Global Protection Cluster

HCT
PROTECTION
STRATEGIES
REVIEW
2020

Executive summary ● ● ● ●

Humanitarian County Team (HCT) protection strategies are an important step in establishing the centrality of protection in practice. However, as a framework for the operationalisation of protection as core to an entire humanitarian response, this remains largely aspirational. Country HCT protection strategies are generally a reference point for highlighting protection issues, but are rarely perceived as a strategic basis for prioritisation or decision-making within a humanitarian response. An HCT protection strategy is primarily a tool that acts as a catalyst that brings together existing and new activities under the HCT umbrella and can contribute to protection outcomes. This review is predominantly based on the desk review of ten HCT protection strategies and insights identified from their development, progress and approach to the centrality of protection.[1] Based upon these findings, and moving away from a more conceptual approach to one that is pragmatic and present, this review provides recommendations for strengthening the country-level approach to centralising protection in humanitarian action.

Protection[2] is recognised as central to any humanitarian response.[3] Understanding the risks and violations[4] faced by affected populations in crisis and formulating a response to eliminate or address these is part of every response. Evidence of this includes the IASC's inclusion of protection as a mandatory responsibility of the Humanitarian Coordinator (HC) and HCT,[5] the prevalence of HCT protection strategies, protection as a multi-sector feature of Humanitarian Response Plans (HRPs); the IASC Policy on Protection in Humanitarian Action[6] and various tools provided to country operations to support protection as part of their response.[7] In practice, measuring intentions and actions to implement the centrality of protection, including under HCT protection strategies, remains difficult. Actors working directly on protection sometimes implement their activities as part of an HCT protection strategy with the aim of centralising protection. In contrast, other work that is part of an overall protective response, is not always recognised, documented, reported or defined in any HCT

---

1 Of the ten countries selected, each HCT protection strategy was desk reviewed. Six of the countries (Afghanistan, Cameroon, Central African Republic (CAR), Colombia, Iraq and Myanmar) also participated in a country reflections exercise on the implementation of the IASC Protection Policy. Other available HCT protection strategies were also read [https://www.globalprotectioncluster.org/field-support/protection-strategies/] as well as the GPC annual Centrality of Protection reviews, which include information about various HCT protection strategies.

2 Unless otherwise defined, all terms in this report use the definitions from the IASC Policy on Protection in Humanitarian Action 2016 [https://interagencystandingcommittee.org/system/files/iasc_policy_on_protection_in_humanitarian_action.pdf]

3 IASC, Statement on the Centrality of Protection in Humanitarian Action, December 2013, [https://interagencystandingcommittee.org/system/files/the_centrality_of_protection_in_humanitarian_action_english_.pdf] and IASC Policy on Protection in Humanitarian Action, 2016

4 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.

5 The four mandatory responsibilities included in the IASC standard terms of reference (endorsed in February 2017) for Humanitarian Country Teams are collective approaches to: (1) centrality of protection; (2) accountability to affected people (AAP); (3) protection from sexual exploitation and abuse (PSEA); and sexual and gender-based violence (SGBV).

6 IASC, Policy on Protection in Humanitarian Action, 2016

7 These include the IASC EDG Preliminary Guidance Note on Protection and Accountability to Affected Populations in the Humanitarian Programme Cycle, 2015 [https://interagencystandingcommittee.org/system/files/edg_-aap_protection_guidance_note_2016.pdf] and the IASC/STAIT/GPC, Centrality of Protection, Practical Steps for Humanitarian Coordinators and Humanitarian Country Teams, November 2016 [https://www.globalprotectioncluster.org/_assets/files/tools_and_guidance/essential-protection-guidance/hc-hct-centrality-of-protection-in-practice-note.pdf]

protection strategy or corresponding action plan. Documenting all these activities and identifying how they contribute to strategic protection outcomes remains elusive; particularly when coupled with the lack of a coherent HCT prioritisation of protection risks or violations.[8]

HCs and other HCT members recognise the significance of protection and usually support the concept of an overarching protective response.[9] HCT protection strategies are ambitious, and many are a 'catch-all' of protection issues, with too many protection priorities or outcomes. Sometimes, these duplicate priorities from other strategies and are not always specifically selected as priorities for the HCT. HCT protection strategies are usually not realistically connected to the humanitarian architecture making operationalisation difficult. Action plans, designed to ensure implementation, lack regular progress monitoring and are often unrealistic in terms of leadership, available capacity and timelines. Roles and responsibilities are not always obvious, and actions are frequently assigned to the HCT as an entity. This is problematic when trying to identify precise lines of accountability. Addressing these findings and building on documented experiences of operationalising the centrality of protection should support HCs and HCTs to finetune their current approaches and strengthen attempts to place protection at the heart of any response. The challenge that remains is instituting coherence and consistency, including with actors beyond the humanitarian system.

---

8 HCT protection priorities are not only a collection of every protection priority defined by any cluster/sector as part of the Humanitarian Response Plan (HRP). As noted in the HCT Protection Strategy Guidance, the HCT should select priorities that are strategic to the HCT and can inform and build on the HRP.

9 This includes all efforts towards a central approach to protection and human rights initiatives at country level, including the UN Human Rights Up Front (HRUF) initiative [https://www.refworld.org/pdfid/549141f84.pdf]and the more recent UN Call to Action for Human Rights [https://www.un.org/sg/sites/www.un.org.sg/files/atoms/files/The_Highest_Asperation_A_Call_To_Action_For_Human_Right_English.pdf].

A. Summary of recommendations

This review, conducted in February and March 2020, covers the evolution and current state of HCT protection strategies, including their role in contributing to the centrality of protection. These recommendations are informed by the GPC annual centrality of protection reviews,[10] the initial findings from the work of the IASC Results Group 1 Sub-group on the centrality of protection,[11] and ten HCT protection strategies.[12]

These recommendations are primarily aimed at HCs and HCTs. The recommendations intend to resolve challenges identified and sharpen the current approach to HCT protection strategies. The focus is on achieving the centrality of protection in a realistic manner by ensuring coherence and consistency that is inclusive, based on precise priorities, measurable and accountable.

1. **Strategic approach to the centrality of protection:** Use the HCT protection strategy to pinpoint HCT-specific protection priorities, identify gaps in responding to system-wide protection concerns and have an agile approach to achieving protection outcomes.

2. **Protection as the core to analysis:** Strengthen the holistic and inter-sector approach to protection risk analysis in order to formulate a more coherent protective response. An integrated approach to continuous monitoring and analysis of protection risks and violations will provide a solid basis for responding to HCT-specific protection issues.

3. **Limited number of protection priorities:** Focus on fewer, more specific HCT protection priorities and articulate relevant protection outcomes to link realistically with available resources and defined time period.

4. **Advocacy as a key activity:** Include coherent advocacy activities as part of the HCT protection strategy action plan.

5. **Accountability for implementation:** Support and identify more distinct roles and responsibilities for each actor implementing activities. Clarify, with specific actions and monitoring, how each actor contributes to achieving the HCT's protection outcomes.

---

10 To date, the GPC, Centrality of Protection in Humanitarian Action Overviews have been prepared for 2016, 2017 and 2018, available at https://www.globalprotectioncluster.org/

11 IASC Results Group 1 on Operational Response has a Sub-group on Centrality of Protection – [https://interagencystandingcommittee.org/system/files/2019-12/IASC%20Results%20Groups%20Priority%20Areas%20of%20Work%20for%202020_1.pdf]. This Sub-group is co-chaired by OCHA and InterAction. One of its deliverables is to identify agreed, specific and measurable indicators on the centrality of protection in practice. These will be based on critical lessons and issues emerging from a reflection and exchange (by ten selected countries) of lessons learned on the implementation of core requirements of the IASC Protection Policy. The ten countries were selected based on (1) countries prioritised by the Emergency Directors Group in their 2019 Annual Review of Operations for renewed efforts to prioritise protection; (2) geographic diversity and range of crises; and (3) contexts where valuable lessons learned/practices were expected, including based on the ProCap deployment list.

12 The desk review used the most recent HCT protection strategies available – see Annex 1 for more details.

6. **Greater involvement of development, peace and security actors:** Develop a more tangible and inclusive approach to involving a broader range of relevant (protection specialised and non-protection specialised) actors at all stages of the HCT protection strategy and concretely link it to other relevant initiatives.

7. **The centrality of protection in the HPC:** Find ways to ensure protection is central to all aspects of the humanitarian programme cycle.

In line with its 2020-2024 Strategic Framework,[13] the GPC, in coordination with the IASC Results Group 1, offers its support to the work of HCs, HCTs and associated stakeholders to implement these recommendations into current approaches to the centrality of protection. This includes using the recommendations to update the Provisional Guidance Note, HCT Protection Strategy (HCT Protection Strategy Guidance).[14]

---

13 GPC, Protection in a Climate of Change, Strategic Framework, 2020-2024 [https://www.globalprotectioncluster.org/strategic-framework-2020-2024/]

14 Global Protection Cluster, Provisional Guidance Note, Humanitarian Country Team Protection Strategy, September 2016 [https://www.globalprotectioncluster.org/_assets/files/news_and_publications/hct-protection-strategies-provisional-guidance-final-september-2016.pdf]

B. Background

Following the 2013 Statement of the IASC Principals on the Centrality of Protection[15] and the 2016 IASC Protection Policy,[16] HCT protection strategies have become a common method of reflecting the humanitarian leadership's commitment to place protection centrally within any humanitarian response. Currently, there are 22 HCT protection strategies in the 29 countries with an HC.[17] Since 2016, these strategies have been developed by the relevant national Protection Cluster, a Senior Protection Advisor deployed through ProCap or a Protection Advisor contracted by UNHCR. They have been developed in accordance with the HCT Protection Strategy Guidance[18] and the IASC Protection Policy.[19] The Guidance and complementary documents[20] indicate that the main purpose of any HCT protection strategy is to identify and prioritise protection risks and violations faced by affected populations and, under HCT leadership, formulate a coherent humanitarian response to address or prevent these defined priorities. Under the leadership of the HC, the HCT should play an active role in achieving defined protection outcomes through the humanitarian system and not in parallel to any existing processes. All humanitarian actors should be part of the process and implementation of any HCT protection strategy, with an increasing acknowledgement that development, human rights, peace and security actors, as well as other protection stakeholders, also have significant roles.[21]

Six countries[22] provided written information to the IASC Results Group 1 Sub-group on the centrality of protection, including about their respective strategies. Supplementing these written country responses are desk reviews of HCT protection strategies from ten countries[23], a lighter review of a range of other HCT protection strategies available,[24] and numerous interviews with protection and non-protection specialised actors at global and country levels. This review is an opportunity to consider how HCT protection strategies have developed and to assess their contribution to collective protection outcomes. It also examines the role these strategies play in providing an overarching response based on understanding protection risks and violations.

This review is not an evaluation.[25] It focuses on the development process and current role of HCT protection strategies in any response, primarily from the perspective of humanitarian actors.

---

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

16 IASC, Policy on Protection in Humanitarian Action, 2016,

17 Countries with an HC [https://reliefweb.int/sites/reliefweb.int/files/resources/Information%20Products%20-%20May%20 2020.pdf]. Each country with an HC plans to have an HCT protection strategy.

18 Global Protection Cluster, Provisional Guidance Note, Humanitarian Country Team Protection Strategy, September 2016

19 IASC, Policy on Protection in Humanitarian Action, 2016, Section 3 (Responsibility for the Centrality of Protection)

20 These include the IASC EDG Preliminary Guidance Note on Protection and Accountability to Affected Populations in the Humanitarian Programme Cycle, 2015 [https://interagencystandingcommittee.org/system/files/edg_-aap_protection_ guidance_note_2016.pdf] and the IASC/STAIT/GPC, Centrality of Protection, Practical Steps for Humanitarian Coordinators and Humanitarian Country Teams, November 2016 [https://www.globalprotectioncluster.org/_assets/files/tools_and_ guidance/essential-protection-guidance/hc-hct-centrality-of-protection-in-practice-note.pdf]

21 As stated in the IASC Policy on Protection in Humanitarian Action (2016) and related guidance on HCT protection strategies, the HCT protection strategy should include, complement and link to other relevant initiatives, such as those related to human rights, Protection from Sexual Exploitation and Abuse (PSEA), Accountability to Affected Populations (AAP), Gender, etc.

22 Afghanistan, Cameroon, CAR, Colombia, Iraq and Myanmar. These are six of the ten countries selected by IASC Results Group 1's Sub-group on centrality of protection for a wider review of centrality of protection exercise. The submissions from those countries regarding HCT protection strategies were used for this review.

23 The ten countries initially selected for the IASC Results Group 2 Sub-group on centrality of protection.

24 Available on the GPC website [https://www.globalprotectioncluster.org/field-support/protection-strategies/]

25 Specific country HCT protection strategies have not been evaluated - impact or outcomes have not been measured.

C. Operationalising the centrality of protection – Insights from the ten countries

The ten selected countries are Afghanistan, Cameroon, Central African Republic (CAR), Colombia, Democratic Republic of Congo (DRC), Iraq, Myanmar, Nigeria, South Sudan, and Yemen.[26] The desk reviews and information provided (written and orally), identified the following key insights.

HCT protection strategies development process

The development of half of the ten reviewed strategies were led by Senior Protection Advisors deployed by ProCap and the other half were led by the respective country Protection Cluster.[27] Two countries (South Sudan, Yemen) had previous strategies developed by ProCap Advisors with the more recent updates developed by the respective Protection Cluster. Overall, the strategies follow the suggested structure provided in the HCT Protection Strategy Guidance.[28] Most of the strategies have a two-year timeline and plans for renewal of the strategy or action plan when they are out of date (DRC, Nigeria, South Sudan, Yemen).

Protection risk analysis

Each strategy includes some protection analysis, with a focus on thematic and/or geographic matters. Numerous protection risks and issues are listed.[29] With so many risks noted in each country, the analysis process used to identify a few priorities is not evident. How regular data collection and analysis form part of the ongoing HCT discussion about protection is also not clear.[30] The HCT Protection Strategy Guidance suggests the HCT focus on a maximum of three priorities and 'articulate clearly the criteria used in

---

26 As previously noted, the ten countries were selected based on (1) countries prioritised by the Emergency Directors Group in their 2019 Annual Review of Operations for renewed efforts to prioritise protection; (2) geographic diversity and range of crises; and (3) contexts where valuable lessons learned/practices were expected, including based on the ProCap deployment list.

27 Use of the term cluster is used interchangeably with 'sector', which usually exists when clusters have not been activated in a country. Reference to the Protection Cluster or Protection Sector includes each of the four Areas of Responsibility (Child Protection, GBV, HLP and Mine Action) as applicable to the country context.

28 The suggested structure in the HCT Protection Strategy Guidance: introduction, protection analysis, protection priorities (one to three), collective protection outcomes (anticipated), mobilisation of necessary capacities. Global Protection Cluster, Provisional Guidance Note, Humanitarian Country Team Protection Strategy, September 2016, page 5

29 For examples of the protection issues listed in HCT protections strategies, they are available to view on the GPC website [https://www.globalprotectioncluster.org/field-support/protection-strategies/]

30 Understanding protection risks and violations 'requires a continuous analysis of risks people face…,' IASC, Policy on Protection in Humanitarian Action, 2016, page 3

determining its priorities.'[31] However, this approach does not seem to have guided the process. The long list of each country's protection risks and violations is an indication of the difficulty in selecting a few areas for prioritisation. HCT members may interpret and understand aspects of the protection context differently, depending on their institutional perspective or internal prioritisation as opposed to using a common HCT approach to data and analysis.

Protection priorities

Some of the strategies have an overall objective or vision and most have, priorities, goals or objectives. These can be all-encompassing; some are too ambitious for the allotted timeframe or available capacity and are not always reflected in the implementation, including in the relevant action plans. As noted above, despite the HCT Protection Strategy Guidance on prioritisation,[32] broadly defined priorities may reflect the difficulty in selecting two or three priority focus areas. There seems to be an effort to include as much as possible into each strategy, even if protection risks and violations are already identified by the HRP. The reasons for this are not obvious. It could reflect pressure to represent all identified protection concerns; or not wanting to suggest that some concerns are more important than others. Alternatively, there may be a perception that issues omitted will not be addressed or funded within the response. It could even suggest differences in opinion or unresolved tensions within the HCT.

Collective protection outcomes

Only some of the strategies include a formulation of protection outcomes.[33] These are sometimes merged with the priorities and presented interchangeably. The outcomes are often ambitious and, in some cases, would be considered impact level and are likely to be difficult to achieve in the limited timeframes or given the political circumstances in country. Some examples include:

- To create and sustain a protective environment/To contribute to a protective environment, by minimizing risks to persons of concern (Nigeria)
- Protection of civilians is improved (Myanmar)
- The expertise, mandates and capacities of the HCT are mobilized to identify and respond to protection risks and in preventing and stopping the recurrence of violations of IHL, IHRL, IRL and grave violations committed against children in conflict (Yemen)

---

31 Global Protection Cluster, Provisional Guidance Note, Humanitarian Country Team Protection Strategy, September 2016, page 6

32 Global Protection Cluster, Provisional Guidance Note, Humanitarian Country Team Protection Strategy, September 2016, page 6

33 The definition of protection outcome used is 'A response or activity is considered to have a protection outcome when the risk to affected persons is reduced. The reduction of risks, meanwhile, occurs when threats and vulnerability are minimized and, at the same time, the capacity of affected persons is enhanced. Protection outcomes are the result of changes in behaviour, attitudes, policies, knowledge and practices on the part of relevant stakeholders,' IASC, Policy on Protection in Humanitarian Action, 2016, page 15

Numerous strategies include priorities or outcomes to improve protection mainstreaming (Cameroon, CAR, Nigeria and Yemen), PSEA[34] (South Sudan) or aspects of AAP[35] (Iraq). Many strategies focus on meaningful access (mainly as an aspect of protection mainstreaming) – people in need having access to protection and services in proportion to need and without any barriers, with special attention to particularly vulnerable people (Afghanistan, DRC, Myanmar, South Sudan and Yemen).

Advocacy activities and initiatives are included in most of the strategies and are part of the action plans. The activities are not always realistic (in relation to the timeframe or context), clearly defined or described to show how they contribute to protection outcomes.

Implementation and monitoring of HCT protection strategies

Most countries have action plans to complement their respective strategy or aim to prepare or update an existing action plan. Usually a working group is established to monitor and review the action plan. In general, tracking the implementation progress is limited. Action plans are not regularly updated; and activities are not always timebound or measurable. There is often an onus on the Protection Cluster to lead the process. Most HCTs do have protection as a standing item on their agenda, but this does not automatically lead to regular updates regarding the substantive progress of their HCT protection strategy.

For most countries, there is no specific resourcing or capacity for implementation of the HCT action plan. Where resourcing is mentioned, for instance as a percentage of sector funding (Cameroon), it is not clear how this will be achieved in practice. Monitoring and evaluation of the strategies are not systematic or concretely planned. The respective working groups do not meet regularly and in various operations, limited involvement or frequent changes in personnel mean that some actors are not familiar with the substance of their HCT protection strategy. This may indicate that the strategy is not necessarily seen (by the HCT or other stakeholders) as a priority when resources are limited or that relevant actions are presumed to be implemented under other strategies or plans (e.g. the HRP, the Protection Cluster/AoRs action plan). This is understandable as many countries have numerous overlapping strategies and action plans at UN, HCT, inter-cluster, cluster, government and agency levels.

---

34 Protection against sexual exploitation and abuse
35 Accountability to affected populations

Roles and responsibilities

Action plans for implementing the HCT protection strategies do include focal points for activities. However, these are usually at agency level and are not specific enough to the HCT from an accountability perspective. Activities are often assigned to the 'HC' or the 'HCT' without specifying which actor is responsible for the planned activity. Some activities are assigned to multiple agencies or actors without defining a lead. The implementation roles of governments, authorities and non-protection actors, such as development, human rights or peace and security colleagues, is not clear or consistent.

Some activities are ongoing regardless of the HCT protection strategy and so individual actors do take responsibility for them. However, these are not always recorded or updated in the relevant HCT action plan. Lack of available resources or other significant or changing priorities can mean that it is difficult for actors who are assigned responsibilities to implement the activities within the allocated timeframe.

Link to other strategies and plans

HCT protection strategies usually make reference to other relevant strategies and plans (Afghanistan, Cameroon, DRC, Iraq and Yemen), including the country HRP, the Protection Cluster strategy and strategies related to the peace-development-security nexus (the Nexus), gender, access, durable solutions, advocacy, human rights, the UN mission and others. These links are not represented in the form of concrete activities. It is difficult to understand the practical connections or implications between the HCT protection strategy and other strategies or plans. Some strategies frame their priorities and how they will be addressed in accordance with a series of underlying principles, which include protection mainstreaming, humanitarian principles, AAP, equality, non-discrimination, humanitarian access (Nigeria, South Sudan, Yemen).

D. Conclusions and recommendations

1. Strengthen the strategic approach to the centrality of protection as a basis for decision-making and action

Developing an HCT protection strategy as a separate document does not automatically make it core to the overall response and may be counterproductive. A strategic approach to identifying and addressing priority protection risks or violations is more important than having an HCT protection strategy as a standalone document in the format currently adopted. Priority risks and violations identified as HCT priorities may already be addressed in other ways, such as through the HRP, cluster strategies, HCT strategies or other strategies within the response architecture. The HCT protection strategy should not be perceived as the only opportunity to identify and address all protection concerns. Instead, the HCT protection strategy should provide the HCT with a framework for elevating certain outcomes and placing protection at the centre of its overall response, benefitting from the comparative advantages of the HC and HCT. The process used to identify HCT protection priorities can itself be valuable and should help differentiate HCT protection priorities from those in the HRP. The HCT can formulate its protection priorities and planned collective outcomes to ensure they are realised coherently throughout the response and not as separate endeavours. This approach reflects the responsibility of all humanitarian actors to contribute to protection outcomes separately and collectively.[36]

Priorities change and, as progress is made or the context changes, the HCT protection strategy should be agile enough to respond to changes in HCT-specific protection priorities and become the basis for an agreed joint approach taken by HCT members. Where other processes already do this, there is no need for repetition. Instead, the HC, with the dedicated personnel (in a working group or equivalent) can realign the HCT's approach to protection by monitoring how priorities are being met, identifying gaps and recommending alternative approaches as needed.

2. Holistic and inter-sector approach to protection risk analysis

Usually each cluster or cluster/AoR lead agency takes a lead on data collection and analysis for their specific sector. Therefore, Protection Clusters or their lead agency/agencies are likely to conduct assessments and analysis to determine the protection risks and violations faced by populations affected by crisis. However, the centrality of protection does not feature consistently within each of the other cluster's analysis. Protection should regularly form an integral part of any assessment or analysis to ensure that it is central when identifying protection concerns and then formulating a cluster or agency response.

---

[36] All humanitarian actors, irrespective of their sector-specific expertise, can contribute to protection of affected persons by committing to: (a) Address protection issues that intersect with their formal mandates and sector-specific responsibilities; (b) Engage collectively to achieve meaningful protection outcomes that reduce overall risks to affected persons by decreasing threats, reducing vulnerability and enhancing capacities; (c) Mobilize other actors within and beyond the humanitarian system, as appropriate, to contribute to collective protection outcomes; and (d) Evaluate commitments and progress towards placing protection at the center of the humanitarian response,' IASC, Policy on Protection in Humanitarian Action, 2016 , Page 4

There have been efforts in some countries to have inter-sector joint assessments and analysis (including with the new version of the HPC rolled-out in 2019). Also, some countries require a protection risk analysis for each cluster. However, more work is needed to have a standard and coherent methodology that identifies overall protection risks that result in humanitarian need. A holistic approach should prevent protection being perceived as a separate topic that is only understood and addressed by protection actors. Instead, the HC (with protection support as required) should take a more active role in leading the HCT to use the technical protection data and analysis provided to make strategic and operational decisions on achieving protection outcomes collectively.

A more integrated structure capable of assessing protection risks and violations in the overall context will support the centrality of protection in all aspects of the response as part of an inter-sectoral approach. Each cluster should be involved in any context assessment and analysis so that the roots of the crisis from a protection perspective are defined, agreed and then presented to the HCT for prioritisation. Such analysis can also feed into the Common Country Analysis process as part of the Nexus.[37] With contexts and priorities evolving, any assessment cannot be a static process and should include people affected by crisis. Ongoing monitoring is needed through all clusters and aspects of a response. Depending on the initial protection capacity available in each country, the Protection Cluster could initially support setting up or strengthening this approach using the inter-cluster mechanism at national and local levels. This should provide a strong evidence base on which to agree priorities and actions to address protection concerns purposefully through the response.

3. Identify a limited number of protection priorities for each defined time period of an HCT protection strategy

More efforts are needed to ascertain fewer and more concise protection priorities for the HCT. Covering a wide range of issues in an HCT protection strategy is likely to lead to difficulties in achieving significant progress. A stronger approach[38] requires agreeing on protection priorities (and corresponding outcomes) and identifying how these are already addressed in the response. This should help the HC and HCT have a more effective leadership role while addressing fewer recognised protection priorities and identifying the value added by the HCT's focus. These priorities are likely to change during a response. The HCT's approach should be flexible enough to enable it to adapt its strategy to respond to any changes but still maintain coherence and consistency. Instead of having broad, catch-all priorities, the HCT should be able to agree on a limited number. It can then use the comparative advantage and expertise of a range of actors to address the selected priorities.

HCT protection strategies in their current form are standalone, too static and the process of making changes may seem overwhelming and only the domain of deployed senior protection expertise. A process led by the HC and tangibly connected to the HCT should result in being more accessible and adaptable. Developing the HCT protection strategy is not a one-off procedure which never changes. A more responsive approach is needed. The HCT should not only come together to address protection issues when they arise but also be able to monitor changes to context and be prepared to adapt and address them as needed. A framework that provides an incremental and consistent approach to protection is likely to be better placed to address emergency issues.

---

37 United Nations Development Group, Common Country Analysis, UNDAF Companion Guide [https://unsdg.un.org/sites/default/files/UNDG-UNDAF-Companion-Pieces-2-Common-Country-Analysis.pdf]

38 The HCT members should be able to articulate how it reaches agreement on its protection priorities.

More accountability for corresponding action plans should lead the HCT (through specified actors) to address protection priorities consistently and cumulatively. Formulating HCT priorities as specific and measurable collective protection outcomes is essential for monitoring progress. Action plans should specify how each activity contributes to each protection outcome and be realistic in terms of available capacity.

Many HCT protection strategies include fundamental processes, such as protection mainstreaming, AAP or PSEA, as protection priorities. Where there is limited progress establishing and implementing such processes in country, these can be justifiably included as priorities in the HCT protection strategy only if there is a role for the HCT. However, if these processes are already tackled in other parts of a response, they should not be HCT protection priorities. Once they are functioning, they should be removed from the HCT protection strategy and replaced. Overall, as priorities are addressed and outcomes achieved, the HCT can ascertain other priorities to build on the work already done.

4. Consistent and coherent advocacy activities as part of protective response

Dealing with protection at the HCT level can support a consistent tactical approach to collective advocacy. Using the strategic position and advantage of the HC and HCT can be crucial to advocacy initiatives connected to protection outcomes. All types and levels of advocacy activities remain essential to address protection issues. An evidence base from the protection risk analysis and programming experience from each sector (and agency) should feed into a coherent use of advocacy by HCT members. Humanitarian actors' involvement in strategic and collective advocacy (at national and global levels) can take different forms[39] and should contribute to the HC's commitment to 'design and deliver a humanitarian response that is principled, timely, effective and efficient, and contributes to longer-term recovery.'[40]

Key elements of this coherent approach include HCT members having an agreed stakeholder analysis, delineating advocacy and communications; and building integrated advocacy activities into the response. These HCT efforts should be part of coherent approach and complement other activities identified within the response.

5. Defined roles and responsibilities for more precise accountability

Decisive senior leadership is fundamental for an effective and practical HCT protection strategy. The HC will need to mobilise other senior leaders to build consensus and participate meaningfully in operationalising the protection strategy. There have been too many examples where HCT protection strategies are outsourced (for instance to ProCap or the relevant Protection Cluster) for development and implementation. Consequently, the strategies have not been sustainable or core to strategic and operational decision-making.

---

[39] Advocacy can include private or public interventions or be part of relevant mechanisms, such as human rights special procedures, Monitoring and Reporting Mechanism on Grave Violations, etc.

[40] IASC, Policy on Protection in Humanitarian Action, 2016, page 3

To support the HC, a working group (or similar), with an action plan, for each HCT protection strategy is useful. To avoid long action plans without clearly defined timelines, roles and responsibilities, the HC should appoint a working group which is multi-disciplinary and operational. Membership will depend on the capacity and availability of actors in country. If possible, the working group should be jointly led by a protection-specialised actor (such as the Protection Cluster lead) and a non-protection specialised actor. This can support the aims of including all actors (whether HCT members or not) more meaningfully, consolidate a shared purpose to protection, and clarify responsibilities. Action plans should be realistic and include a dedicated staff member[41] for each agency or entity appointed as responsible for each activity. Having a dedicated person identified as a focal point for an activity should help to monitor implementation and identify who is accountable. Reporting regularly to the HC and HCT will be important as well as participating in discussions to ensure that the HCT protection strategy and complementary action plan can be iterative to respond to progress, developments and changes in context.

6. Stronger involvement of development, peace and security actors at all stages of strategic approach

As noted in the GPC's 2018 Centrality of Protection Review, 'Including more non-protection specialised agencies in the process can be helpful to build protection into their work, as well as for them to take on more of a substantive role in implementing activities under the strategy.'[42] However, use of protection terminology that is not generally understood, or too legalistic or prescriptive can lead to non-protection specialised actors stepping back from involvement in the centrality of protection. Such actors often feel they do not understand protection well enough to participate and defer to Protection Cluster or other protection colleagues.

The HCT needs to work on collective protection outcomes by identifying how best to motivate broad participation and include a variety of actors at all stages of its leadership on the centrality of protection. It is crucial to build on humanitarian actors' commitment to 'mobilise other actors within and beyond the humanitarian system.'[43] This includes having not only 'protection experts' prepare the HCT protection strategy, recognising that the development process can itself be strategic and finding ways to anchor protection in the nexus between humanitarian, development, peace and security.

The Protection Cluster can support on technical matters but cannot be the only entity assigned responsibility for the HCT protection strategy. Finding ways to have regular dialogue (including with people affected by crisis) and to creatively arrive at a common understanding of how protection is integrated into cluster-specific response activities and a shared purpose to achieve protection outcomes can initially take time. However, these are key methods for establishing the parameters and framework for all actors (including people affected by crisis and those beyond the humanitarian system) to engage more effectively.

---

41 Due to frequent turnover, agencies should appoint an alternative for each staff member assigned and include the responsibility in the person's function.

42 GPC, Centrality of Protection in Humanitarian Action, 2018 Review, [https://www.globalprotectioncluster.org/2019/05/13/centrality-of-protection-in-humanitarian-action-2018-review/], page 10

43 IASC, Policy on Protection in Humanitarian Action, 2016, page 4

7. Protection as central to the humanitarian programme cycle

If the centrality of protection is to be achieved, protection concerns must be the basis for the Humanitarian Needs Overview (HNO), the HRP, common humanitarian funding mechanisms and for funding. HCT protection strategies are just one of the tools to achieve the centrality of protection. They are a culmination of an understanding of the priority risks and violations and identify protection outcomes to be achieved collectively. The HCT's strategic priorities can be operationalised through all relevant actors agreeing to the priorities and then bringing together their individual efforts on protection mainstreaming and protection integration;[44] as well as collectively contributing to protection outcomes.

For the HCT strategic approach to be connected to all aspects of the response, protection must be a central tenet of the humanitarian programme cycle. The IASC Protection Policy, makes it clear that 'making protection central to humanitarian action…demands a system-wide commitment' which requires the participation of all humanitarian actors, regardless of their sector-specific experience.'[45] This includes participation in protection mainstreaming, protection integration, specialised protection activities and engaging collectively at every step. It is not a topic that can be added later or mainstreamed through the response after priorities and activities have been decided. Donors have a role in understanding and supporting this approach to ensure that protection is central, including for all projects they fund.

---

[44] Protection mainstreaming (ensuring a protection lens is incorporated into all operations) and protection integration (incorporating protection objectives into the programming of other sector-specific responses) to achieve protection outcomes) are both essential to centrality of protection in practice. See IASC, Policy on Protection in Humanitarian Action, 2016, page 5

[45] IASC, Policy of Protection in Humanitarian Action, 2016, page 4

Annex 1 ● ● ● ●

Country	Title of HCT Protection Strategy	Accompanying documents	Submitted response to country reflections exercise
Afghanistan	The Protection Strategy of Afghanistan's Humanitarian Country Team, July 2018 – July 2021	Action Plan for Afghanistan HCT Protection Strategy	☑
Cameroon	Stratégie de Protection Equipe Humanitaire Pays Cameroun, Plan d'action 2018 – 2020		☑
CAR	Stratégie de Protection Equipe Humanitaire Pays - EHP République centrafricaine, Plan d'action Juin - Décembre 2016		☑
Colombia	Estrategia Interagencial de Protección de Colombia 2018-2020	Plan de Acción Conjunto de las Estrategias Interagenciales de Género y Protección 2018	☑
DRC	Stratégie de protection de l'Equipe humanitaire du pays en République démocratique du Congo (avril 2018 – décembre 2019)		☑
Iraq	Iraq Humanitarian Country Team Protection Strategy 2019-2021	Annex 1: Action Plan	☑
Myanmar	Myanmar HCT Protection Strategy (2019-2020)		☑
Nigeria	Centrality of Protection Strategy, Humanitarian Country Team Nigeria, December 2017		
South Sudan	South Sudan Humanitarian County Team Centrality of Protection Strategy 2018-2019		
Yemen	Yemen Humanitarian Country Team (HCT) Protection Strategy, 2018-2019		

Child Protection AoR

Gender Based Violence AoR

Global Protection Cluster

Housing land and Property AoR
Global Pr

Mine Action AoR