

Somalia Humanitarian Country Team

Centrality of Protection Strategy – 2018-2019

Rationale and Aim of the Centrality of Protection¹ Strategy

Somalia has made significant political progress in recent years with conclusion of its state formation process, as well as elections for Parliament and President in 2016 and 2017 respectively, and peaceful transition of power. However, a number of challenges remain, including fragile relations between the Federal Government (FGS) and the Federal Member States (FMS), weak rule of law institutions, continued insecurity and a need for further progress in the formation of Somali security institutions, including the Somali National Armed Forces (SNAF) and expansion of governance. Challenges which need to be addressed in a context of widespread poverty and underdevelopment, as well as continued multi-layered conflict coupled with recurrent drought.

As a result, serious protection concerns persist in Somalia, putting civilians' lives at risk, forcing many to flee, exposing them to multiple risks while displaced, and impeding durable solutions. Abuses against civilians, including wide spread sexual and gender-based violence (GBV), recruitment and use of children, indiscriminate and disproportionate attacks on civilian areas and infrastructure, explosive hazards and forced displacement, remain a pervasive feature of the conflict in Somalia. Compounding the conflict and its inherent risks to civilians, the extended drought also has triggered massive displacement, and further exposed civilians to serious protection risks. Women, children, youth and marginalized communities, especially the most vulnerable (older people, persons with disabilities, etc.) among them are at risk and face specific protection concerns. The protection crisis is also characterized by entrenched but fluid societal divisions, aggravated by regular competition for resources between social groups. (*Reference Annex 2 – Protection Analysis for further information.*)

Three interlinked priority areas where protection is lacking in different parts of Somalia and poses a significant challenge to the entire humanitarian response were identified by the Protection Cluster's analysis in consultation with the Humanitarian Country Team (HCT) and Inter-Cluster Coordination Group (ICCG). These are:

- 1). Identifying and addressing differential risks of exclusion and discrimination, including those based on societal discrimination, power structures, vulnerability, age, and gender (and the need for inclusion of all relevant responders in order to prevent exclusion).
- 2). Addressing critical protection concerns with increasing displacement towards IDP sites and collective-centers, including heightened protection risks/threats that have emerged in the failure to end displacement through appropriate solutions (local integration, return, and settlement elsewhere).
- 3). Enhancing the protection of communities in conflict zones, who are affected by indiscriminate and disproportionate targeting of civilians and civilian assets vital for survival, through engagement of these communities in their self-protection, enhanced delivery of assistance, and robust engagement with parties to the conflict.

¹ The Inter-Agency Standing Committee Policy in Humanitarian action defines protection as: "... all activities aimed at obtaining full respect for the rights of the individual in accordance with the letter and the spirit of the relevant bodies of law (i.e. International Human Rights Law (IHRL), International Humanitarian Law, International Refugee law (IRL))." However, it must be noted that different actors undertake different protection activities, which may range from immediate reactive activities, to remedial, to environment building. Other activities, if linked to any of these activities in the strategy such activities should be considered as protection oriented.

Addressing the above three priorities is the key aim of this Centrality of Protection (CoP) Strategy. Through this Strategy the Somalia Humanitarian Country Team aims to focus the entire humanitarian system on the identified key protection issues.

In addition to the substantive protection threats/risks priorities outlined above, the HCT has also identified three priority areas of ‘ways of working’, which need to be addressed in order to contribute to the aim of this Strategy. These are:

- 1). Strengthening system wide data collection, analysis informing response, and establishing a repository on protection risks/threats, that adhere to global safety and ethical standards².
- 2). Strengthened HCT protection influenced advocacy (including for protection funding), and enhanced communication on protection, tailored to the socio-cultural context of Somalia.
- 3). Strengthened Protection Mainstreaming, Accountability to Affected Populations (AAP), and Prevention of Sexual Exploitation and Abuse (PSEA) across all sectors of the Humanitarian response.

Scope of the HCT CoP Strategy

In line with the Inter-Agency Standing Committee (IASC) Centrality of Protection statement 2013³ and the IASC Policy on Protection in Humanitarian Action 2016,⁴ this Somalia HCT CoP Strategy seeks to re-affirm that protection is a collective responsibility of the entire HCT requiring system wide commitment. It aims to address the most significant protection risks and violations faced by affected populations that impact the entire humanitarian system in Somalia, requiring common position, joint response and advocacy by the HCT throughout the humanitarian cycle. It articulates and identifies the complementary roles and responsibilities among humanitarian actors to contribute to protection outcomes, by using all available tools and mechanisms to effectively protect those affected by the humanitarian situation of a multi-layered conflict coupled with drought. Lastly, it takes into account the role and contribution of other relevant actors and entities, such as the UN Country Team (UNCT), the UN Mission in Somalia (UNSOM) and development actors, to achieve protection goals.

*This CoP Strategy provides a basis for the Protection Cluster’s own strategy. It is, however, separate from the Protection Cluster’s own strategy which is developed and implemented by its members.*⁵

Primary Responsibility for Protection

The primary responsibility for protection rests with the national authorities, in accordance with national and international legal instruments. In addition, non-state actors in situations of armed conflict are also obliged to protect persons affected during conflict as stipulated in International Humanitarian Law. The HCT will endeavor to work with the relevant Federal and State authorities and other key stake-holders to ensure effective implementation of the CoP Strategy.

² Refer IASC Common and Fundamental Operational Data Standards & ICRC Handbook on Data Protection in Humanitarian Action.

³ The Centrality of Protection in Humanitarian Action Statement by the Inter Agency Standing Committee Principals, endorsed by the IASC Principals on 17 December 2013.

https://interagencystandingcommittee.org/sites/default/files/centrality_of_protection_in_humanitarian_action_statement_by_iasc_princ_i.pdf

⁴ The IASC protection policy clearly states that for protection to be central to humanitarian action, a system wide commitment is required. In this regard, the policy outlines the responsibilities of the HCT, ICCG, the Protection Cluster and all clusters in ensuring the Centrality of Protection (refer P.25 Annex II). In addition to stating that protection is the responsibility of all humanitarian actors and that all should be working towards protection as an outcome of our actions/activities, the policy also provides definitions of protection mainstreaming, protection integration, and stand-alone protection activities and describes what a protection outcome is (refer pp 4 and 5 of the policy). <https://interagencystandingcommittee.org/protection-priority-global-protection-cluster/documents/inter-agency-standing-committee-policy>

⁵ The Protection Cluster Strategy will be situated in between the HCT Strategy and the Protection Cluster HRP and will guide the work of its members.

Humanitarian actors have an essential role to protect and assist people in need by prioritizing interventions based on vulnerability and severity of need, acting according to humanitarian principles, ensuring interventions ‘do no harm’ and adhering to the principles of equality (‘different needs-equal opportunities’),⁶ in their engagement with affected communities.

HCT members will endeavor to support the robust implementation of this HCT CoP Strategy based on their individual accountabilities as enshrined in the HCT’s Accountability Compact.⁷

Key linkages to the HCT CoP Strategy

This Strategy seeks linkages with – and builds on – ongoing efforts aimed at improving the protection environment in Somalia currently pursued by the HCT through a number of key strategies/approaches. These key strategies should be read alongside the HCT CoP Strategy for an effective implementation by the HCT of the priorities outlined in the Strategy. These are: the Humanitarian Needs Overview/Humanitarian Response Plan 2018 and the Humanitarian Response Strategy 2016-2018;⁸ Human Rights Upfront Initiative (HRuF);⁹ the NGO Consortium Strategic Plan 2017-2019; the Real Time Accountability Partnership (RTAP); and the Humanitarian Access Strategy and Action Plan September 2016-August 2017. (*Reference Annex 1 – Implementation Plan for HCT CoP Strategy, for a detailed reading of how these documents support the priorities of the Strategy.*)

Complementarities and potential synergies with other ongoing initiatives

As noted in both the Senior Transformative Agenda Implementation Team (STAIT) and Emergency Directors Group (EDG) mission reports, from October 2016 and April 2017, the response in Somalia is well-advanced in the efforts towards ensuring the humanitarian, development, and peacebuilding efforts are in line with the principles enshrined in the New Way of Working and the outcomes of the World Humanitarian Summit in 2017.¹⁰ Somalia’s long-term stability and the ability to uphold the rights and dignity of individuals, will depend on how it is able to operationalise this nexus and break the cycle of recurring humanitarian crises. Several identified ongoing initiatives at the country level could be further strengthened to promote complementarity and more efficient use of resources through the identification of collective protection outcomes. Initiatives that have a connection with protection work undertaken by the humanitarian community are: the National Development Plan (NDP); the Durable Solutions Initiative (DSI); Action Plans between the Federal Government of Somalia and United Nations to prevent and respond to grave child rights violations; Federal Government of Somalia Gender Policy, which aims to promote the rights of women and girls in Somalia, thus reducing their vulnerability to GBV; and UN Mission in Somalia initiatives such as Community Recovery and Extension of State Authority (CRESTA/A) and UNSOM Rule of Law projects of mobile courts and police training.

Engagement with these complementary initiatives will be guided by humanitarian principles and not all humanitarian actors will necessarily engage directly with some of these initiatives. (*Reference Annex 1 – Implementation Plan for HCT CoP Strategy, for a list of these complimentary initiatives.*)

⁶ Refer, IASC Gender Handbook in Humanitarian Action and IASC Gender Equality Policy Statement.

⁷ HCT Compact, August 2017 for Cluster Lead Agency, NGO Representative and Donor Representative.

⁸ Refer: <https://reliefweb.int/report/somalia/somalia-2016-2018-humanitarian-strategy>

⁹ Refer to recommendations of HRUF stock taking exercise in Somalia, adopted on 8 June, 2017.

¹⁰ Reference can also be made to the Secretary General’s 2030 agenda <http://undocs.org/A/72/124> to under-pin the convergence of new ways of working. In promising to leave no one behind, the 2030 Agenda challenges policymakers, development practitioners and multilateral bodies to look far more deeply at data and the people behind the aggregated statistics. It calls for a universal approach that recognizes that the pursuit of the Goals affects, albeit in different ways and to different degrees, every person around the globe. Fulfilling the commitment to leave no one behind will imply interrogating national averages and country typologies based on national income through reliable, disaggregated data and a stronger focus on ending exclusion. It will require calibrating the necessary support for each country through multidimensional approaches, regardless of a country’s income status.

Key Protection Priorities for the HCT for 2018-2019

The identified priorities have been divided into three overarching but interlinked protection threats/risks to be addressed by the entire humanitarian system (including the ICCG, individual clusters, individual organizations, as well as communities) led by the HCT. In addition, there are three cross-cutting process oriented priorities on ‘ways of working’ to be adopted by the HCT and the humanitarian system it leads, in order to improve the response to the overarching protection threats/risks. The identified protection risks/threats may overlap or may be confined to a particular geographic area or group of individuals. The ‘ways of working’ priorities are cross-cutting and important for all the protection priorities identified in the HCT CoP Strategy.

The HCT CoP Strategy provides a framework for two years (2018-2019) given the protracted nature of the Somalia situation and the numerous actions that need to be undertaken. The actions listed here are not exhaustive but suggested as being critical at the initial stage, and may be subject to revision as implementation of the HCT CoP Strategy progresses. Not all actions listed here are new, in a number of cases initiatives are already ongoing, while others may be initiated in 2018. (*Reference Annex 1 – Implementation Plan for HCT CoP Strategy.*)

The HCT CoP Strategy is to be considered a living document which, based on identified changes in the situation, can be adjusted as required. This will be done on the basis of the Protection Risk Analysis which will be kept alive through regular updates to the HCT based on quantitative and qualitative analysis of the evolving situation. (*Reference Annex 2 – Protection Analysis.*)

Key protection priorities: risks/threats to be prevented, mitigated, and/or addressed collectively

(Note: The below are over-arching key protection risks/threats that affect the whole humanitarian response in Somalia, in some cases overlapping, and in other cases concentrated in geographical pockets or affecting only certain communities or individuals within communities)

Priority 1. Enhancing ways to identify and address differential forms of exclusion, including those based on societal discrimination, power structures, vulnerability, age, and gender; and strengthening inclusion of and ensuring accountability by community based and other non-traditional humanitarian responders, for more effective protection to affected populations.

Issue: The issue of exclusion¹¹ is complex in the context of Somalia, particularly in the humanitarian sector. There is need for a better understanding of the risk/threat of exclusion and identification of those in need of assistance and protection, either due to poorly defined vulnerability and targeting criteria, manipulation of humanitarian processes, lack of understanding of distribution modalities (e.g. phone cash transfers), biases inherent in the humanitarian architecture, and/or deliberate denial of assistance including, in forms of economic or physical blockages, etc.

In addition, the humanitarian system led by the HCT needs to more proactively ensure inclusion of IDP voices and their wider networks, including community based and local governance mechanisms, and others such as diaspora networks who contribute remittances and other support. Any such engagement needs to be undertaken while keeping in mind a ‘do no harm’ approach and while stimulating awareness and adherence to humanitarian principles.

¹¹ DG ECHO definition: ‘Social exclusion is defined as a process and a state that prevents individuals or groups from full participation in social, economic and political life and from asserting their rights. It derives from exclusionary relationships based on power resulting from social identity (e.g. race, gender, ethnicity, caste/clan/tribe or religion), or social location (areas that are remote, stigmatised or suffering from war/conflict).’ Other actors define it as ‘marginalized communities, defined by clan, culture (pastoralist vs agricultural), physical appearance, occupational group, or perceived ethnicity or caste, which are excluded from power and resources either on the basis of identity, or because the group is a minority in a particular geographic area’.

Suggested actions by HCT:

(i). Development of an HCT position paper on assistance targeting and a common definition of vulnerability in the Somalia context, which contextualizes the different needs of women, men, boys, and girls, taking into account age, gender, and diversity factors, including social background and disability. Further, a system for monitoring compliance is to be developed.

(ii). Mapping of current risks and occurrences of exclusion, in order to understand its manifestations and dynamics across sectors, and identifying what appropriate mitigation steps are. Different initiatives could inform this mapping, for example, one such initiative is the Social Protection Joint Program with UNICEF, WFP, MoHADM and MoPIED to be launched in 2018.

(iii). HCT to support standardized integration of Protection Risk Analysis-approaches in program design and minimum requirements for ongoing community consultation, including for Cash-Based Transfer programs.

(iv). Expanding the engagement with non-traditional humanitarian actors who provide humanitarian assistance and protection, including community based and local governance mechanisms, diaspora and youth volunteer groups. Such engagement should emphasize introduction to humanitarian principles, protection capacity building and supporting on protection lens insertion (e.g. defining vulnerability) and community based programming, while keeping ‘do no harm’ in mind:

- HCT to discuss avenues and merits of engagement with diaspora communities including, for protection programming. One project to explore could be the Diaspora Emergency Action and Coordination project (DEMAC).¹²
- HCT to discuss and identify the way forward for engagement on the issue of gatekeepers, building on recommendations for example, from the DfID TANA report¹³ and the Human Rights Watch report.¹⁴
- HCT to ensure commitment to the provisions of the 2009 NGO Position Paper on Operating Principles and Red Lines¹⁵ and the draft 2017 Operating Principles, Green and Red lines.

(v). HCT to define humanitarian engagement with non-state actors as well as engagement with (local) Government entities.¹⁶

(vi). Humanitarian and UN political actors to share information and develop a baseline analysis of non-state armed groups (NSAG) covering actors, key influencers, conflict dynamics, etc. This should be done while maintaining distinction/separation in the operationalization of engagement itself, in order to protect the humanitarian space and ensure adherence to humanitarian principles. This information will enable the HCT to have one united voice and a consistent approach vis-à-vis NSAGs.

(vi). HCT to stipulate its support for community based programming (CBP) across all sectors to enable improved targeting and ensuring community involvement, by tasking the ICCG to develop a guidance document on integrating community based approaches/programming in humanitarian assistance delivery in the Somalia context; and encouraging funding allocations through the Somalia Humanitarian Fund (SHF) and other donors for this purpose.

Priority 2. Addressing critical protection concerns with increasing displacement towards IDP sites and collective centers including, heightened protection risks/threats that have emerged as a

¹² DEMAC (Diaspora Emergency Action and Coordination project) Consortium project implemented by DRC, AFFORD-UK and Berghof Foundation, funded by ECHO. Facilitating improved coordination between institutional and diaspora humanitarian actors. Project period: 2015-on going 2017 – Applied in Somalia, Syria and Nigeria. <http://www.demac.org>. Already engaged with UNCT Somalia.

¹³ TANA, “Engaging the gatekeepers Using informal governance resources in Mogadishu”, 2017.

¹⁴ Human Rights Watch, “Hostages of the Gate-Keepers”, 2013.

¹⁵ Refer: <http://archive.somaliangoconsortium.org/>.

¹⁶ An example of this is the Joint Operating Principles from the Syria situation, outlining core humanitarian standards and does and don’t including, red-lines: <https://www.humanitarianresponse.info/en/operations/stima/document/joint-operating-principles-protocol-engagement-parties-conflict>.

consequence of the multiple obstacles to ending displacement through appropriate solutions (local integration, return, and settlement elsewhere).

Issue: The Protection Risk Analysis highlights the extremely difficult situation in IDP settlements and collective centers across the country, in light of growing displacement, due to drought and conflict and continuing protracted and secondary/multiple displacement situations (including the particular challenges facing refugee returnees who get displaced again). The IDPs in these displacement locations frequently live in undignified and hazardous circumstances, where they face multiple protection risks/threats such as, unlawful evictions, overcrowded and unsanitary environments with limited access to basic services, exposure to explosive hazards, increased risk of Gender Based Violence (GBV), negative coping mechanisms such as child marriage and child labor, and tension with the host community. Children and young people (mainly male) in displaced situation, particularly those from Al-Shabaab controlled areas face risks of arbitrary arrest once out of those controlled areas, and therefore live in fear and sometimes isolation. Lastly, IDPs continue to struggle to end their displacement and pursue voluntary, informed, safe, and dignified durable solutions based on their individual and household needs. By utilizing the reach, capacity, and weight of the whole humanitarian system, the safety, dignity, and well-being of these displacement affected populations (including the heavily burdened host communities) can be strengthened.

Suggested actions by HCT:

(i). HCT to endorse strengthened referral systems for services and case management; and establishment of inter-sectoral referral and information pathways, led by protection and CCCM actors in IDP sites/collective centers.

(ii). HCT to develop a common position, including advocacy opportunities, on the issue of evictions from IDP settlements and collective centers; and promotion of land tenure security for IDPs at the onset of an emergency.

(iii). HCT to affirm all three durable solutions for IDPs as being of equal priority; and advocating for early recovery, development, and state building processes to consider the same.

(iv). HCT to develop a common position on engagement with and principles governing potential IDP registration initiatives, including those led by authorities at all levels.

(v). HCT to support the framework of the Durable Solutions Initiative (DSI) by encouraging humanitarian actors to minimize actions that risk institutionalizing displacement, promote self-reliance, and contribute to assessment and mapping of intentions, needs and protection risks/threats of displaced and displacement affected communities in the displacement context, as well as in areas of possible return or reintegration.

(vi). HCT to support issues related to normative frameworks (Kampala Convention, IDP Policy, and mainstreaming displacement into all relevant laws), through robust advocacy.

Priority 3. Engaging with conflict affected communities and parties (national and international) to the conflict, in order to minimize disproportionate and indiscriminate targeting of civilians and civilian assets vital for survival, including through enhanced delivery of assistance and support to community based self-protection mechanisms.

Issue: A focus of the humanitarian response and provision of protection services has been on areas accessible for humanitarian organizations (thus forcing IDPs to move to find assistance) or in drought impacted communities in accessible, less conflict prone areas. Areas with active conflict, while benefitting from some measure of the humanitarian response, have seen minimal protection engagement through the efforts of some highly motivated individual organizations, including some local partners. The humanitarian system led by the HCT should engage further in conflict affected areas through various actions including but not limited to: (i) engaging the various fighting forces

in dialogue in relation to the protection of civilians; (ii) preservation of humanitarian space and humanitarian principles; (iii) coordinating approaches and/or leveraging ongoing programs and complementarities to counter the impact of limited presence of humanitarian actors in conflict zones; (iv) piloting community centered approaches along with – and in lieu of – NGO and UN presence in these inaccessible or hard to reach areas in order to enable protection programming at the community level and strengthening of communities’ self-protection mechanisms and resilience; (v) ensuring clearance operations, information sharing and risk awareness around explosive hazards; and (vi). ensuring more robust information sharing and evidence based advocacy on Protection of Civilians (POC) issues.

Suggested actions by HCT:

(i). HCT to support strengthened, enhanced, regular, and structured protection related dialogues within the framework of Civil-Military Coordination (UN-CMCOORD) through robust engagement of the Protection Cluster and OHCHR along with OCHA, involving the AMISOM Legal Advisor, AMISOM Humanitarian Focal Points and AMISOM Human Rights and Protection Cluster, the Somali National Army (SNA), other actors (including international forces) engaged in supporting AMISOM and SNA, and other fighting forces operational in Somalia.¹⁷ These activities include:

- Increased field presence of UN-CMCOORD staffing through OCHA to engage in all geographical areas as needed, and advocacy for extension of its mandate beyond coordination with AMISOM.
- Enhanced engagement of the Protection Cluster and other relevant actors in pre-deployment and in-country trainings of AMISOM and SNA on protection; and in early stage involvement with operational preparation of military operations by UN-CMCOORD, AMISOM CIMIC and AMISOM Humanitarian Liaison Unit.

(ii). HCT to engage in consultations and provide inputs into Security Council Resolutions and the African Union Peace and Security Council Communiqués, including regarding the value of incorporating a Protection of Civilians clause in AMISOM’s mandate and supporting an effective Protection of Civilians Strategy by AMISOM and SNA.

(iii). HCT members to support the implementation of mitigation measures related to AMISOM and SNA and other Somali security sector institutions,¹⁸ identified in the framework of the Human Rights Due Diligence Policy (HRDDP).¹⁹ Including through:

- The implementation of HRDDP through joint advocacy for the implementation of relevant measures, especially when those relate directly to the physical protection of civilians.
- Information sharing in the framework of HRDDP, in order to improve analysis relating to barriers in accessing humanitarian assistance; and to influence the behaviour of AMISOM and Somali security institutions and their compliance with IHRL, IHL and RL.

(iv). Enhanced provision of assistance and protection services into conflict zones:

- Engagement of the HCT through its Access Task Force to see how the Access Strategy can be oriented towards allowing communities to access services without displacing.²⁰

¹⁷ Refer, “Somalia Country Specific Humanitarian Civil-Military Coordination Guidelines for Humanitarian Actors Engagement with the African Union Mission in Somalia (AMISOM)”,

https://drive.google.com/open?id=0Bx1oS_tswgI0ZFJQUndXLVnqdUNkQ2RkY00yUndwVzRHTkow .

¹⁸ That is, Somali National Army, Somali Police Institutions and National Intelligence and Security Agency.

¹⁹ The UN Human Rights Due Diligence Policy on UN support to non-UN security forces underscores that any support by UN entities to non-UN security forces must be consistent with the UN’s obligations under International Law to respect, promote and encourage respect for international human rights, humanitarian and refugee law. The UN must exercise due diligence to avoid actual or perceived complicity or association with violations and needs to assess those risks, identify mitigation measures to be implemented by the UN provider or the recipient of support e.g. AMISOM, the Somali National Army, the Somali National Police, and Ministries such as Defence and Internal Security.

²⁰ Somalia Access Strategy and Response Plan, Sep 2016- Aug 2017.

- HCT to develop a position paper on delivering better for protection and assistance delivery, addressing what, beyond access, the parameters of engagement in conflict zones are (including maintaining humanitarian space as needed). To include: (i) lessons learnt till date; (ii) a mapping of presence of humanitarian actors in conflict areas in order to identify ways of complementing each other (voluntary); (iii) a discussion on how to leverage various actors' work by joining efforts, such as using community out-reach workers for humanitarian principles sensitization or protection monitoring (including referral mechanisms); and lastly, (iv) options for supporting programming and funding to community based self-protection initiatives.
- Support robust protection oriented advocacy and communication with parties to the conflict on civilian casualties, explosive hazards and explosive remnants of war, and destruction of civilian assets, as well as the need for an enhanced AMISOM CCTARC.

(v). Prevention of child recruitment and other grave child rights violations, as well as the arbitrary arrest or detention of children. The HCT to support the efforts of the Country Taskforce on Monitoring and Reporting to strengthen the data collection on grave children rights violations²¹ and to conduct joint advocacy to ensure accountability and facilitate the release of children where possible. Efforts should be made to provide children with safety nets in order to reduce the risk of coerced or voluntary enrolment into armed forces and groups.

(vi). HCT to reinforce activities that focus on women and their agency within communities, as an enabler for protection outcomes in conflict affected areas by leveraging women's roles and leadership in expanding the humanitarian space, ultimately promoting community resilience, and furthering protection of civilians and civilian assets. The HCT to recognize women as key stakeholders and ensuring their role in the communities is taken into account.

Key Protection priorities: improving 'ways of working' for the Humanitarian Country Team and the humanitarian system

(The below are process oriented priorities which will enable the HCT and the humanitarian system to work more effectively to address the over-arching protection risks/threats identified above; and also ensure protection considerations become a regular and systematic part of the HCT and the humanitarian systems' work)

Priority 1. Strengthening system wide data collection and analysis to ensure an effective response, and establishing a repository on protection risks/threats: thereby enabling an overarching protection picture of the humanitarian crisis including, the national picture, the sub-national picture, and the local picture.

Issue: *There is a large number of data collection and estimation efforts in Somalia, however they are not consistently coordinated nor necessarily analysed in a manner that provides the HCT with a comprehensive picture of protection issues across sectors (including trends and severity), impacting affected populations in drought or conflict etc. Further, data and analysis often are not (sufficiently) informed by gender and other categories of social variables, as a result their use and effectiveness remain sub-optimal. Despite gradual improvements in 2017, limited sharing of information among various actors further hampers comprehensive analysis, while (perceived) assessment fatigue presents another barrier.*

Suggested actions by HCT:

(i). Enhanced protection analysis (including disaggregated data by age, gender, and diversity) using PMRN, DTM, DSA community site level data, MRM and information on GBV patterns and trends, and linking this with OHCHR analyses, FSNAU data and other non-humanitarian systems such as,

²¹ Child recruitment & use, abduction, killing & maiming, sexual violence, denial of humanitarian access and attacks on schools and hospitals.

CRESTA/A's Fragility Index and Maturity Model (FIMM),²² which could include protection relevant information, should be initiated through IM Working Group of the HCT.

Additional considerations on data include: data coordination between Somalia and refugee hosting countries should be improved; protection analyses need to be supported by local contextual conflict and political economy analyses and joint analyses with political and human rights components of UNSOM and relevant security actors; and development of key benchmarks and indicators to measure progress and achievements should be agreed, including commitments to data sharing.

(ii). Strengthen joint analysis with a protection lens of assessment, 4W, Post Distribution Monitoring and feedback mechanisms data, to ensure targeting is optimal using the DOCC team, including an agreement on 2 or 3 common protection indicators for post distribution monitoring that can be included in agency/NGO surveys. Commitments to sharing of especially PDM results need to be made.

(iii). Clear action-oriented bi-monthly updates to the HCT based on information gathered through protection situational analysis by OCHA and the Protection Cluster.

Priority 2. Strengthened HCT protection influenced advocacy (including for protection funding) and enhanced communication on protection tailored to the context of Somalia.

Issue: The HCT is the 'voice of principled action and the humanitarian imperative' and should raise the difficult issues in a practical and actionable way with change makers. It should also promote communication and understanding of protection and this should be undertaken in a culturally relevant way to the Somali context. It should also actively seek to link to other broader initiatives that may be contributing to a enabling a protection environment for affected populations.

Suggested actions by HCT:

(i). Development of an evidence-based HCT Advocacy Strategy with assigned leads for protection advocacy. Identify synergies and leverage the roles and capacities of other relevant actors for protection outcomes, including beyond the HCT.

(ii). HCT to communicate in Somali using Somalia contextualized messaging. In order to achieve this, conduct a mapping of how protection (and non-protection) communication can be undertaken in the clan/socio-cultural context of Somalia; and examine why and how the HCT would undertake such communication.

(iii). Dialogue with key stakeholders, including the UN Mission in Somalia on how to take forward advocacy related to civilian protection in a principled, practical, and constructive manner.

(iv). Strengthen funding for protection, including advocating for protection as a lifesaving response (to be incorporated in emergency preparedness planning), and ensure funding for activities outlined in this Strategy.

(v). Inclusion of protection as a standing agenda item in the HCT with various actors updating each month from their perspective (including from outside the HCT, if relevant for informed decision making).

Priority 3. Strengthened Protection Mainstreaming, Accountability to Affected Populations (AAP), and Prevention of Sexual Exploitation and Abuse (PSEA) across all sectors.

²² Community Recovery and Extension of State Authority and Accountability (CRESTA/A) is the UN's approach to stabilization in Somalia. The overall intent is to support the FGS at federal, states, and district level to promote coherence in programmes and prioritise activities around four areas of the Government's stabilization strategy: community recovery; social reconciliation; local governance, and; rule of law. The FIMM provides a dash board and narrative analysis on progress and conditions in a specific district, looking at politics/governance, security/rule of law, and socio-economic conditions.

Issue: *There is a need for a system wide Accountability to Affected Populations framework (including communication with communities) and a need to support Protection Mainstreaming and Prevention of Sexual Exploitation and Abuse initiatives across the humanitarian system and beyond, through awareness raising/trainings, incorporation of principles into ongoing programming and situational analysis, as well as by linking these frameworks and initiatives to funding mechanisms and robust impact monitoring.*

Suggested actions by HCT:

Protection Mainstreaming

(i). HCT to mandate the development of an inter-cluster plan on Protection Mainstreaming with 6 month plans building upon existing/ongoing mainstreaming initiatives (different sectors could be treated as priority) – ICCG Coordinator and Protection Cluster Coordinator to be tasked and to report back to HCT on a regular basis. This includes, clusters/sectors revisiting their existing sector performance indicators and development of a basic Protection Mainstreaming training package.

(ii). HCT to encourage the Somalia Humanitarian Fund (SHF) and other humanitarian funding mechanisms to include Protection Mainstreaming as one of the criteria for funding of all clusters and organizations.

Accountability to Affected Populations (AAP)

(i). Commit to collective approaches to community engagement and accountability in order to ensure that HCT decision-making and strategic planning is informed by feedback data from affected communities, including, proactive efforts to include the voices of women and girls, as well as vulnerable and marginalized groups. Linkages to be sought between the OCHA-led Common Feedback Project (CFP), the UNICEF coordinated Communication and Community Engagement Initiative (CCEI), closely collaborating with the Protection and CCCM Clusters especially.

(ii). HCT to encourage the SHF and other humanitarian funding mechanisms to include AAP as one of the criteria for funding of all clusters and organizations.

Prevention of Sexual Exploitation and Abuse (PSEA)

(i). HCT to re-affirm its support for PSEA through the accountability compact of the HCT and request for periodic updates on PSEA, including development of a PSEA network and clear guidance and follow up mechanisms for PSEA allegations, including engagement with the UN Mission and AMISOM on this issue.

Annex 1 of this Strategy contains the Implementation Plan for the Strategy.

Annex 2 of this Strategy contains the Protection Analysis of the situation in Somalia.