities?
- In ongoing monitoring of WASH programs, include the following inquiries:
  - o Do affected populations face any barriers/obstacles to access adequate water and sanitation? Is access to water equal for everyone or do some groups face difficulty accessing water sources?
  - o How far is the nearest water source?
  - o Who is responsible for collecting water (women, men, boys or girls?)
  - o Are there any barriers for women, men, boys or girls, in accessing water and sanitation?
  - o Does the design and location of water, sanitation and hygiene facilities create or increase protection risks?

## SHELTER & NON-FOOD ITEMS

- Which government agency and other national actors are responsible for provision of shelter services and NFIs? Are you taking steps to work together with the responsible government authority?
- All agencies providing shelter and NFI assistance to the affected population should identify the most vulnerable individuals/groups within the community – and be aware of the specific needs and safety concerns of any group according to age and gender. This information should guide the design and delivery of shelter & NFIs to ensure that the most vulnerable are able to access appropriate shelter/NFIs in safety and dignity
- Are there measures in place to prevent and respond to physical/sexual violence arising in crowded shelter conditions (eg in evacuation centres)?
- Are there measures in place to ensure that women, men, boys and girls with special shelter needs or vulnerabilities are prioritised and supported?
- In registering households for shelter/NFI assistance, avoid registering only the male head of household. Do not exclude the registration of other adult family members or unaccompanied minors.
- Disaggregate beneficiaries by age and sex
- Include host community in shelter and NFI needs assessments to avoid tensions arising between displaced people and host communities
- Engage community representatives (including women, men, youth, ethnic minorities, older people) in the design and implementation of shelter and NFI programs to ensure that the shelter materials and NFIs are culturally appropriate, adaptable and functional in the local context
- Consider the gender balance of distribution teams to ensure that there are enough women available as a contact point for women in the community.
- Consider the provision of additional NFIs essential for personal hygiene, dignity and well-being, including sanitary materials for women and girls, that are consistent with cultural and religious traditions
- Explore options for home delivery of shelter materials/NFIs where necessary (eg for people with disabilities who cannot access the distribution point; elderly, child-headed households etc)
- Ensure that any differences in amount/content of shelter/NFI packages on the basis of need, are clearly communicated to, and understood by recipients
- Provide information on shelter/NFI distributions through a range of different communication methods (ie poster, radio, loudspeaker, TV, newspaper etc) to ensure that information reaches all beneficiaries (eg literate, illiterate, people with disabilities, minority language groups among affected population)
- Check that the distribution site is safe & accessible for all groups within the affected population. Beneficiaries should not have to pass through dangerous areas to access shelter/NFI assistance
- Check that the distribution time is safe for beneficiaries to travel to the distribution point and return home without exposure to further risk of harm
- Establish measures to prevent, monitor and respond to safety concerns, including any intimidation, coercion, violence or exploitation associated with shelter/NFI distribution. Ensure that all staff/community representatives involved in shelter/NFI distribution are aware of these processes
- Provide clear information to the affected population explaining that vulnerable people do not have to pay or provide services/favours to anyone in exchange for receiving shelter/NFI assistance. Ensure that this information is communicated to women and girls in the affected population
- Set up a confidential complaints mechanism for people to report concerns, including incidents of intimidation, violence and sexual exploitation committed by community members and/or humanitarian personnel.
- Ensure that shelter assistance takes into account the land tenure situation of displaced people. Advocate with land and property owners and local authorities to avoid eviction
- Keep personal data and lists of recipients firmly restricted to concerned actors and safe from unintended use.
- In ongoing monitoring of Shelter & NFI programs, include the following inquiries:
  - o Do affected populations face any barriers/obstacles to access shelter/NFI assistance?
  - o Are there any barriers to women receiving shelter assistance?
  - o Is there any group in need of shelter/NFI assistance who is not able to access it?
  - o Does the location/type of shelter/NFIs create or increase any protection risks for the affected population?

## LIVELIHOODS

- Which government agency and other national actors are responsible for provision of livelihoods programs/support? Are you taking steps to work together with the responsible government authority?
- In designing livelihoods programs, ensure that you are aware of national laws regarding land title, particularly those relating to indigenous communities, and applicable national labour laws?
- Identify groups at risk of unsafe livelihoods practices (eg child labour, sex work) and prioritise provision of alternatives for these groups
- In situations of displacement, consider provision of income-generation support immediately following displacement to help prevent IDPs engaging in illegal or unsafe livelihood strategies.
- Involve women and men in designing livelihoods programs and explore how women's access to and control over agricultural/livelihoods assets (eg land, tools, seeds, fertilizer) compare with men's?
- Ensure that the specific needs of vulnerable groups (eg female-headed HHs, minority groups, people with disabilities) are considered in designing livelihood activities and social protection programs)
- Develop livelihoods programming in a way that protects and supports household caring responsibilities and promotes family unity. Participation in livelihoods opportunities should not undermine child protection or other caring responsibilities. Consider employing care providers, providing care facilities or supporting community care mechanisms to enable women's participation in livelihoods programs.
- People living with disabilities, people living with HIV, older people, children, women with caring responsibilities and others must be able to benefit from livelihoods projects even if they are physically unable to participate
- In designing livelihoods projects, analyse the local context and develop programs that promote peaceful coexistence, reconciliation and conflict prevention, (eg establish projects that benefit both displaced communities and host communities)
- The affected population should be engaged in determining the form and content of livelihoods programs, including the choice of traditional/indigenous livelihood practices over large-scale production.
- Where appropriate, consider collective livelihoods projects over those that benefit individuals. Collective livelihoods practices contribute to community protection - particularly in rural community economies which are closely linked with social networks, community governance structures and cultural practices - increasing the resilience of whole communities.
- Livelihoods programs should ensure that local livelihoods, local markets or labour supply are not undermined, and that a dependency on aid is not created
- Monitor and respond to any exploitative child labour
- Monitor and respond to exploitation of groups and/or individuals (such as women and child-headed households) that rely on men/other groups to help with livelihoods projects
- In ongoing monitoring of livelihoods programs, include the following inquiries:
  - o Are there any new patterns of income-generation/livelihoods post-disaster
  - o How are the most vulnerable (eg female-headed HHs; child-headed HHs) coping with the loss of livelihoods/economic insecurity? Are they accessing livelihoods programs?
  - o Can participants in livelihoods programmes safely access production and market sites?
  - o Does the delivery of livelihoods programs create or increase protection problems and risks?

## EDUCATION

- Which government agency and other national actors are responsible for provision of education services? Are you taking steps to work together with the responsible government authority?
- Promote equal access to education for all, including children with disabilities and others belonging to marginalised or disadvantaged groups
- In developing and implementing educational programs, take into account the situation of unaccompanied children
- Engage the affected population – including children and youth - in decisions regarding location, structure and environment of the educational facility, and identification of any safety concerns they may have
- Ensure that child-friendly spaces, temporary learning centres and classrooms are located in safe areas; are not exposed to further hazards (eg landslides, floods, toxic waste etc); and are accessible for all (including children with disabilities)
- Ensure that IDP children have equal access to available education services
- Consider potential safety issues of combining much older children with young children in education facilities and manage through proper supervision or where possible/appropriate separate classrooms and/or play areas.
- All staff should be trained in a Code of Conduct covering appropriate interaction with learners and prohibition on sexual exploitation and abuse. The Code of Conduct should include a prohibition on corporal punishment. All staff should be aware of procedures for prevention, reporting and referral of child abuse incidents occurring in child-friendly spaces and temporary learning centres.
- Children should be aware of the Code of Conduct and how to report any cases of exploitation and abuse.
- Where emergency education kits are distributed (eg. school-in-a-box) ensure that they are gender sensitive and responsive to boys and girls needs
- Provide separate toilets for boys, girls, women and men, in safe locations, in each child-friendly space and temporary learning centre
- Ensure that adequate quantities of drinking water and water for personal hygiene are available at the site of the learning centre/child-friendly space or in close proximity
- Situate play areas in clearly visible and safe locations
- Provide training to children on emergency evacuation procedures.
- In ongoing monitoring of education programs, include the following inquiries:
  - o Does anyone in the affected population face any barriers/obstacles to access education?
  - o Has the disaster affected whether girls, compared to boys, are able to attend school (eg increased household or care-giving responsibilities; pressure to contribute to family income; increased restrictions in mobility)?
  - o Do schools/learning centres and their locations create protection problems or increase exposure to violence, neglect and exploitation?