

PROTECTION MAINSTREAMING TOOLKIT

FIELD TESTING VERSION



Global Protection Cluster

Global Protection Cluster – Task Team on Protection Mainstreaming

The Global Protection Cluster (GPC) Task Team on Protection Mainstreaming (TTPM) is the global level forum for coordination on protection in humanitarian settings. The TTPM, within the GPC, brings together UN agencies, NGOs and other actors under a shared objective of promoting and supporting the mainstreaming of protection throughout humanitarian action. Guidance and tools is available on the Protection Mainstreaming Page of the GPC Website: available [here](#).

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FOREWORD



Effective protection of conflict or disaster affected populations is increasingly viewed as a central concern of agency and cluster practice in humanitarian response. It is also no longer considered acceptable for humanitarian actors to focus on material needs without considering the safety, dignity and rights of individuals, groups, and affected populations.

The Inter-Agency Standing Committee (IASC) Policy on Protection in Humanitarian Action (2016), emphasises the IASC commitment to prioritise protection and contribute to protection outcomes in humanitarian action. It places a duty on Humanitarian Country Teams (HCTs) to ensure that protection is at the center of humanitarian action and requires all humanitarian actors, irrespective of their sector-specific expertise, to contribute to the protection of affected persons by committing to, inter alia, addressing protection issues that intersect with formal mandates and sector-specific responsibilities. Protection mainstreaming – the responsibility of all humanitarian actors – is one way of ensuring that protection principles are used to inform humanitarian response and address protection issues. It requires humanitarian practitioners to strive to minimise the harm they may cause by ensuring a protection lens is incorporated in the design and implementation of humanitarian programs.

The GPC Protection Mainstreaming Training Package explains protection mainstreaming principles and outlines minimum agency standards for incorporating protection into sector specific programmes. Recognising the need for concrete and operational tools as well as guidance for field practitioners to operationalise protection mainstreaming including on how to monitor and evaluate the impact of having mainstreamed protection into humanitarian programmes, the newly developed GPC Protection Mainstreaming Toolkit complements the GPC Protection Mainstreaming Training Package.

The toolkit, developed through extensive and inclusive consultations with global and field protection clusters, GPC Partners, and the GPC Operations Cell, is designed for use by protection and non-protection staff. The toolkit expands on key roles and responsibilities of Humanitarian Coordinators, Humanitarian Country Teams, Inter-Cluster Coordination Groups, Clusters, as well as donors in mainstreaming protection; provides concrete guidance and tools to mainstream protection into organizational programmes and throughout the humanitarian program cycle; as well as allows humanitarian practitioners to monitor and evaluate the impact of mainstreaming protection principles into their programs and activities.

Many people have generously offered their time and advice to us during the development of this toolkit, and several of you were particularly helpful in commenting on drafts, providing methodological advice. Protection cluster coordinators in Iraq, Myanmar, Niger, Palestine, Syria, and Yemen arranged most useful workshops and gave valuable feedback on operational recommendations.

I would like gratefully to acknowledge the contributions of all partners involved in the production of this Protection Mainstreaming Toolkit. I hope that this collaboration will inspire and encourage organizations to work together to make a genuine difference in the lives of those affected by displacement.

Simon Russell
Global Protection Cluster Coordinator

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Reference Group

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PROTECTION MAINSTREAMING AND THE IASC POLICY ON PROTECTION IN HUMANITARIAN ACTION



Given the volume and complexity of protection challenges around the world today, humanitarian actors must work together in seeking collective protection outcomes for people affected by crisis. This is achieved by ensuring that protection considerations underpin all humanitarian interventions during all stages of the project cycle; that individual rights are respected as part of programming; and that potential protection risks are identified from the outset and mitigated.

As stated by the [IASC Policy on Protection in Humanitarian Action \(2016\)](#), protection is a shared responsibility that is at the forefront of humanitarian action and that requires a system-wide approach to addressing severe and widespread protection risks. With due consideration to mandate and expertise, the Toolkit highlights the role and responsibilities of different stakeholders (Protection Clusters, Clusters, Inter-Cluster Coordination Groups, Humanitarian Country Teams, Donors, National/International Non-Governmental Organisations) with regards to protection mainstreaming thus promoting stronger collaboration among relevant actors across sectors to mitigate threats, reduce vulnerabilities and enhance capacities in humanitarian action.

Comprehensive and continuous analysis of risks is the foundation of collective protection outcomes. This analysis provides the evidence-base for programming, advocacy and dialogue for the purpose of influencing and changing behaviours and policies in support of a more favourable protection environment.

Protection mainstreaming efforts should therefore be framed on an overarching protection analysis and on sector-specific risk analysis thereby ensuring that protection risks and potential violations are taken into consideration and addressed effectively. The Toolkit provides guidance to conduct risk analysis and mitigation as well as to monitor and evaluate the impact of having mainstreamed protection principles in humanitarian strategies and programmes. It also highlights essential elements of principled, accountable and high-quality programming leading to more effective humanitarian action.

PROTECTION MAINSTREAMING AND THE CHS



The Core Humanitarian Standard on Quality and Accountability (CHS) sets out Nine Commitments that organisations and individuals involved in humanitarian response can use to improve the quality and effectiveness of the assistance they provide¹. At the World Humanitarian Summit (WHS), stakeholders highlighted the urgency to put people at the centre of humanitarian action and singled out the Core Humanitarian Standard as a practical way to improve humanitarian effectiveness. Indeed, the Chair’s Summary Report stated that:

“Participants at the Summit recognized the need to ensure people affected by crises are not only informed and consulted, but put at the centre of the decision-making processes. People affected by crisis should be treated as partners, not beneficiaries. Numerous commitments were made towards addressing this shift by donors, UN agencies and NGOs including the adoption of the Core Humanitarian Standard.”

The CHS is a verifiable standard, available to all humanitarian and development actors. The CHS verification framework allows its users to establish an objective baseline for their performance and work towards continuous, evidence-based improvement². The nine commitments that make up the CHS cover the issues of *Safety and Dignity and Avoid Causing Harm, Meaningful Access, and Accountability, Participation & Empowerment*, which together form the four pillars of protection mainstreaming.³ As such, organisations who use the Protection Mainstreaming Toolkit also contribute towards meeting CHS commitments (1 to 5).

Core Humanitarian STANDARD



¹ <https://corehumanitarianstandard.org/>

² CHS verification scheme (<http://www.chsalliance.org/what-we-do/verification>).

³ Safety & Dignity (Commitment 1 – Humanitarian Response is appropriate and relevant, Commitment 3 – Humanitarian Response strengthens local capacities and avoid negative effects); Meaningful Access (Commitment 1 & Commitment 2 – Humanitarian Response is effective and timely); Accountability, Participation & Empowerment (Commitment 3 & Commitment 4 – Humanitarian response is based on communication, participation and feedback, Commitment 5 – Complaints are welcomed and addressed)

PROTECTION MAINSTREAMING AND CROSS-CUTTING REQUIREMENTS



Cross-cutting issues focus on particular areas of concern in humanitarian response and address individual, group or general vulnerability issues. Mainstreaming cross-cutting issues ensure that such considerations inform all aspects of humanitarian action and helps maximise the quality and impact of the work that all humanitarian do. Some of these issues are: Age, Gender and Diversity, Child Protection, Gender-Based Violence, Mental Health and Psychosocial Support, Disability, HIV/AIDS. Protection Mainstreaming comprises the four key principles of prioritizing safety and dignity and avoid causing harm, ensuring meaningful access, accountability, and participation and empowerment. As such, the application of these principles allow for all the above described issues to be reflected at all stages of the response.

By using this Toolkit, humanitarian workers also contribute to the mainstreaming of the above mentioned cross-cutting issues. For example, Tool #B3 used to conduct a Project Design Assessment also provides a Gender Marker Code. The Toolkit reflects the following guidance:

- Minimum Standards for Child Protection in Humanitarian Action (CPWG)
- Gender-Based Violence Guidelines (IASC)
- Humanitarian Charter & Minimum Standards in Humanitarian Response (Sphere)

The below infographic supports a better understanding of the links between the different cross-cutting issues and how they contribute to the protection of affected populations.



ACRONYMS

| | |
|-------------|--|
| AoRs | Areas of Responsibility of the Global Protection Cluster |
| CHS | Core Humanitarian Standard |
| CBPF | Country-Based Pooled Fund |
| CP | Child Protection |
| GBV | Gender Based Violence |
| GPC | Global Protection Cluster |
| HCT | Humanitarian Country Team |
| HLP | Housing, Land & Property |
| HNO | Humanitarian Needs Overview |
| HPC | Humanitarian Programme Cycle |
| HRP | Humanitarian Response Plan |
| IASC | Inter-Agency Standing Committee |
| ICCG | Inter-Cluster Coordination Group |
| MA | Mine Action |
| NGO | Non-Governmental Organisations |
| PM | Protection Mainstreaming |
| TPM | Task Team on Protection Mainstreaming |
| UN | United Nations |
| WHS | World Humanitarian Summit |

SUMMARY



The Global Protection Cluster (GPC) Protection Mainstreaming Toolkit (hereafter referred to as “Toolkit”) is designed as a companion to the GPC [Protection Mainstreaming Training Package](#) (hereafter referred to as “Training Package”). The Training Package is the starting point to understand the concept and principles of “protection mainstreaming”. The Toolkit is designed to practically assist humanitarian workers to mainstream protection at the *individual* programme or project level as well as at the *collective* strategic and coordination level.

The Toolkit targets **coordination structures** (e.g. Clusters, Inter-Cluster Coordination Groups, and Humanitarian Country Teams) and **donors** by providing the tools and necessary advice to mainstream protection into their strategies and throughout the Humanitarian Programme Cycle (HPC). It also targets **operational organisations** (e.g. UN, INGOs and NNGOs), with the tools to mainstream protection into their organisational procedures and programmes. Finally, the Toolkit allows humanitarian workers to monitor and evaluate the process and the impact of having mainstreamed protection on the affected population.

For **coordination structures**, the Toolkit highlights roles and responsibilities of different actors, and emphasizes the role of the Protection Cluster in making available up-to-date Protection Risk Analysis.

For **donors**, the Toolkits includes recommendations for how protection mainstreaming can be better reflected in guidelines and the allocation process.

For **operational organisations**, the Toolkit is structured according to the programme cycle:

- 1. NEEDS ASSESSMENT & RISK ANALYSIS** – Step 1 identifies threats and vulnerabilities, and assesses the community’s capacities and mechanisms to cope with those protection risks. This forms the basis for identifying prevention and mitigation measures to ensure protection principles are mainstreamed in the intervention.
- 2. PROJECT DESIGN** – Step 2 defines whether the project design (project proposal) is aligned with protection mainstreaming principles and if staff knowledge and understanding of protection mainstreaming is satisfactory. Those assessments may lead to readjustments of the proposed intervention.
- 3. IMPLEMENTATION** – Step 3 outlines key prevention and mitigation measures identified in Step 1 and plans for the implementation of protection mainstreaming activities. It details the resources necessary, and helps the organisation track the implementation and monitoring of mainstreaming activities.
- 4. MONITORING AND EVALUATION** – Step 4 monitors and evaluates whether protection mainstreaming is taking place and what impact this has had on affected populations in terms of safety, dignity, meaningful access, accountability, participation and empowerment.

INTRODUCTION



The Global Protection Cluster (GPC) Protection Mainstreaming Toolkit supports the [IASC Policy on Protection in Humanitarian Action](#) published in June 2016, which reminds all humanitarian actors about their responsibility to mainstream protection principles into humanitarian action. The Toolkit accompanies the [GPC Protection Mainstreaming Training Package](#), which provides the starting point to understanding the concept and principles of “protection mainstreaming”. Following the delivery of a protection mainstreaming training, the Toolkit is designed to assist coordination structures and operational organisations with guidance and tools to design and deliver humanitarian aid without further increasing protection risks for the affected populations. The Toolkit also allows humanitarian actors to monitor and evaluate the impact of having mainstreamed protection principles into their organisational procedures and programmes. The GPC Protection Mainstreaming Toolkit is organized in different chapters for specific audiences and builds on good practices from the field, the 2016 IASC Policy on Protection in Humanitarian Action, as well as guidance and resources developed by the Global Protection Cluster, notably the GPC Protection Mainstreaming Training Package.

The Toolkit has the following overall objectives to enable all humanitarian actors:

- To identify and address protection risks that can be caused, perpetuated, or addressed by their sector of intervention.
- To design programmes aligned with protection mainstreaming principles.
- To plan and implement protection mainstreaming activities.
- To monitor whether protection mainstreaming is taking place.
- To evaluate the impact of their protection mainstreaming actions on affected populations.

It is expected that the users of this Toolkit have a minimum level of knowledge and skillset on protection mainstreaming concepts and definitions. It is thus important to refer to the GPC Training Package for any additional information required regarding the definition, objective, principles of protection mainstreaming prior to using this Toolkit.

WHAT IS PROTECTION MAINSTREAMING?

The Global Protection Cluster (GPC) defines protection mainstreaming as the process of incorporating protection principles and promoting meaningful access, safety and dignity in humanitarian aid⁴. Similarly, the IASC Policy on Protection in Humanitarian Action (2016) states that protection mainstreaming is “an imperative for **all humanitarian actors** engaged in humanitarian response”. It reiterates that protection mainstreaming “ensures a protection lens is incorporated into operations”. Practically, “it is a way of designing and implementing all programmes so that protection risks and potential violations are taken into consideration. To mainstream protection, actors need to understand *who* is at risk, from *what* or *whom* as well as *why*, and the consequences their actions or inactions may have on the threats people experience and their vulnerability and capacity vis-à-vis these threats. This includes knowing how and where to refer people in need for specialist support to prevent or recover from violence and exploitation, as well as understanding when, how, and to whom to refer specialized protection issues.”⁵

⁴ Global Protection Cluster (GPC), *Protection Mainstreaming Training Package*, 2014.

⁵ Inter-Agency Standing Committee (IASC), *Policy on Protection in Humanitarian Action*, 2016.

The following four elements must be taken into account in all humanitarian activities⁶:

1. **Prioritize Safety and Dignity, and Avoid Causing Harm:** Prevent and minimise as much as possible any unintended negative effects of your intervention, which can increase people’s vulnerability to both physical and psychosocial risks.
2. **Meaningful Access:** Arrange for people’s access to assistance and services in proportion to need and without barriers. Pay special attention to individuals and groups who may be particularly vulnerable or have difficulty accessing assistance and services.
3. **Accountability:** Set-up appropriate mechanisms, through which affected populations can measure the adequacy of interventions, and address concerns and complaints.
4. **Participation and Empowerment:** Support the development of communities’ and individual capacities and assist people to claim their rights, including – not exclusively – the rights to shelter, food, water and sanitation, health, and education.

WHO IS RESPONSIBLE FOR PROTECTION MAINSTREAMING?

All humanitarian actors have a responsibility to mainstream protection. The Toolkit is structured according to different profiles of humanitarian actors (coordination structures, donors, operational organisations). A summary table of roles and responsibilities of each entity with regards to protection mainstreaming is available below. This table is in line with recent guidance and policies⁷.

Graph 1: Roles and Responsibilities in Mainstreaming Protection

| | |
|---|---|
| Donors and Funding Mechanisms | <ul style="list-style-type: none"> • Consider protection mainstreaming as a key concept of their funding strategy. • Include specific requirements related to protection mainstreaming as part of the allocation and reporting process. • Support protection mainstreaming initiatives undertaken by fund recipient agencies. |
| Humanitarian Coordinator and HCT | <ul style="list-style-type: none"> • Drive the development and implementation of a comprehensive protection strategy to address risks. • Ensure protection is integrated in all stages of the humanitarian programme cycle and mainstreamed in all cluster plans. • Place protection at the centre of international humanitarian action. |
| Inter-Cluster Coordination Group | <ul style="list-style-type: none"> • Ensure protection mainstreaming is central to the work of the ICCG and that a collective approach is taken from the clusters to put protection mainstreaming into practice. • Support and facilitate the integration of protection mainstreaming in joint assessments, joint analysis, planning and monitoring under the Humanitarian Programme Cycle. • Support the mainstreaming of protection in all pooled fund allocation papers. |
| All Clusters | <ul style="list-style-type: none"> • Mainstream protection in cluster strategy to address risks that take place within a sector. • Support the mainstreaming of protection in sector-specific programming through advice, guidance and training. • Make use of existing protection mainstreaming tools, guidance and resources. |
| Protection Cluster | <ul style="list-style-type: none"> • Conduct and compile comprehensive Protection Analysis that details the main protection threats, vulnerabilities and coping strategies of affected population to inform decision and programming. • Provide the technical lead and support in ensuring protection mainstreaming is both regularly discussed in ICCG meetings and put into practice (and as appropriate at HCT meetings). • Provide protection mainstreaming support to other clusters. |
| Operational Organisations | <ul style="list-style-type: none"> • Mainstream protection into all stages of their programmes. • Support peer agencies/local partners to mainstream protection in all stages of their programmes. |

⁶ Global Protection Cluster (GPC), *Protection Mainstreaming Training Package*, 2014.

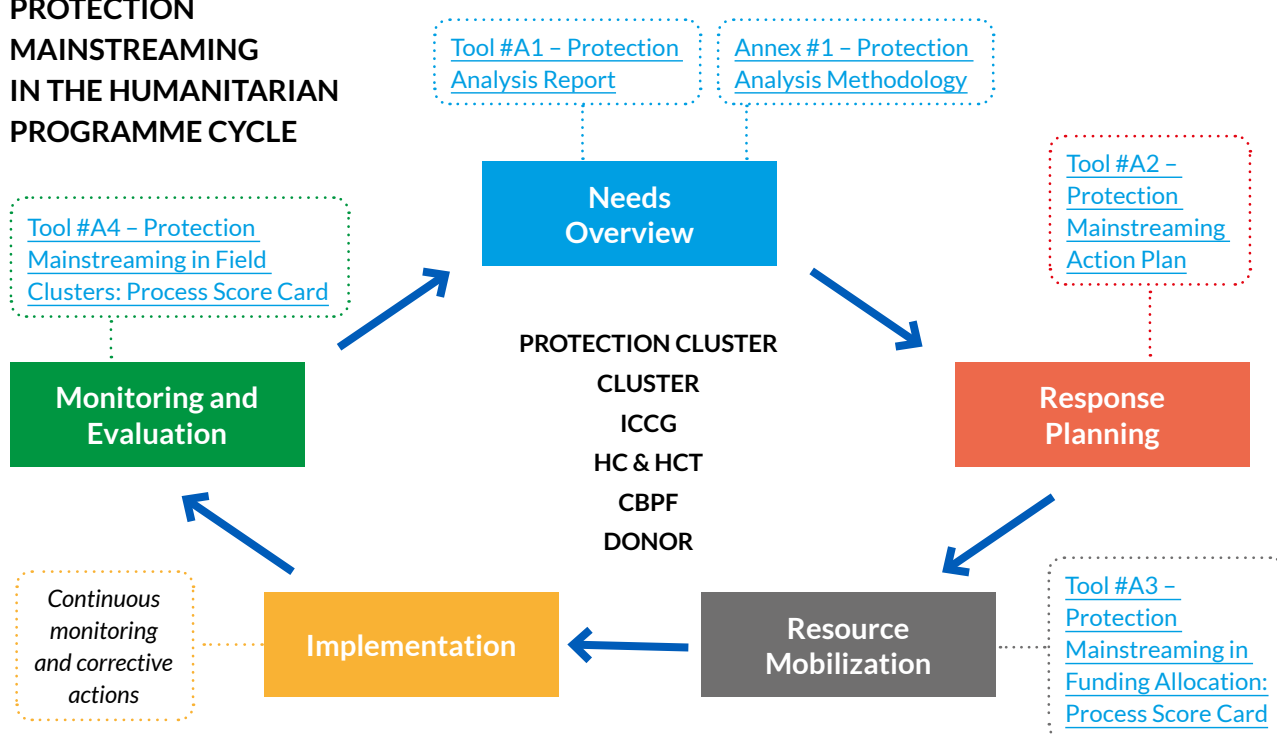
⁷ Inter-Agency Standing Committee (IASC), *Policy on Protection in Humanitarian Action*, 2016. Inter-Agency Standing Committee (IASC) Emergency Directors Group (EDG) *Preliminary Guidance Note on Protection and Accountability to Affected Populations (AAP) in the Humanitarian Programme Cycle (HPC)*.

CHAPTER 1: COORDINATION STRUCTURES AND DONORS



Given the complex context in which protection threats arise, complementary and coordinated actions are required to ensure protection principles are mainstreamed into humanitarian action. The *2013 IASC Statement on the Centrality of Protection in Humanitarian Action* called for a system-wide commitment by a wide range of actors at country level to place protection at the centre of humanitarian action. Based on the *2016 IASC Policy on Protection in Humanitarian Action*⁸, this chapter looks at how coordination structures (Cluster, Inter-Cluster Coordination Groups, and Humanitarian Country Teams) and donors can foster the mainstreaming of protection principles in the different phases of the humanitarian response. As demonstrated by the graph below, the methodology proposed fits within the successive stages of the Humanitarian Programme Cycle. Each entity (Clusters, Inter-Cluster Coordination Groups, and Humanitarian Country Teams) has specific roles and responsibilities in mainstreaming protection throughout the HPC. The methodology and tools proposed below are in line with existing guidance developed on this subject.

PROTECTION MAINSTREAMING IN THE HUMANITARIAN PROGRAMME CYCLE



Additional Annexes

[Annex #2 – Key Informant Interviews Methodology](#)

[Annex #3 – Focus Group Discussion Methodology](#)

[Annex #4 – Protection Cases Referral](#)

⁸ Inter-Agency Standing Committee (IASC), Policy on Protection in Humanitarian Action, Annex II – Roles and Responsibilities for the Centrality of Protection, 2016.

FIELD PROTECTION CLUSTERS

With protection being recognised as being central to humanitarian action, Field Protection Clusters have an important and significant role to play including supporting efforts to mainstream protection principles in the humanitarian response. The Protection Cluster Coordinator is responsible for ensuring this takes place largely through engaging in the appropriate coordination forums and inter-agency processes, working with and leveraging the capacity of the sub-clusters and active protection partners. The following methodology and tools can be used in this regard.

METHODOLOGY

1. Conduct and compile comprehensive Protection Analysis that details the main protection threats, risks, vulnerabilities and coping strategies of affected people to inform decision and programming.

i This action is essential towards the mainstreaming of protection in the humanitarian response. The findings of the Protection Analysis will enable other sectors to better identify risks in their service delivery.

- ▶ Conduct a Protection Analysis using the methodology proposed in [Annex 1 – Protection Analysis Methodology](#) and fill in the [Tool #A1 – Protection Analysis Report](#).
- ▶ Ensure the Protection Analysis Report is shared and discussed with all clusters coordinators, through the ICCG and is presented to the HCT.
- ▶ If other protection mappings, assessments or monitoring reports undertaken by the Protection Cluster or other Protection actors are available, include those as an annex to the Protection Analysis.
- ▶ Engage in joint analysis undertaken by the ICCG and ensure outcomes of the Protection Analysis informs the identification of solutions and actions in the operational response (ICCG) and at the strategic level (HCT).

2. Provide the technical lead and support in ensuring protection mainstreaming is both regularly discussed in ICCG meetings and put into practice (and as appropriate at HCT meetings).

N.B: Protection mainstreaming is a central part of the ICCGs work and the Protection Cluster Coordinator (and Sub-Cluster Coordinators) should be working closely with the Inter-Cluster Coordinator to find the most appropriate collective approach to ensure protection mainstreaming is put into practice by the clusters.

- ▶ Consider that one approach in order to bring more attention to protection mainstreaming is to advocate with the Inter-Cluster Coordinator to include protection as a standing agenda item of ICCG meetings to present the critical protection issues and formulate recommendations.
- ▶ Note that having regular protection update will not automatically result in better protection outcomes from the groups work. The Protection Cluster Coordinator should work with the Inter-Cluster Coordinator to ensure that presentations are tailored to the audience of Cluster Coordinators and lead to something actionable by the group.
- ▶ Provide briefings on the outcomes of the Protection Analysis at ICCG/HCT meetings and lead on the identification of protection risks at the highest coordination level, by contributing to timely and informed decision making.
- ▶ Engage in joint analysis undertaken by the ICCG and ensure outcomes of the Protection Analysis informs the identification of solutions and actions in the operational response (ICCG) and at the strategic level (HCT).

3. Provide protection mainstreaming support to other clusters.

- ▶ Map protection mainstreaming initiatives that other clusters may already be undertaking or other initiatives linked to protection mainstreaming (accountability, gender, disability, etc).
- ▶ Support other clusters in delivering protection mainstreaming trainings, and in developing sector-specific guidance, action plans and assessment surveys or questionnaires as well as identifying protection mainstreaming focal points.

- ▶ Provide expertise to other clusters to address the most prevalent and severe protection risks that intersect with their sector-specific response. Suggest protection mainstreaming activities based on the outcomes of the Protection Analysis, including offering to review assessment surveys or questionnaires of other clusters to ensure that protection is mainstreamed.
- ▶ Undertake joint missions (with Clusters Coordinators and the Inter-Cluster Coordinator for example) to assess the protection mainstreaming components in the activities of other clusters.
- ▶ Contribute and provide feedback to the HNO and the HRP documents and identify areas where protection can be better mainstreamed in these documents.

TOOLS

| # | Tools | Target User | Description | Timing |
|--------------------|----------------------------|--------------------|--|-------------------|
| A1 | Protection Analysis Report | Protection Cluster | Template to gather necessary information on protection threats, particularly vulnerable groups and existing capacities | On a yearly basis |

Good Practice

Yemen

The 2017 [Protection Cluster Strategy](#) for Yemen included as a strategic objective the provision of support to mainstream and integrate protection into all sector and cluster-specific humanitarian responses. In 2016, the Yemen Protection Cluster developed context-specific protection mainstreaming tools (training manual, checklists) based on available GPC guidance with relevant examples and case studies for Yemen. Two protection mainstreaming focal points were identified in each cluster and then trained during a two-day session on protection mainstreaming in practice. Follow-up from the workshop included the development of protection mainstreaming action plans for each cluster.

Iraq

The 2016 Protection Cluster Strategy for Iraq provided protection mainstreaming support to other clusters to improve the inclusion of protection, GBV, gender and disability concerns into each cluster response plan. Support consisted of training, sensitisation, integration of minimum standards and dissemination of specific checklists and technical guidance. As part of its support, the Protection Cluster also designated focal points to work with other cluster leads/clusters and the ICCG on mainstreaming protection in each cluster analysis and response strategy. In 2017, the Protection Cluster issued a [Guidance Note on Strengthening of Protection Analysis in the Mosul Emergency](#) for all humanitarian actors (protection and non-protection).

Nigeria

The Protection Sector Working Group in Nigeria issued a [Guidance Note](#) on mainstreaming protection in the 2017 Humanitarian Response Plan. In addition to setting out the main conflict and protection trends, the document provides recommendations intended at supporting all sectors to mainstream protection in their response plans. Those recommendations are based on the GPC Protection Mainstreaming Sector-Specific Checklists and adapted to the context.

South Sudan

In 2016, the Protection Cluster (together with the three sub-clusters GBV, Child Protection and Mine Action) prepared quarterly [Protection Trends Report](#) in South Sudan. The reports provided a comprehensive overview of the protection context and trends with data and analysis on key protection risks faced by civilians.

Ukraine

Part of the 2016 Protection Cluster Strategy is to support the entire response, including the HCT and other clusters, on identifying protection risks; capacity building on protection and mainstreaming protection through all response activities. In that sense, the Protection Cluster prepared a note, entitled [2016 HRP: A Gender and Protection Lens for All Actors](#), on incorporating gender and protection into the HRP planning process, with the aim of ensuring that the operational response was protection-driven. In addition, HelpAge and other key humanitarian actors have established an [Age and Disability Technical Working Group](#), led by the Protection Cluster, to monitor the inclusion of older people and people with disabilities in the overall response. This group is working to improve recognition and support for older people and people with disabilities, using guidance from the inclusive approach promoted under the [Age and Disability Capacity Programme \(ADCAP\)](#), an initiative to strengthen the capacity of humanitarian agencies through institutional, organisational and programmatic change to deliver age and disability inclusive emergency response.

Syria

As requested by the Whole of Syria humanitarian leadership, all sectors were required to carry-out a sectoral-level Protection Risk Analysis (PRA) and include mitigation measures for the 2017 HRP. All sectors identified and considered the potential protection risks of their strategy/activities and how they could mitigate those risks. This strategy promoted mainstreaming and increased opportunities for a multi-sectoral approach to addressing protection threats and risks experienced by affected communities. The Protection Cluster then conducted a [2017 HRP Protection Risk Analysis Review of Compliance, Impact and Monitoring](#) across the response.

State of Palestine

The Protection Cluster supported the WASH Cluster to design [Sector-Specific Checklists](#) to mainstream protection in water and sanitation interventions. The tool is intended to assist organisations in identifying issues that should be factored into the design, implementation, monitoring and evaluation of their programmes and projects. Similar checklists were designed for the Health and Nutrition Clusters.

ADDITIONAL GUIDANCE

- ➔ Global Protection Cluster (GPC), *Protection Mainstreaming Training Package*, Resource 17: Tip Sheet For Protection Clusters, 2014, available [here](#).
- ➔ Global Protection Cluster (GPC), *Protection Mainstreaming Toolkit, Annex A – Protection Analysis Methodology*, 2017.
- ➔ Global Protection Cluster (GPC), Community of Practice, Protection Mainstreaming material shared by field protection Clusters, available [here](#).

ALL CLUSTERS

Although the Field Protection Cluster plays a critical role to ensure protection principles are mainstreamed into the humanitarian response, all Clusters Coordinators and their lead agencies have the responsibility to mainstream protection in sectoral needs assessments, analysis, planning and response. The following methodology and tools can be used in this regard.

METHODOLOGY

1. **Mainstream protection in the cluster strategy to address risks that take place within a sector.**
 - ▶ Through the ICCG, receive a briefing by the Protection Cluster on its Protection Analysis to identify protection threats, vulnerable individuals and groups at risk and existing capacities and coping mechanisms of the affected population. Draw on the Protection Analysis to determine key priorities and interventions for the sector. Ensure the Protection Analysis is shared with all cluster members.
 - ▶ Ensure that key protection risks and prevention or mitigation measures are identified and feed into the protection analysis that informs the decision-making and development of the HRP as well as in the cluster work plan and strategy (see good practice of the PRA in the Syria response above).
 - ▶ Undertake protection mainstreaming commitments and response in the HRP.
2. **Support the mainstreaming of protection in sector-specific programming through advice, guidance and training.**
 - ▶ Conduct protection mainstreaming trainings for cluster members, in coordination with other Clusters Coordinators through the ICCG. Include the technical support of the Protection Cluster and its AoRs (Child Protection, GBV, Mine Action, HLP), and collaborate with potential representative of other cross-cutting issues related to protection mainstreaming (Gender, Age, HIV, Disability, Accountability, etc). The modalities, timeline and frequencies of the trainings should be tailored to the context of the operation.
 - ▶ Designate two staff to undertake the role of Protection Mainstreaming Focal Points to promote protection principles throughout the sector.
 - ▶ Make sure protection is regularly discussed as a standing agenda item in cluster meetings, and cluster members are aware of the importance of mainstreaming protection in their programmes.
 - ▶ Drawing on the mitigation measures identified previously, develop a [Tool #A2 – Protection Mainstreaming Action Plan \(PMAP\)](#) to plan and report on protection mainstreaming activities implemented at the cluster level and in which cluster members will be able to feed in and make reference to.
 - ▶ Monitor and report through the ICCG on the impact of having mainstreamed protection into sector-specific programming by coordinating with implementing partners. Identify one or two indicators to monitor from the suggested list of [Tool #A0 – Protection Mainstreaming Monitoring Indicators](#).
3. **Make use of existing protection mainstreaming tools, guidance and resources.**
 - ▶ Share and promote the use of the GPC Protection Mainstreaming Training Package and the GPC Protection Mainstreaming Toolkit to all members of the cluster.
 - ▶ Share and promote the use of context-specific or sector-specific guidance and tools developed in the country of operation to all members of the cluster.

TOOLS

| # | Tools | Target User | Description | Timing |
|--------------------|--|--------------|--|-------------------|
| A0 | Protection Mainstreaming Monitoring Indicators | All Clusters | List of suggested process and impact indicators to monitor protection mainstreaming activities | On a yearly basis |
| A2 | Protection Mainstreaming Action Plan | All Clusters | Template for planning and reporting on protection mainstreaming activities | On a yearly basis |

Yemen

In the [2017 Yemen HRP](#), each cluster included a section on its planned efforts to mainstream protection, gender/age and accountability to affected population in its response activities. For example, the WASH Cluster plans to provide a specific training on WASH and gender-based violence, and is working closely with the GBV sub-cluster to provide dignity kits with hygiene kits and to address WASH needs where GBV incidents are reported and may be linked to poor WASH services. Additionally, in order to operationalize protection mainstreaming, the Protection Cluster assisted other clusters with indicators linked to the key protection mainstreaming principles to help evaluate the degree to which the clusters have integrated protection in their activities:

1. Safety and Dignity and Avoid Causing Harm

Indicator: Services and facilities are available in safe locations, and locations that are accessible in safety

Indicator: Access to services respects the culture and customs of the community, and promotes the integrity of the family and community

2. Meaningful Access

Indicator: Disaggregated data is used (women, men, girls, and boys)

Indicator: Specific needs, including based on age, gender and diversity, are taken into account in planning, implementation and monitoring of humanitarian action

3. Accountability

Indicator: Humanitarian information systems communicate effectively with affected communities and other local actors

Indicator: Affected populations have opportunity to register complaints, provide feedback and to get a response

4. Participation and Empowerment

Indicator: Active and effective participation of affected people both in planning, response and monitoring processes

Indicator: Number of consultations with affected people both in planning, response and monitoring processes

Iraq

In the [2016 Iraq HRP](#), every cluster – except logistics and telecommunications – included a section containing priorities for protection mainstreaming and accountability to affected populations. Each cluster was required to provide, to the Humanitarian Coordinator, information about how activities in each cluster plan will contribute to achieving overall protection outcomes. An HC review panel then vetted each sector plan to ensure they prioritise tangible actions that target support and vulnerable groups.

South Sudan

In the [2017 South Sudan HRP](#), each cluster included a section on promoting quality programming, which included commitment to mainstream protection. For example, the Food Security Cluster mentions that the targeting and site selection by partners will be informed by a context and protection risk analysis so that food assistance supports the protection of the conflict-affected population.

Chad

In the [2017 Chad HRP](#), each clusters singled out their protection mainstreaming strategy. For example, the Education Cluster will ensure protection is reinforced in schools by training teachers on psychosocial support and gender-based violence. Student who have experienced traumatic events will have access to appropriate services.

ADDITIONAL GUIDANCE

- ➔ Inter-Agency Standing Committee (IASC) / Global Protection Cluster (GPC) / Office for the Coordination of Humanitarian Affairs (OCHA), *Suggested Actions for Cluster Coordination to Strengthen AAP and Protection in the Humanitarian Programme Cycle*, available [here](#).
- ➔ Global Protection Cluster (GPC), *Protection Mainstreaming Training Manual, Session 9: Coordination for Protection Mainstreaming*, 2014, available [here](#).

INTER-CLUSTER COORDINATION GROUPS (ICCG)

The Inter-Cluster Coordination Group, and more specifically the Inter-Cluster Coordinator, plays a critical role in facilitating protection and protection mainstreaming in the Humanitarian Programme Cycle, including through coordinated assessment and joint analysis for a shared understanding across clusters of who is at risk, from what or whom. The ICCG supports protection mainstreaming across clusters by facilitating a collective approach suitable to the context, in close collaboration with the Protection Cluster, that provides the technical expertise⁹. The following methodology and tools can be used in this regard.

METHODOLOGY

1. Ensure protection mainstreaming is central to the work of the ICCG and that a collective approach is taken from the clusters to put protection mainstreaming into practice.

- ❗** This action is essential towards the mainstreaming of protection in the humanitarian response. It will ensure a collective approach to protection mainstreaming is taken at the ICCG level.
- ▶ The IASC Protection Policy underlines that all clusters are responsible for ensuring that protection is mainstreamed into sector specific programming. It also emphasises that all clusters and their lead agencies have a responsibility to placing protection at the centre of humanitarian action, and that all Cluster Coordinators need to ensure that protection is incorporated in all phases of the Humanitarian Programme Cycle. In accordance with this, the ICCG should decide on the most effective approach to put protection mainstreaming into practice.
- ▶ The Inter-Cluster and Protection Cluster Coordinators (and Protection Sub-Cluster Coordinators) are responsible for ensuring protection mainstreaming is central to the work of the ICCG. It is important that the Inter-Cluster and Protection Cluster Coordinators have a good working relationship and it is recommended that they meet regularly to track the ICCGs work on protection mainstreaming to ensure a coherent and effective approach is being put into practice.
- ▶ Using ICCG meetings to make protection central to the work of the group, provide regular space for protection on the agenda; ensure all operational discussions and decisions include a protection angle; regularly updated situational analysis with protection integrated.
- ▶ Ensure all Cluster Coordinators have access to and are disseminating within their clusters protection mainstreaming guidance, tools and resources available.
- ▶ Encourage, support and monitor the roll-out of protection mainstreaming trainings for all clusters to raise awareness and build capacities on what protection mainstreaming is and how to concretely operationalize it. It is recommended that Inter-Cluster Coordinators facilitate some of these trainings.

2. Support and facilitate the integration of protection mainstreaming in joint assessments, joint analysis, planning and monitoring under the Humanitarian Programme Cycle.

- ▶ Conduct joint needs assessments and analysis and ensure that the Protection Analysis produced by the Protection Cluster informs and is integral to joint analysis including the production of the Humanitarian Needs Overview.
- ▶ Coordinate assessments and joint analysis for a common understanding across all clusters of who is at risk, from what and whom.
- ▶ Ensure that all clusters feed into the Protection Analysis that informs decision-making and development of the HRP, as articulated in the IASC Protection Policy. Ensure that clusters response strategies aim at reducing risks of affected populations and include actions to respond to the Protection risks identified. Encourage each cluster to take formal commitments in the HRP to include protection mainstreaming in their response, and encourage cross-cluster validation of projects.

⁹ Inter-Agency Standing Committee (IASC), *Guidance Note on the Cluster Approach*, November 2006. Inter-Agency Standing Committee (IASC), *Transformative Agenda Reference Document, Cluster Coordination Reference Module (CCRM)*, Section 5 on Cluster Management Arrangements, and Section 8 on Inter-Cluster Coordination, 2015. Inter-Agency Standing Committee (IASC), *Policy on Protection in Humanitarian Action*, Annex on Roles and Responsibilities, 2016.

- ▶ For response monitoring, identify and agree on a small number of key indicators which will provide an indication of how protection is being mainstreamed and addressed in the response. It is suggested to measure through an existing tool such as multi-sectoral assessments undertaken on a regular basis or tools such as the DTM, or community perception surveys.
 - ▶ Monitor the process and impact of protection mainstreaming activities undertaken by all Cluster using the [Tool #A4 – Protection Mainstreaming in Field Clusters: Process Score Card](#). This tool should be filled by the Inter-Cluster Coordinator with the support of all clusters as a collective exercise during an ICCG meeting.
- 3. Support the mainstreaming of protection in all pooled fund allocation papers.**
- ▶ Advocate for protection mainstreaming to be a mandatory requisite for projects submitted to pooled fund.
 - ▶ Promote and encourage all cluster partners to include a Protection Risk Analysis and Protection Mainstreaming Action Plan in their project proposals to pooled fund.

TOOLS

| # | Tools | Target User | Description | Timing |
|--------------------|--|--|---|-------------------|
| A4 | Protection Mainstreaming in Field Clusters: Process Score Card | Inter-Cluster Coordination Group (with all clusters) | Score Card to assess the level to which coordination structures have followed the guidance to effectively mainstream protection | On a yearly basis |

Good Practice

State of Palestine and Ukraine

In line with its role of improving data collection and joint analysis, the ICCG sought to ensure that targeted humanitarian response is based on need, and that the most vulnerable are prioritised for response. This was achieved through working with the Protection Cluster on the development of guidance on Protection and prioritisation of the most vulnerable in humanitarian response to assist in all phases of programming.

Myanmar

The [2017 Myanmar HRP](#) identified the inter-ethnic tensions and the importance of a conflict sensitive approach to all humanitarian activities. The HCT remains fully committed to placing people at the centre of its work, with a strong focus on vulnerable and marginalized groups, therefore ensuring a people centred and gender-inclusive approach and the meaningful participation of affected people in planning and decision-making. All cluster/sector plans incorporate protection mainstreaming principles on this basis.

Syrian Arab Republic

With the support of the Protection Cluster, the Inter-Cluster Coordination Group worked across all of the clusters to ensure that operational organisations put in place practical actions that appropriately define, target and support vulnerable groups and individuals. The Protection Cluster issued an infographic on [Protection, Vulnerability and Prioritising the Most in Need](#) which provides guidance on potentially vulnerable groups. Similar guidance was also provided in the [2017 Syria HRP](#) (pp. 60-61 Annex Protection, Vulnerability and Prioritising the Most in Need).

Somalia and Democratic Republic of the Congo

The Core Humanitarian Standard (CHS) has been included in coordination and collective mechanisms in 2016, as it features for the first time in the [2016 Somalia HRP](#) and [2016 DRC HRP](#). The HRP for Somalia states that in line with current OCHA guidance on effective coordination, the Somalia HCT/ICCG will continue to build on the current links with the CHS Alliance in the region, by convening joint training and annual action planning sessions on operationalising the CHS and the IASC Accountability to Affected Populations (AAP) Framework. In the Democratic Republic of the Congo, the HRP announces that “the response will be based on the Core Humanitarian Standard, thereby translating our commitment to improve the effectiveness of humanitarian response and to respect humanitarian standards and principles”.

ADDITIONAL GUIDANCE

- ➔ Inter-Agency Standing Committee (IASC), *Suggested Actions for Inter-Cluster Coordination to Strengthen AAP and Protection in the Humanitarian Programme Cycle*, available [here](#).
- ➔ Inter-Agency Standing Committee (IASC) Emergency Directors Group (EDG) *Preliminary Guidance Note on Protection and Accountability to Affected Populations (AAP) in the Humanitarian Programme Cycle (HPC)*, available [here](#).
- ➔ Global Protection Cluster (GPC), *Checklist on Incorporating Protection and Accountability to Affected Populations in the Humanitarian Programme Cycle*, available [here](#).

HUMANITARIAN COORDINATORS & HUMANITARIAN COUNTRY TEAMS (HCT)

The HC & HCTs have the overall responsibility to provide strategic direction on protection by ensuring protection priorities are identified and addressed in strategic humanitarian planning and operational decision-making. This expectation is reflected in the 2016 IASC Policy on Protection in Humanitarian Action. This requires a regular discussion on protection to identify priorities and immediate actions, including coordinated advocacy, aimed at alleviating human suffering and protecting the lives, livelihoods and dignity of populations in need. The HCT drives the development and implementation of an HCT Protection Strategy¹⁰ and Protection Mainstreaming. The following methodology and tools focus on the roles of the HC and HCT to mainstream protection.

🔄 METHODOLOGY

1. Drive the development and implementation of a comprehensive protection strategy to address risks.

- ▶ Seek, on a regular basis, in-depth and comprehensive Protection Analysis produced by the Protection Cluster and other relevant national and international actors, which must detail the main protection threats, vulnerabilities and coping mechanisms of affected people, which, from the protection mainstreaming perspective, should inform HCTs' decisions around strategic priorities for operations or advocacy.
- ▶ Identify one/two agency or organisation to take the lead, promote, implement and monitor protection mainstreaming efforts taking place at the inter-cluster level. Ideally, OCHA in its coordination role and the Protection Lead Agency for its protection expertise.

2. Ensure protection is integrated in all stages of the humanitarian programme cycle and mainstreamed in all cluster plans.

N.B: While the ICCG at the working level is responsible for ensuring this is part of the processes and the development of the document, the HCT is ultimately responsible for agreeing on the final products. The HCT is also responsible for ensuring AAP is implemented in the response.

- ▶ Share information and analysis on the protection situation with government, coordination structures, donors, and national and international NGOs.
- ▶ Task the ICCG to ensure that protection mainstreaming is implemented across clusters, including by insertion of clear protection objectives and outcomes in the HRP that each sector must respond to, and encourage cross-cluster validation of projects.
- ▶ Ensure that the voice of affected people is represented in the clusters, is heard and guides protection analysis, programming and HCT decisions. Integrate an accountability to affected people approach consistent with the IASC Guidance.

3. Place protection at the centre of international and national humanitarian action.

- ▶ Foster collaboration among humanitarian actors so as to enable analysis and collective commitments in addressing complex protection issues.
- ▶ Facilitate and coordinate collaboration and engagement with a diverse range of humanitarian and non-humanitarian actors in addressing protection threats.
- ▶ Make all necessary efforts to ensure sufficient funds are allocated to achieve protection outcomes in the response (e.g. include protection mainstreaming as a mandatory requisite for projects submitted to Country-Based Pooled Funds).
- ▶ Include protection as a standing item on the agenda of HCT meetings.

¹⁰ The main purpose of an HCT protection strategy is to mobilize a comprehensive, system-wide and multisector effort to prevent or respond to the most serious protection risks facing affected populations as well as to prevent and stop recurrences of violations. The strategy allows an HCT to redirect the humanitarian response as and when the protection situation evolves. It can enable an HCT to focus attention and to take action on protection priorities that possibly go beyond the scope of the HRP, and the protection cluster strategy. An HCT protection strategy can furthermore be used to leverage the expertise, mandates and capacities of different actors in a humanitarian response. It can also facilitate humanitarian dialogue, negotiation and protection advocacy as well as the HCT's engagement with a broader range of stakeholders in taking up their responsibilities in addressing key protection risks. [Guidance is available online.](#)

There is no specific tool in this Toolkit to be used by the HCT

 Good Practice

Yemen

In 2017, protection will be at the centre of the response, and all assistance will be planned and implemented so as to promote the safety, dignity and rights of affected people. The focus will be on implementing the [HCT Protection Strategy](#) approved in June 2016 across sectors and across the country. To ensure adequate resources for this work, the HCT has approved a target of 1% of cluster budgets being allocated towards protection mainstreaming activities.

Iraq

Every two weeks, there is a standing item on the HCT agenda when the Protection Cluster shares “Critical Protection Issues Notes” that is only 2 pages long with recommendations for action by relevant actors across clusters. The main purpose is to provide analysis of a protection issue and subsequent guidance. The note is prepared by the Protection Cluster Coordinator/Co-Facilitator, is linked to the [HCT Protection Strategy](#), and includes recommended actions for HC/HCT members. In addition, the 2017 Humanitarian Response Plan for Iraq, characterises the crisis in the country as a protection crisis. The strategic objectives of the 2017 HRP reflect the Humanitarian Country Team’s (HCT) commitment to ensure a strong protection base.

Myanmar

In Myanmar, protection is a standing agenda item at the Inter-Cluster and HCT meetings. This helps engage the HC/HCT in the implementation of identified protection priorities as well as encourages other clusters to think about protection issues and responses. This is also key for the implementation of Myanmar’s upcoming HCT Protection Strategy.

State of Palestine

A dedicated HCT Advocacy Working Group continues to serve as the main subsidiary body coordinating advocacy across the HCT. It sets the goals and develops the plan for the advocacy agenda using International Humanitarian Law and International Human Rights Law as a framework. The Advocacy Working Group chaired by OCHA, includes representatives from each of the Clusters, UN agencies, and the main NGO coordinating bodies. It meets monthly and reports regularly to the HC and the HCT. Additionally the [HCT Protection Strategy](#) provides guidance for all humanitarian actors to mainstream protection in their programmes.

Chad

Alongside other major priorities, protection mainstreaming took off in large thanks to the series of ToT trainings organised by the GPC Task Team on Protection Mainstreaming, but also with the visit of the STAIT mission in February 2016. The findings and recommendations of that mission included an enhancement in protection mainstreaming capacity, awareness and actual implementation. At the time OCHA was well placed to support the Protection Cluster in protection mainstreaming as two of its staff had participated in the Dakar ToT in December 2015. OCHA was able to provide active support to the Protection Cluster in co-facilitating trainings, encourage dialogue on protection mainstreaming in various coordination fora (e.g. ICC, General Humanitarian Coordination meetings) where protection mainstreaming best practices were shared among partners etc.

 ADDITIONAL GUIDANCE

➔ Global Protection Cluster (GPC), *Centrality of Protection in Humanitarian Action: Practical Steps for Humanitarian Coordinators and Humanitarian Country Team*, 2016, available [here](#).

COUNTRY-BASED POOLED FUNDS (CBPF)

Country-Based Pooled Funds (CBPF) provide an important opportunity to ensure that protection is mainstreamed into the humanitarian response. Indeed, protection can be mainstreamed at a strategic level in the development of the allocation papers against which project proposals are submitted and in the project design phase and the decision-making for which proposals will receive funding. The ICCG and Cluster Coordinators will have an important role to play in supporting protection mainstreaming in CBPFs. Depending on the specific set-up of CBPFs, which can be different from country to country, the ICCG and Cluster Coordinators will normally be involved in developing the allocation paper or strategy, in providing advice and guidance to cluster partners in developing proposals and, as members of the review board, in reviewing project proposals. The following methodology and tools can be used in this regard.

METHODOLOGY

1. **Incorporate protection mainstreaming into the consolidated appeal documents (allocation paper or strategy).**
 - ▶ The Protection Analysis Report developed by the Protection Cluster should be annexed to or referenced in the CBPF allocation paper in order to help inform the partners developing project proposals of the specific vulnerabilities and protection threats of the affected population and help them integrate preventive and mitigation measures in their project design.
 - ▶ Include protection mainstreaming as a requirement in the CBPF allocation paper. Advocate with the Advisory Board.
2. **Provide advice and guidance to cluster partners in developing proposals, and as members of the review board, in reviewing project proposals.**
 - ▶ Distribute the GPC Protection Mainstreaming Toolkit to those preparing project proposals as an additional source of guidance for mainstreaming protection in their project proposals. Advice cluster partners to use the methodology and tools available in Chapter 2 (e.g. Risk Analysis, Project Design Assessment, and Protection Mainstreaming Action Plan).
 - ▶ Provide a short training / awareness-raising session on protection mainstreaming and what is expected from partners submitting a proposal to the CBPF.
 - ▶ Promote a champion for protection mainstreaming (and all cross cutting issues) in the Advisory Board and review committees for CBPF.
 - ▶ Use the [Tool #A3 - Protection Mainstreaming in Funding Allocation: Process Score Card](#) to review proposals submitted to the CBPF.
 - ▶ Provide CBPFs standard protection cluster outcome indicators as well as standard activities for use in submission of proposals and reporting by partners.
 - ▶ Provide technical input in support of CBPF project monitoring activities (take part in monitoring missions when possible).
 - ▶ Provide inputs in review of revisions requests and narrative reports submitted by partners.

TOOLS

| # | Tools | Target | Description | Timing |
|--------------------|--|--------|--|---|
| A3 | Protection Mainstreaming in Funding Allocation: Process Score Card | Donors | Template to assess the quality of project proposals submitted for funding in terms of protection mainstreaming | When reviewing proposal submitted for funding |

Iraq

The [2017 Iraq Humanitarian Pooled Fund](#) allocation paper has been issued by the Humanitarian Coordinator (HC), in consultation with the Iraq Humanitarian Pooled Fund (IHPF) Advisory Board and clusters, to define the priorities and modalities of the first 2017 Standard Allocation. The document states that projects which include a gender and protection mainstreaming component will be prioritized.

Yemen

The [2016 Yemen Humanitarian Pooled Fund](#) promotes community engagement, protection and gender mainstreaming as cross-cutting issues across all HPF projects. The HPF should support greater protection mainstreaming and accountability to affected populations as part of the allocation of funds, by supporting specific initiatives by partners in that field.

Myanmar

The [2017 Myanmar Humanitarian Pooled Fund](#) allocation strategy paper outlines sectors, activities, geographical areas for funding under the 2017 First Reserve Allocation. The document states that projects which include a gender and accountability to affected population component will be prioritized. Additionally, the [MHF Project Proposal Template](#) includes, within the Cross-Cutting Issues Section, specific questions on how the proposed project intends to mainstream protection. The questions include (1) whether the safety and dignity of beneficiaries have been prioritized and the principles of Do No Harm considered, (2) how the proposed project enables equal and impartial access to assistance and services and the targeting of vulnerable groups and people with specific needs and (3) what mechanisms will be put in place to support the development of self-protection capacities and assist affected population's to claim their rights. The Protection Sector reviewed the 80 project proposals submitted to the Myanmar Humanitarian Fund and gave feedback on whether protection had been mainstreamed in the proposal.

OPT

The Protection Cluster was invited by the WASH Cluster to take part in the vetting panel of WASH projects and give feedback on whether protection mainstreaming was reflected in WASH projects.

Afghanistan

The [2017 Afghanistan Common Humanitarian Fund](#) allocation strategy paper prioritizes the creation of a protection-conducive environment to prevent and mitigate protection risks, as well as facilitate an effective response to protection violations.

South Sudan

The [2017 South Sudan Humanitarian Fund](#) allocation strategy paper prioritizes protection activities and shares the protection mainstreaming guidance as part of the materials shared in the launch of the allocation.

ADDITIONAL GUIDANCE

- ➔ Office for the Coordination of Humanitarian Affairs (OCHA), *Country Based Pooled Fund Global Guidelines, Operational Handbook*, Section on Gender and Accountability, pp.44-46, available [here](#). Please also consult this website for additional guidance on [CBPF](#).

DONORS

Recipient organisations are accountable to donors for how the funding received is spent. This gives donors the leverage to insist that quality aid is delivered with the funds provided. This section provides concrete actions that donors can take to ensure that protection mainstreaming is included in project proposals that they receive for funding. The following methodology and tools can be used in this regard.

METHODOLOGY

1. **Consider protection mainstreaming as a key concept of their funding strategy.**
 - ▶ Donors who fund the Protection Clusters and/or Working Groups should require them to be more systematic about producing Protection Analysis mapping threats, identifying vulnerable groups, coping mechanisms and service available.
 - ▶ Support operationalisation of collective accountability mechanisms at country level while at the same time discourage fragmented approaches related to community engagement.
 - ▶ Invest in the preparedness phase, by strengthening capacities on accountability and Protection from Sexual Exploitation and Abuse, in order to ensure buy in and ownership when crisis strikes.
2. **Include specific requirements related to protection mainstreaming as part of the allocation and reporting process.**
 - ▶ Require project proposals to refer to the Protection Analysis produced by the Protection Cluster identifying the protection threats, vulnerable individuals or groups, and existing capacities and coping mechanisms.
 - ▶ Require the organisation to assess its project proposal's alignment with key protection mainstreaming principles ([Tool #B3 – Project Design Assessment](#)).
 - ▶ Require the organisation's staff to be properly trained on Protection Mainstreaming ([Tool #B4 – Staff Assessment](#)).
 - ▶ Require the organisation to explain how the project will take into consideration or respond to the protection risks identified ([Tool #B5 – Protection Mainstreaming Action Plan](#)).
 - ▶ Require the systematic disaggregation of project indicators using an age, gender and diversity approach.
 - ▶ Include protection mainstreaming process and impact indicators to report on.
3. **Support protection mainstreaming initiatives undertaken by fund recipient organisations.**
 - ▶ Allow grant flexibility if new threats to access, safety, and dignity are identified and documented appropriately.
 - ▶ Develop incentives and sanctions promoting both individual organisations and collective accountability mechanisms.
 - ▶ Support the use of existing common language on quality and accountability such as the Core Humanitarian Standard (CHS).

TOOLS

| # | Tools | Target User | Description | Timing |
|--------------------|--|-------------|--|---|
| A3 | Protection Mainstreaming in Funding Allocation: Process Score Card | Donors | Template to assess the quality of project proposals submitted for funding in terms of protection mainstreaming | When reviewing proposal submitted for funding |

OFDA

OFDA guidelines include mandatory cross-sectoral guidance for Protection Mainstreaming as well as sector-specific questions for how Protection will be mainstreamed.

ECHO

ECHO uses the Gender-Age Marker as a tool to assess to what extent each funded humanitarian action integrates considerations such as gender and age. The Gender and Age Marker Toolkit is available [here](#). In addition, the ECHO thematic policy document on Protection reflects Protection Mainstreaming as a cross-cutting theme that *refers to the imperative for each and every humanitarian actor to prevent, mitigate and Respond to protection threats that are caused or perpetuated by humanitarian action/inaction by ensuring the respect of fundamental protection principles in humanitarian programmes – no matter what the sector or objective.*

SIDA

SIDA places a big importance on Gender Mainstreaming, and requires all projects to provide information on analysis on gender. The IASC Gender Marker is required, and projects with Gender Marker code 0 (zero) will not be granted funding from Sida.

DFID

DFID Humanitarian Response Funding Guidelines integrate many components of protection mainstreaming such as accountability and access to humanitarian aid. DFID also has a Disability Framework and a guidance on disaggregating data by disability.

ADDITIONAL GUIDANCE

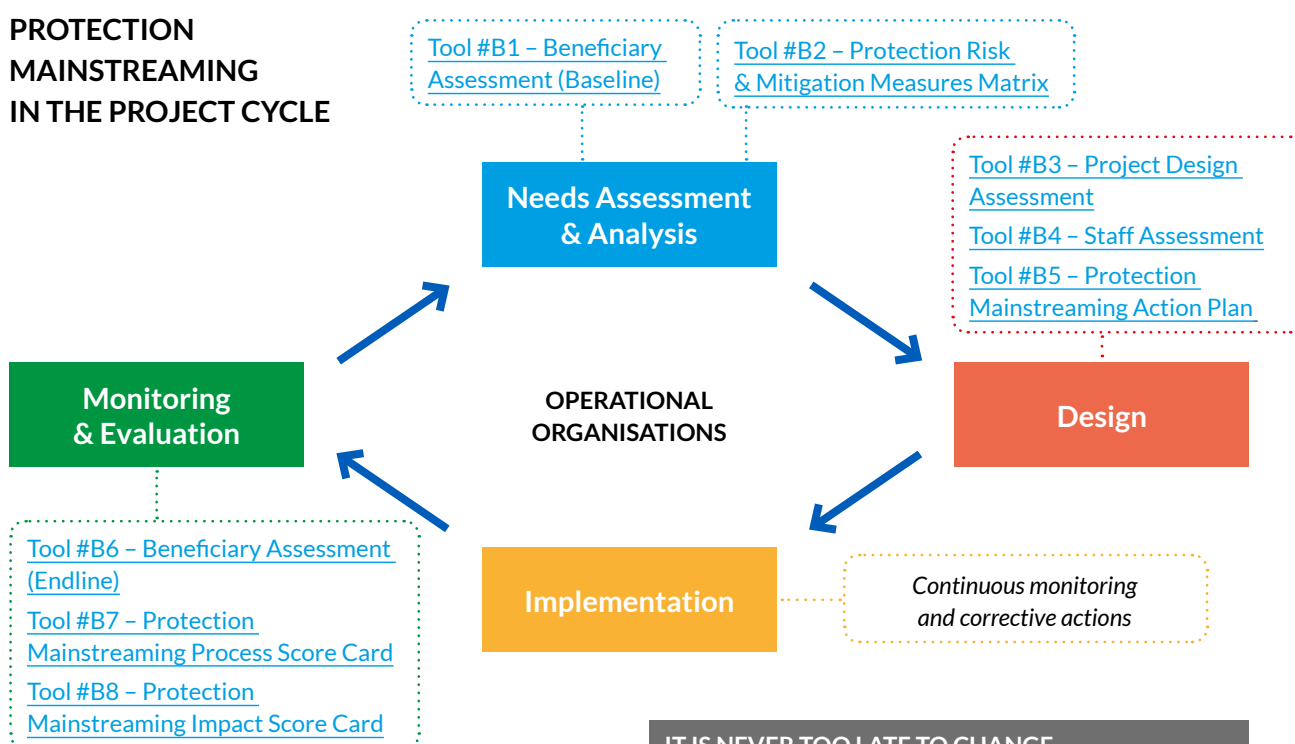
- ➔ USAID Office of U.S. Foreign Disaster Assistance (USAID/OFDA), *Guidelines for Proposals*, 2012, available [here](#).
- ➔ ECHO, *Thematic Policy Document #8, Humanitarian Protection: Improving Protection Outcomes to Reduce Risks for People in Humanitarian Crises*, 2016, available [here](#).
- ➔ SIDA, *Gender Toolbox, Gender Equality in Humanitarian Assistance*, 2015, available [here](#).
- ➔ DFID, *Humanitarian Response Funding Guidelines*, 2015, available [here](#).
- ➔ DFID, *Disability Framework*, 2015, available [here](#).
- ➔ DFID, *Guide to Disaggregating Programme Data by Disability*, 2015, available [here](#).

CHAPTER 2: OPERATIONAL ORGANISATIONS (UN, INGO, NNGO)



This section outlines how operational organisations (UN, INGOs, and NNGOs) can mainstream protection into their programmes following four steps. The methodology proposed fits within the successive stages of the project cycle. The methodology and the relevant tools for each steps are outlined below.

PROTECTION MAINSTREAMING IN THE PROJECT CYCLE



Additional Annexes

[Annex #2 - Key Informant Interviews Methodology](#)

[Annex #3 - Focus Group Discussion Methodology](#)

[Annex #4 - Protection Cases Referral](#)

IT IS NEVER TOO LATE TO CHANGE WHAT YOU ARE DOING!

This chapter is structured according to the project cycle but at any time during project implementation you can do a risk analysis, modify your implementation plan and conduct M&E activities

STEP 1 – NEEDS ASSESSMENT & RISK ANALYSIS

Protection should be mainstreamed in sector-programme assessments. In addition, protection mainstreaming needs to be informed by an analysis of the real and potential protection risks that may arise in a sector programme. The following methodology and tools can be used in this regard.

METHODOLOGY

- The first step to mainstream protection is to highlight and comprehend protection risks. This step is essential towards the mainstreaming of protection in the humanitarian response as it will enable operational partners to better identify potential risks in their service delivery / specific programme.
- 1. **Consult the Protection Cluster within your area of intervention to have access to the Protection Analysis which identifies threats, vulnerable groups and existing capacities.**
 - ▶ Reach out to the Protection Cluster to have access to the existing Protection Analysis Report. It includes information related to protection risks (identified threats, vulnerable groups, and existing capacities).
 - ▶ Get a proper understanding of the main identified threats, the most vulnerable groups and the existing capacities of the affected populations as well as services and resources already available. It will help you identify real and potential risks that may arise in your sectoral programme.
- 2. **Consult beneficiaries to better understand their protection risks and identify how your organisation can avoid causing harm to the community through your intervention.**
 - ▶ Confirm the threats, vulnerabilities, and negative coping strategies identified in the Protection Analysis Report by consulting with the affected-population of your area of intervention.
 - ▶ Conduct a Tool [#B1 – Beneficiary Assessment \(Baseline\)](#) through Focus Group Discussions (FGD) to assess the perception and experience of the affected population in terms of safety, dignity, access and participation.

WHAT TO DO IF NO PROTECTION ANALYSIS IS AVAILABLE?

As mentioned in Chapter 1, the development of a Protection Analysis requires a specific skillset, and non-protection staff or organisations with no protection expertise should not undertake a Protection Analysis on their own. If no Protection Analysis is available, take the following steps:

- Identify an organisation (international or national) implementing protection activities in your area of intervention. You can refer to the Protection Cluster 4W, if available.
- Request a bilateral meeting to discuss the protection situation in the area.
- Consult these sources of information:
 - ▶ HCT Protection Strategy
 - ▶ Protection Cluster Strategy
 - ▶ Humanitarian Needs Overview (HNO)
 - ▶ Humanitarian Response Plan (HRP)
 - ▶ Protection Assessments and Reports from other organisations specialized in protection

3. Consult beneficiaries to identify prevention and mitigation measures to protection risks that may arise in your programme.

- ▶ Identify with beneficiaries preventive and mitigation measures with the objective of reducing the threats and the vulnerabilities and increasing the existing capacities¹¹. Use the [Tool #B1 – Beneficiary Assessment \(Baseline\)](#) to guide the discussion.
- ▶ Complete the [Tool #B2 – Protection Risk & Mitigation Measures Matrix](#) specific for your project/ programme/sector¹² using the findings of the Protection Analysis and the Beneficiary Assessment.
- ▶ Consult the [Sector-Specific Protection Mainstreaming Checklists](#) available on the GPC Website or in the Protection Mainstreaming App to help you identify preventive and mitigation measures. Note however that the Sector-Specific Checklists will not necessarily be tailored to your specific context. It is therefore strongly recommended to conduct a Beneficiary Assessment.

WHAT IS THE DIFFERENCE BETWEEN THE PROTECTION ANALYSIS TOOL AND THE BENEFICIARY ASSESSMENT TOOL?

The Protection Analysis Tool is used by Protection Cluster to identify protection risks at the national/ sub-national level, identifying the threats, vulnerabilities, and capacities of the affected population. The Beneficiary Assessment is used by operational partners for a specific project or area of intervention. The objective is similar (i.e. identifying protection risks and mitigation measures) but one is done at the collective/ strategic level and the other one at the individual/operational/project level.

TOOLS

| # | Tools | Target User | Description | Timing |
|--------------------|--|----------------------|--|--|
| B1 | Beneficiary Assessment (Baseline) | Operational partners | Template gather beneficiary perception of protection risks and potential mitigation measures | At the inception of the assessment phase prior to designing new project. This step can be conducted in 1 week, including time for training, implementation and reporting |
| B2 | Protection Risk and Mitigation Measures Matrix | Operational partners | Template to present protection risks identified and the prevention and mitigations measures validated by the affected population | |

Good Practice

Due Diligence Analysis

While providing shelter interventions, the Shelter actors in Iraq undertake due diligence analysis to ensure that the shelter intervention guarantees legal protection against forced eviction, harassment and other threats and enables beneficiaries to live in one's home in safety and dignity. Before starting any rehabilitation work, the Shelter actors confirm the ownership status of the building. Subsequently, they also provide support in formulating rental agreements or other tenancy agreements and thus ensure that the Shelter programmes do not create insecurity for beneficiaries or increase the risk of eviction.

Beneficiary Assessments

Handicap International has been using the different drafts of the Beneficiary Assessment to harmonize question sets related to safe access to services in several countries (for example South Sudan, Iraq, DRC), enabling teams

¹¹ Refer to the Protection Risk Equation available in Annex 1 – Protection Analysis Methodology

¹² This may be a high level emergency response programme for an agency (e.g. WASH, NFI, Child Protection), a sectorial programme or a project specific matrix (e.g. a grant)

to raise awareness about the importance of barriers to accessing services, identify threats and vulnerabilities and put in place mitigation actions and proactive measures to facilitate access and participation.

Sector-Specific Assessment Questions

The GPC Protection Mainstreaming Training Package (pp. 168-172) contains a list of possible questions to be considered when conducting a sector-specific assessment in order to integrate protection mainstreaming principles in the assessment tool. The list was elaborated in Pakistan and does not intend to be exhaustive or to be rigidly interpreted. Some of the questions will be more suitable for needs assessments before the start of an intervention; others will be more suitable for assessments and monitoring during the implementation of programmes/interventions.

Disability Disaggregation

The UN Washington Group Short Set of Questions is designed to identify people with disabilities through questions related to difficulties performing six activities (walking, seeing, hearing, cognition, self-care and communication). The focus on functioning and the brevity of the tool mean that it can be rapidly and easily deployed in a variety of settings. It is therefore recommended to consider disaggregation by disability by inserting the Washington Group Short Set of Questions in surveys and questionnaires. Check here the [Washington Group Short Set of Questions on Disability](#).

ADDITIONAL GUIDANCE

- ➔ Global Protection Cluster (GPC), *Protection Mainstreaming Training Package*, Session 4: Protection Mainstreaming in Practice: Assessment and Analysis, pp.119-124, 2014, available [here](#).
- ➔ Global Protection Cluster (GPC), *Protection Mainstreaming Training Package*, Resource 6: Example Assessment Questions from Pakistan, pp. 168-172, available [here](#).
- ➔ Global Protection Cluster (GPC), *Protection Mainstreaming Training Package*, Protection Mainstreaming Sector-Specific Checklists, pp.178-208, 2014, available [here](#).
- ➔ Global Protection Cluster (GPC), Protection Mainstreaming Guidance App, available to download [Google Play](#) and [iTunes](#) app stores.

STEP 2 – PROJECT DESIGN

Protection should be mainstreamed when designing a new project by identifying concrete actions that can be undertaken to ensure the applicability of the four main protection mainstreaming principles. The following methodology and tools can be used in this regard.

METHODOLOGY

Grants management staff or proposal lead writer also have a responsibility to ensure that every new project proposal is aligned with key protection mainstreaming principles prior to submitting a new project for funding.

1. Ensure your project proposal is aligned with key protection mainstreaming principles.

- Use the [Tool #B3 – Project Design Assessment](#) to ensure that protection principles are mainstreamed into the project design phase. Note that ideally the individual completing this assessment will also have been trained on protection mainstreaming.
- Revise the proposal for a better consideration of key protection mainstreaming principles if the score is low.

2. Assess the knowledge and skillset of the project staff on protection mainstreaming concept and key elements.

- ▶ Use the [Tool #B4 – Staff Assessment](#) to assess the operational staff knowledge and skillset on protection mainstreaming.
- ▶ If the assessment highlights internal training and/or capacity strengthening needs, plan and budget for it in the new project.

3. Identify specific and concrete activities to include in your project proposal for protection mainstreaming to be effective.

- ▶ Refer to the Protection Risk and Mitigation Measures Matrix conducted in step 1 to identify the specific and concrete activities to include in the project proposal.
- ▶ Ensure those activities are properly supported with time, personnel and resources.
- ▶ Use the [Tool #B5 – Protection Mainstreaming Action Plan \(PMAP\)](#) to identify specific, time-bound and achievable protection mainstreaming actions.

4. Show donors and partners that considerations to protection mainstreaming has been given during the project development stage.

- ▶ Annexe to your project proposal submission, the Project Design Assessment, the Staff Assessment and the Protection Mainstreaming Action Plan.

PROTECTION MAINSTREAMING MONITORING INDICATORS

It is recommended to include protection mainstreaming monitoring indicators in your project proposal.

- Consult the [Tool #A0 – Protection Mainstreaming Monitoring Indicators](#), which includes a list of suggested **process** and **impact** indicators.
- Ideally include at least one process indicator and one impact indicator to measure whether protection has been mainstreamed in the project and assess the impact on affected populations.

TOOLS

| # | Tool | Target User | Description | Timing |
|--------------------|--|----------------------|---|---------------------------------|
| A0 | Protection Mainstreaming Monitoring Indicators | Operational partners | List of suggested process and impact indicators to monitor protection mainstreaming | During the project design stage |

| | | | | |
|--------------------|--------------------------------------|----------------------|---|---|
| B3 | Project Design Assessment | Operational partners | Assessment to score the alignment of a new project with the key protection mainstreaming principles | Before submitting a new project for funding (30 min/proposal) |
| B4 | Staff Assessment | Operational partners | Assessment to highlight staff knowledge and skillset on protection mainstreaming | Before submitting a new project for funding (30 min/staff) |
| B5 | Protection Mainstreaming Action Plan | Operational partners | Template for planning and reporting on protection mainstreaming activities | During the project design stage (30 min/action plan) |

Good Practice

Design of Food Assistance Programme

The Food Security and Agriculture Cluster (FSAC) partners FSAC in Yemen undertook protection mainstreaming in the design and implementation of food assistance, agricultural, and livelihood activities in non-discriminatory and impartial ways that promote the safety, dignity and integrity of vulnerable people receiving assistance. Distributions take place in public spaces, during daylight hours and safeguard that there is appropriate segregation for women to create a culturally sensitive and safe operational environment. FSAC partners also ensure that programme teams include female members to make sure that women feel able to comfortably discuss their needs and constraints. Programmes are in place to ensure income-generation activities and economic options for women and girls so they do not have to engage in unsafe practices – or are exposed in other ways to GBV driven by economic dependency. Sensitization of women and men in the community, on violence against women and girls (including domestic violence) is an integral part of the FSAC partners’ response.

Inclusion Monitoring Indicators and Proposal Checklist

In DRC, Handicap International was involved in the development of some “Inclusion Monitoring Indicators” and an “Inclusion Proposal Checklist” together with the Humanitarian Pooled Fund (HPF) Advisory Group to score proposals as regards to how they integrated protection mainstreaming. The checklist developed is based on the Project Design Assessment Tool and highlights key actions that should be considered in the design of a project in order to promote safe access to humanitarian aid for vulnerable persons. The inclusion marker allows partners to assess whether barriers to access humanitarian aid exist for people at risk of exclusion such as people with disabilities, religious or ethnic minorities, older persons, pregnant and lactating women, chronically ill or single-parents. Further advice was given by the HPF Advisory Group to funded partners to better consider these groups within the proposal submitted and future projects. Beyond identifying these barriers, it is for the partner to envisage the solutions so that these individuals have access to assistance.

Project Design Tracking

In 2015-2016, the IRC decided to track the performance of 60 projects across six countries, using the Project Design Assessment. This exercise allowed the IRC to identify trends. Individual country programmes were able to score their projects and see an improvement over time, while at the global level it was possible to identify areas of project design that needed more support. One of the main findings was the need to strengthen the inclusion of feedback, complaint, and response mechanisms.

ADDITIONAL GUIDANCE

- ➔ Global Protection Cluster (GPC), *Protection Mainstreaming Training Package*, Session 5: Protection Mainstreaming in Practice: Project Design, pp.125-130, 2014, available [here](#).
- ➔ Global Protection Cluster (GPC), *Protection Mainstreaming Training Package*, Session 10: Mainstreaming Action Plans, pp.149-152, 2014, available [here](#).
- ➔ Inter-Agency standing Committee (IASC), Gender Marker, available [here](#).

STEP 3 – IMPLEMENTATION

For protection mainstreaming to be effective, it needs to be linked to specific and concrete actions. During the implementation phase, it is important to monitor the implementation of those actions. The following methodology and tools can be used in this regard.

METHODOLOGY

During the implementation phase of a project, operational partners will implement specific activities to ensure protection mainstreaming principles are reflected in their project. A Protection Mainstreaming Action Plan provides a structure for planned actions and has proven to be a useful tool for the implementation and the monitoring of protection mainstreaming activities.

- 1. Implement the protection mainstreaming activities defined during the project design stage.**
 - ▶ Use the [Tool #B5 – Protection Mainstreaming Action Plan \(PMAP\)](#) to implement protection mainstreaming actions using the resources available.
- 2. Monitor the implementation of the planned actions and track progress throughout the implementation period.**
 - ▶ Use the colour coding integrated in the Protection Mainstreaming Action Plan to track progress and facilitate the monitoring process.
 - ▶ If measures are not implemented in adequacy with the plan, identify and analyse the reasons why and if needed, implement corrective measures. Allow for additional resources or time is needed.

WHAT TO DO IF A PROTECTION MAINSTREAMING ACTION PLAN DOES NOT EXIST?

It is never too late to change what we are doing! If a project is halfway through the implementation phase, it is recommended to use the Protection Mainstreaming Sector-Specific Checklists to spot check the programme. If any issue is noticed in terms of the implementation of the four protection mainstreaming principles, programme staff can follow these steps:

- Go back to Step 1 and analyse the risks specific to the project.
- Consult the affected population's perception about safety, dignity and access to humanitarian assistance as well as accountability and participation.
- Identify mitigation measures for each risk identified.
- Complete a Protection Mainstreaming Action Plan.
- Make sure it is realistic given the time and resources available.

TOOLS

| # | Tool | Target User | Description | Timing |
|--------------------|--------------------------------------|----------------------|--|--|
| B5 | Protection Mainstreaming Action Plan | Operational partners | Template for planning and reporting on protection mainstreaming activities | During the project design stage (30 min/action plan) |

Disability and Vulnerability Focal Points

Handicap International's Disability and Vulnerability Focal Points (DVFP) in South Sudan provide an essential entry point into the camp communities, which are politically and socially complex environments. DVFP's are usually a combination of volunteers and staff from within the camp population and who live within the camps, and provide information on access to services, as well as a space to promote participative discussions. DVFPs are one of the ways in which Handicap International addresses the need to take effective, concrete action on behalf of those made vulnerable, including people with disabilities in emergencies. The mechanism has been expanded over the years, in particular in Sri Lanka, Indonesia, Iraq, Myanmar, India, Haiti, Gaza, Pakistan, Philippines, Lebanon, Jordan, Mali and DRC.

Flexible Remedial Action Funding

Through its Protection in Practice project – a consortium project of Oxfam GB, World Vision Australia and the IRC – the IRC has supported over 240 staff across 56 local partners in 7 countries (Lebanon, Turkey, South Sudan, DRC, Pakistan, Myanmar, and the Philippines) providing protection mainstreaming capacity strengthening activities. Following the delivery of protection mainstreaming trainings and the development of action plans with local partners, the IRC has supported the implementation of some activities of those actions plans by establishing a Flexible Remedial Action Funding. A total of 31 cash awards were released to partners. Protection mainstreaming activities funded through those cash awards included for example: making adaptations to allow disability access in service delivery, improving accountability mechanisms, follow-on protection mainstreaming training for local partner staff, organizing focus group discussions to gather feedback on the quality of service delivery, improving latrines design to increase safety for users, conducting sensitization meeting with local authorities and police. These cash awards (and not sub-grants) proved to be effective due to their flexibility, simplicity, and protracted implementation timeframes.

Addressing the Needs of Older People

In Ukraine, under the protection mainstreaming umbrella, HelpAge supports the increasing number of older men and women, often isolated from their families, to regain some independence in their daily lives, with psychological support, peer-to-peer groups and establishing community safe spaces offering activities and access to other local services. Homebound older people with health concerns receive regular visits from the community volunteers of all ages, who assist with daily tasks and can refer any cases of concern to receive further support. HelpAge and People in Need (PIN) provide cash and non-food items to especially vulnerable older people affected by the conflict in eastern Ukraine.

Mainstreaming Mine Action

Mine action organisations are working with other sectors such as WASH, Food Security, Shelter and Education to enable critical humanitarian operations and reduce the risks related to mines, explosive remnants of war, and improvised explosive devices. As an example, in Iraq, they cleared hospitals, schools, water well and water plants enabling humanitarian workers to restore health care, emergency education and water services to affected people. In South Sudan, they cleared routes and food drop sites for the Food Security actors to deliver food safely. In Syria, they collaborated with partners in different humanitarian sectors to map contamination and integrate mine risk education into a broad range of humanitarian activities to reach people most at risk.

ADDITIONAL GUIDANCE

- ➔ Global Protection Cluster (GPC), *Protection Mainstreaming Training Package*, Protection Mainstreaming Sector-Specific Checklists, pp.178-208, 2014, available [here](#).
- ➔ Global Protection Cluster (GPC), Protection Mainstreaming Guidance App, available to download [Google Play](#) and [iTunes](#) app stores.

STEP 4 – MONITORING AND EVALUATION

At the end of a project, it is important to monitor and evaluate whether protection has been mainstreamed into a project and what impact it had on the affected population. The following methodology and tools can be used in this regard.

METHODOLOGY

It is the responsibility of the operational partners to work with the staff in the field to ensure monitoring and evaluation of protection mainstreaming is conducted at the end of a project. Operational partners should monitor both the process and the impact of protection mainstreaming.

1. **Consult beneficiaries to assess their views, opinions and perception in terms of safety, dignity, access and participation at the end of your project.**
 - ▶ Use the [Tool #B6 – Beneficiary Assessment \(Endline\)](#) to assess whether beneficiaries safety, dignity, access and participation has improved or deteriorated as a result of your project. This method is designed to be kept rather simple, but at the same time objective, as it gives affected populations a space to share their opinions on the services they received.
 - ▶ Compare result with the Beneficiary Assessment conducted in step 1 as a baseline/endline process.
2. **Monitor and evaluate the process of protection mainstreaming in your project.**
 - ▶ Use the [Tool #B7 – Protection Mainstreaming Process Score Card](#) to assess the level to which your organisation has followed the steps to effectively mainstream protection. This self-evaluation is completed internally and may require inputs from different staff involved at the project implementation.
 - ▶ Monitor progress towards the implementation of the Protection Mainstreaming Monitoring Indicators identified in step 2, specifically the process indicators.
3. **Monitor and evaluate the impact of protection mainstreaming in your project.**
 - ▶ Use the [Tool #B8 – Protection Mainstreaming Impact Score Card](#) to assess the impact of having mainstreamed protection for affected populations. The scorecard is based on the findings of the Beneficiary Assessment Baseline / Endline.
 - ▶ Monitor progress towards the implementation of the Protection Mainstreaming Monitoring Indicators identified in step 2, specifically the impact indicators.

TOOLS

| # | Tool | Target User | Description | Timing |
|--------------------|--|----------------------|---|---|
| A0 | Protection Mainstreaming Monitoring Indicators | Operational partners | List of suggested process and impact indicators to monitor protection mainstreaming activities implemented in a project | At the end of a project |
| B6 | Beneficiary Assessment (Endline) | Operational partners | Template to assess beneficiary perceptions and experiences in terms of safety, dignity, access and participation | At the end of a project |
| B7 | Protection Mainstreaming Process Score Card | Operational partners | Score Card to assess the level to which the organisation has followed the steps to effectively mainstream protection | At the end or mid-term of the project (30 minutes/score card) |
| B8 | Protection Mainstreaming Impact Score Card | Operational partners | Score Card to assess the impact of having mainstreamed protection for affected populations | |

Beneficiary Assessments

In northern Nigeria, the IRC committed to establishing a Protection Mainstreaming baseline for service delivery. They conducted approximately 30 focus group discussions, representing different age and gender groups, as well as minorities specific to the area. The findings exposed a lack of access for persons with disabilities, corresponding with a lack of participation. All population groups also expressed confusion about what to do to submit complaints, which could have repercussions on all types of Protection violations if gone unaddressed. Having identified these two findings, the NGO decided to modify its programme implementation to include the participation of adolescents, and set up a feedback/complaints/response mechanism.

ADDITIONAL GUIDANCE

- ➔ Global Protection Cluster (GPC), *Protection Mainstreaming Training Package*, Session 5: Protection Mainstreaming in Practice: Monitoring and Evaluation, pp.125-130, 2014, available [here](#).

CHAPTER 3:

TOOLS



The table below presents the list of tools mentioned throughout the Toolkit:

PROTECTION MAINSTREAMING MONITORING INDICATORS:

| | Number | HPC / Project Cycle Stage | Tool | Target User | Description |
|-------------|----------|---------------------------|--|-------------------------|--|
| Recommended | Tool #A0 | Monitoring & Evaluation | Protection Mainstreaming Monitoring Indicators | All Humanitarian Actors | List of suggested process and impact indicators to monitor protection mainstreaming activities implemented at the collective or individual level |

PROTECTION MAINSTREAMING TOOLS FOR COORDINATION STRUCTURES & DONORS:

| | Number | HPC | Tool | Target User | Description |
|------------------------|----------|-------------------------|--|--|--|
| Required ¹³ | Tool #A1 | Assessment | Protection Analysis Report | Protection Cluster | Template to gather necessary information on protection threats, particularly vulnerable groups and existing capacities |
| Recommended | Tool #A2 | Joint Planning | Protection Mainstreaming Action Plan | All Clusters | Template for planning and reporting on Protection Mainstreaming related activities |
| | Tool #A3 | Resources Mobilization | Protection Mainstreaming in Funding Allocation: Process Score Card | Donors / Country-Based Pooled Fund | Template to assess during the allocation process the quality of project proposals submitted for funding in terms of protection mainstreaming |
| | Tool #A4 | Monitoring & Evaluation | Protection Mainstreaming in Field Clusters: Process Score Card | Inter-Clusters Coordination Groups (with all clusters) | Template to evaluate the mainstreaming of protection in the cluster system at the country level |

PROTECTION MAINSTREAMING TOOLS FOR OPERATIONAL ORGANISATIONS:

| | Number | Project Cycle | Tool | Target User | Description |
|----------|----------|---------------|-----------------------------------|----------------------|--|
| Required | Tool #B1 | Risk Analysis | Beneficiary Assessment (Baseline) | Operational partners | Template gather beneficiary perception of protection risks potential mitigation measures at the beginning of the project |

¹³ Using the Protection Analysis Report (Tool #A1) is **optional** in case Field Protection Clusters have already developed their own tools to carry out protection analysis.

| | Number | Project Cycle | Tool | Target User | Description |
|-------------|----------|-------------------------|---|----------------------|---|
| Recommended | Tool #B2 | Risk Analysis | Protection Risk Analysis and Mitigation Measures Matrix | Operational partners | Template to present the protection risks identified and their related prevention and mitigation measures validated by the affected population |
| | Tool #B3 | Project Design | Project Design Assessment | Operational partners | Template to score the project proposal according to its alignment with Protection Mainstreaming Principles |
| | Tool #B4 | Project Design | Staff Assessment | Operational partners | Template to assess the staff knowledge and skillset on Protection Mainstreaming |
| | Tool #B5 | Project Design | Protection Mainstreaming Action Plan | Operational partners | Template for planning and reporting on Protection Mainstreaming related activities |
| | Tool #B6 | Monitoring & Evaluation | Beneficiary Assessment (Endline) | Operational partners | Template to assess beneficiary perceptions and experiences in terms of safety, dignity, access and participation at the end of the project |
| | Tool #B7 | Monitoring & Evaluation | Protection Mainstreaming: Process Score Card | Operational partners | Score Card to assess the level to which the organisation has followed the steps to effectively mainstream protection |
| | Tool #B8 | Monitoring & Evaluation | Protection Mainstreaming: Impact Score Card | Operational partners | Score Card to assess the impact of having mainstreamed protection on affected populations |

PROTECTION MAINSTREAMING MONITORING INDICATORS

TOOL #A0 – PROTECTION MAINSTREAMING MONITORING INDICATORS

The following list consists of a catalogue of suggested monitoring indicators that can be used by coordination structures or operational organisations to monitor their protection mainstreaming activities and commitments. The list is *indicative* and indicators can be adapted to the context of intervention. It is recommended to choose a maximum of 2-3 indicators to avoid an overwhelming monitoring process.

- ➔ **Process indicators** assess the process of protection mainstreaming (whether protection has been mainstreamed according to a series of specific steps throughout the HPC or the Project Cycle). Output indicators represent results that humanitarians control by their actions. Outcome indicators represent results that humanitarians influence by their actions.
- ➔ **Impact indicators** measure the impact of protection mainstreaming (whether activities implemented had a positive or negative impact on the affected populations in terms of safety, dignity, meaningful access, accountability, participation and empowerment).

Process Output Indicators

| Indicator | Means of Verification | PM Tool |
|--|----------------------------|----------------------|
| # of persons trained on Protection Mainstreaming (disaggregated by sex) | Attendance List | N/A |
| % of humanitarian workers reporting that they feel they are given the tools and resources to effectively incorporate protection mainstreaming key elements into their work/project | Staff Assessment | Tool #B4 |
| # of Protection Analysis identifying threats, vulnerable groups, and capacities/coping mechanisms conducted and shared by the Protection Cluster | Protection Analysis Report | Tool #A1 |
| % of ICCG/HCT meetings that have discussed protection as a standing agenda point | Meeting Minutes | N/A |
| % of HCT documents with reference to promoting protection mainstreaming as a priority (HCT Protection Strategy, HRP etc...) | HCT Documents | N/A |
| % of HNO/HRP documents reflecting the protection risks and priorities identified by the Protection Cluster | HNO/HRP Document | N/A |
| % of HNO/HRP documents which include sex, age and disability disaggregated data | HNO/ HRP Document | N/A |
| % of clusters/sectors/organisations with protection mainstreaming focal points designated to promote/ strengthen protection mainstreaming in their cluster/sector/organisation | List of Focal Points | N/A |
| % of clusters/sectors/organisations strategies with planned activities/actions on protection mainstreaming | PM Action Plan | Tool #A2 |
| % of Pooled Fund Allocation Paper including protection mainstreaming as a cross-cutting objective/requirement | Allocation Paper | N/A |
| % of project proposals which explain how the project will take into consideration or respond to the protection risks identified and/or protection mainstreaming principles | Project Proposal | Tool #A3 |
| % of projects which have disaggregated indicators (sex, age, disability disaggregation) | Project Proposal | Tool #A3 Tool #B3 |
| % of projects which have protection mainstreaming activities included in the budget | Project proposal | Tool #A3 |

Process Outcome Indicators

| Indicator | Means of Verification | PM Toolkit |
|---|------------------------|------------|
| % of people trained on protection mainstreaming who demonstrate an increase of knowledge and understanding | Pre/post Training Test | N/A |
| % of humanitarian workers reporting that protection mainstreaming is relevant and important to their work | Staff Assessment | Tool #B4 |
| % of humanitarian workers reporting that they take protection mainstreaming key elements into account in their work/project | Staff Assessment | Tool #B4 |
| % of humanitarian workers declaring they know what to do in case they witness the violation of a beneficiary's right | Staff Assessment | Tool #B4 |
| % of ICCG/HCT meetings which have recorded follow-up actions points related to protection mainstreaming | Meeting Minutes | N/A |

| Indicator | Means of Verification | PM Toolkit |
|---|-----------------------|---------------------|
| % of planned actions from the protection mainstreaming actions plans implemented | PMAP Monitoring | Tool #A2 / Tool #B5 |
| % of committees set up to manage facilities and service delivery that are operational and representative | Committees ToRs | N/A |
| % of complaint and feedback mechanisms accessible to all groups in a confidential manner | CFM Protocols | N/A |
| % of complaints which have been responded to or forwarded to the appropriate actor | FGD / Survey | Tool #B7 |
| % of programmes decisions based on the participation of all targeted groups | FGD / Survey | Tool #B7 |
| % of beneficiaries reporting they understand their rights and obligations as recipients of humanitarian aid (sex, age, disability disaggregation) | FGD / Survey | Tool #B7 |
| % of beneficiaries reporting they understand how humanitarian services were prioritized and selected (targeting criteria) | FGD / Survey | Tool #B7 |
| % of the affected population reporting being aware of how to use the feedback and complaints mechanism | FGD / Survey | Tool #B7 |

Impact Indicators (ECHO Protection Sector Key Result and Outcome Indicators – Protection Mainstreaming)

| Indicator | Means of Verification | PM Toolkit |
|--|-----------------------|------------|
| % of communities reporting that humanitarian assistance meets their priority needs. | FGD / Survey | Tool #B7 |
| % of communities reporting that they know how to access humanitarian assistance. | FGD / Survey | Tool #B7 |
| % of communities reporting that they feel involved in the way the humanitarian assistance is provided. | FGD / Survey | Tool #B7 |
| % of communities reporting that the most vulnerable and in need population is receiving humanitarian assistance. | FGD / Survey | Tool #B7 |
| % of communities reporting that humanitarian assistance is delivered in a safe and dignified manner. | FGD / Survey | Tool #B7 |
| % of communities reporting that they have meaningful access to services. | FGD / Survey | Tool #B7 |

PROTECTION MAINSTREAMING TOOLS FOR COORDINATION STRUCTURES & DONORS

TOOL #A1 – PROTECTION ANALYSIS REPORT

This template is an example and can be used by the Protection Cluster to gather necessary information on protection threats, particularly vulnerable groups and existing capacities. This template can differ from one operation to the other (Field Protection Cluster may already have similar tools) and should be adapted to each context. It can be used as a guide to collect the main information needed to produce a comprehensive Protection Analysis. This tool could also be adapted in consultation with other clusters.

Section 1 – Introduction: Provide a general description of the community (population characteristics), location, and humanitarian needs identified.

Section 2 – Threats: Provide a mapping of existing threats/tensions in the area of intervention.

- *Threats:* Prioritization and description of the main threats
- *Causes/Pattern:* Description of the reasons
- *Actors:* Interests, positions, capacities
- *Impact:* Description of the consequences

Section 3 – Vulnerabilities: Highlight the main groups affected by the threats identified in section 2.

- Types of individuals and groups targeted by the threats
- Vulnerability factors (gender, age group, ethnicity, religion, or other relevant criteria)

Section 4 – Capacity and Coping Mechanisms: Identify how the affected groups respond to and cope with the threats identified.

- Coping mechanisms (positive and negative)
- Willingness and capacities of local authorities to deal with the threats
- Availability and accessibility of basic services

Section 5 – Other Protection Information: Highlight other protection information relevant for the programme/sector/area of intervention.

Section 6 – Recommendations: Provide recommendations to mitigate protection risks, including potential area of engagement and needed interventions.

Section 7 – Annexes: Add the following document to the Protection Analysis Report.

- Protection Cluster 4Ws/5Ws (Who Does What When Where for Whom).
- Other protection mappings, assessments or monitoring reports undertaken by the Protection Cluster or other Protection actors.

TOOL #A2 – PROTECTION MAINSTREAMING ACTION PLAN (PMAP)

The PMAP is a tool available in the GPC Protection Mainstreaming Training Package¹⁴. A PMAP Monitoring System with a colour code has been added to measure the progress of the implementation of the planned actions by the Clusters Members.

| | |
|---------------------------|--|
| Cluster | |
| Location / Country | |
| Date PMAP | |
| Last reviewed | |

| | | | | | | | |
|---|-------------------|-----------------|---------------------------|---------------------------|----------------------|-------------------------------|--|
| Protection Mainstreaming Principle | | | | | | | |
| Indicator | | | | | | | |
| Planned Activity to Mitigate Protection Risks Identified in the Protection Analysis (Tool #A1) | Start Date | End Date | Responsible Person | Resources Required | Cost Estimate | Progress (Colour Code) | Implementation Outcome and Corrective Measure |
| 1.1 | | | | | | | |
| 1.2 | | | | | | | |
| 1.3 | | | | | | | |

Colour Code

- Measure implemented with success
- A problem occurred during the implementation (due to a change in the environment, time constraint, etc.)
- Measure not implemented and should be further assessed

¹⁴ Global Protection Cluster (GPC), *Protection Mainstreaming Training Package*, 2014, Resource 20: Mainstreaming Action Plan, p.223

TOOL #A3 – PROTECTION MAINSTREAMING IN FUNDING ALLOCATION: PROCESS SCORE CARD

This template should be used to assess during the allocation process the quality of project proposals submitted for funding in terms of protection mainstreaming.

| | |
|---------------------------------|--|
| Name of the Organisation | |
| Proposal Title | |
| Location / Country | |
| Donor / Review Board | |
| Assessment Date | |

| | REVIEW QUESTION | ANSWER | SCORE | TOTAL |
|--------------------|--|------------------------|-------------------|------------|
| 1 | Project Proposal Review | | | |
| 1.1 | If available, the project proposal makes reference to a Protection Analysis identifying the protection threats, vulnerable groups and existing capacities? | Yes Partially No | (2) (1) (0) | /16 |
| 1.2 | The project proposal explains how the organisation will take into consideration or respond to the protection risks identified. | Yes Partially No | (2) (1) (0) | |
| 1.3 | The organisation prioritized the safety and dignity of beneficiaries and considered the principles of Do No Harm in the proposed project | Yes No | (2) (0) | |
| 1.4 | The proposed project enables equal and impartial access to assistance and services and the targeting of vulnerable groups and people with specific needs. | Yes Partially No | (2) (1) (0) | |
| 1.5 | Beneficiaries and affected populations have been involved in the different stages of the project: needs assessment and project design. | Yes No | (2) (0) | |
| 1.6 | Specific mechanisms will be put in place to enable beneficiaries and affected populations to provide feedback and complaints. | Yes No | (2) (0) | |
| 1.7 | Project proposal includes specific activities to address differentiated needs of women, girls, boys and men, boys, or other identified vulnerable group. | Yes Partially No | (2) (1) (0) | |
| 1.8 | Programme staff have been/will be trained on protection mainstreaming principles. | All Some None | (2) (1) (0) | |
| 2 | Budget Proposal Review | | | |
| 2.1 | The budget allows for activities to be implemented in a way that promotes the safety, dignity, access and participation of the affected population*. | Yes No | (2) (0) | /2 |
| 3 | Reporting Proposal Review | | | |
| 3.1 | Project indicators have systematically been disaggregated by sex, age and disability as well as other context-specific vulnerable groups. | Yes No | (2) (0) | /2 |
| TOTAL SCORE | | | | /20 |

* Example: The budget available for latrines construction includes the possibility to build disability-friendly latrines.

Ranking:

| | | | |
|-------------------------------|------------------------------|---|---|
| Below 5 | Between 5 and 9 | Between 10 and 15 | Above 15 |
| Protection isn't mainstreamed | Improvements need to be done | Acceptable level of protection mainstreaming, improvements possible | Excellent level of protection mainstreaming in the project proposal |

| |
|---------------------------|
| Comments/Recommendations: |
|---------------------------|

TOOL #A4 – PROTECTION MAINSTREAMING IN FIELD CLUSTERS: PROCESS SCORE CARD

This template can be used collectively to evaluate the mainstreaming of protection in the cluster system at the country level. This tool should be used by the Inter-Cluster Coordinator in collaboration with all Cluster Coordinators and filled in as a collective exercise during an ICCG meeting.

| | |
|-----------------------------------|--|
| Entity | |
| Name / Title of Respondent | |
| Location / Country | |
| Date | |

| | REVIEW QUESTION | ANSWER | SCORE | TOTAL |
|-------------|--|------------------------|-------------------|-------|
| 1 | Has the Protection Cluster developed a Protection Analysis identifying protection threats, vulnerable groups, and capacities/coping mechanisms? | Yes Partially No | (2) (1) (0) | |
| 2 | Has the Protection Cluster supported other clusters in mainstreaming protection, either in the form of training, identifying focal points, raising awareness, or defining action plan? | All Some None | (2) (1) (0) | |
| 3 | Has the ICCG facilitated a discussion and reached a common understanding with all clusters on the outcomes of the Protection Analysis presented by the Protection Cluster? | Yes Partially No | (2) (1) (0) | |
| 4 | Does the HNO include a protection risk analysis and disaggregated data on vulnerable groups or individuals at risk? | Yes Partially No | (2) (1) (0) | |
| 5 | Have protection risks and priorities identified in the HNO/HRP been reflected into clusters strategies / work plans? | Yes Partially No | (2) (1) (0) | |
| 6 | Have clusters and the ICCG promoted the use of the available protection mainstreaming tools, guidance and resources for their members? | Yes Partially No | (2) (1) (0) | |
| 7 | Have clusters and the ICCG monitored the impact of having mainstreamed protection into sector-specific programming? | Yes Partially No | (2) (1) (0) | |
| 8 | Has the ICCG/HCT made advocacy efforts to consider protection mainstreaming a requirement to receive a Pooled Fund Allocation? | Yes No | (2) (0) | |
| 9 | Has protection been regularly (at least once every quarter) included as a standing agenda item in ICCG/HCT meetings? | Yes No | (2) (0) | |
| 10 | Is protection mainstreaming promoted in the HCT Protection Strategy (or other HCT documents) and in advocacy efforts? | Yes Partially No | (2) (1) (0) | |
| TOTAL SCORE | | | | /20 |

Ranking:

| Below 5 | Between 5 and 9 | Between 10 and 15 | Above 15 |
|-------------------------------|------------------------------|---|--|
| Protection isn't mainstreamed | Improvements need to be done | Acceptable level of protection mainstreaming, improvements possible | Excellent level of protection mainstreaming in the cluster system in the country |

Comments/Recommendations:

PROTECTION MAINSTREAMING TOOLS FOR OPERATIONAL ORGANISATIONS

TOOL #B1 – BENEFICIARY ASSESSMENT (BASELINE)

Objective of the Assessment

The objective of this survey is to assess beneficiary perceptions and experiences in terms of safety, dignity, access and participation at the beginning of the project. The assessment should be used to better understand the protection risks and identify how the organisation can avoid causing harm to the community through their intervention. The assessment also aims at identifying prevention and mitigation measures to those risks.

Methodology

The methodology chosen to conduct this assessment is **at the discretion of the organisation** depending on the time and resources available as well as the context of intervention. It can be done through Focus Group Discussion, Household Survey and/or Key Informant Interviews. Please consult Annex 2 – Key Informant Interviews Do/Don't and Annex 3 – Focus Group Discussion Methodology for further details on the methodology.

Key Terminology

It is important to introduce key terminology before starting the assessment, so that everyone understands the terms that will be used during the discussion. **Feel free to adapt the terminology to your context of intervention.**

- **Access:** For a service to be accessible it must be available in sufficient quantity and quality, provided on the basis of needs and without discrimination, be physically and financially accessible and known of by the community, whilst being culturally appropriate and sensitive to age and gender needs and requirements.
- **Safety:** It describes the condition of being protected against physical and psychological harm.
- **Dignity:** It describes the fact that people have a right to be valued, respected and receive ethical treatment. The emotional experience of a person is as important as their physical safety, and often human rights violations can be humiliating for a person, affecting their sense of self-esteem and of human dignity.
- **Participation:** A concept describing gathering people's perspectives and opinions and involving the community in decision-making.

Introduction

“Good morning /afternoon. My name is _____ from _____. We are conducting interviews / FGDs to better understand the protection risks and identify how we can avoid causing harm to the community and promote participation and meaningful access to services through our intervention.

Explain the objectives of the assessment to the participants:

- We want to know who can access services, and who cannot.
- We want to know why some people are not able to access services and what can be done about it.
- We want to hear whether people feel safe when receiving assistance.
- We want to know whether people feel that they are respected by the service providers, that their opinions are considered and that they have participated.

Participation is voluntary and no remuneration is offered. If you do decide to take part, you can refuse to answer any questions and may stop the interview at any time. All information collected remains confidential and no names are collected. Do you accept to participate?”

Questionnaire

Beneficiaries may answer several questions at once. For example, they may claim that a lack of safety in the area is an obstacle to accessing a particular service. This would provide answers for both sections 1 & 2. The enumerator should be mindful that the questionnaire **should not be rigidly interpreted**. The questionnaire is a guide of questions to lead the discussion. There is no particular order and the questions can be adjusted as the discussion goes along with participants.

All answers should be disaggregated by categories (men, women, boys, girls, older people, persons with disabilities and context-specific vulnerable groups).

| 1 | Access |
|--------|--|
| 1.1 | <p>What services are being provided by humanitarian organisations in your community?</p> <p><i>Facilitator Notes: If everybody has answered but the facilitator knows there are more services available to them, consider probing by asking whether they know about those services (e.g. Health, education, food, livelihood, shelter, wash, protection, legal, GBV)</i></p> |
| Answer | |
| 1.2 | <p>Do you feel you are able to reach and use the services provided by humanitarian workers whenever you like/choose/need it? If yes, please elaborate. If no, proceed to next question</p> |
| Answer | |
| 1.3 | <p>What problems have you experienced in accessing the services provided?</p> <p><i>Facilitator Notes: If multiple services/sectors are available, consider asking the question multiple times for each service. Services include anything that is meant to benefit individuals. This can include but is not limited to Health Facilities, Food Distributions, WASH Services, Shelter, Sensitization Sessions, and Participation Activities. Feedback, Complaints, and Response Mechanisms are also considered a service. When recording the answers, see if they correspond to any identified barriers to access (e.g. physical access, economic barriers, social or cultural barriers, discrimination, lack of information, unavailable services).</i></p> |
| 1.4 | <p>Do you feel the services are being provided equally and fairly to all people? If no, please specify which groups are excluded from accessing the services and why.</p> |
| 1.5 | <p>What could be done to improve access to services? By whom?</p> |

| 2 | Safety & Dignity |
|--------|--|
| 2.1 | <p>How do you feel about safety when accessing services? Have you ever felt threatened when accessing services? If yes, please elaborate. N.B: Threats could be either when receiving a service, on your way to receiving a service, or after you received it</p> <p><i>Facilitator Notes: Consider that safety in this context could include physical violations, coercion, deliberate deprivation, threats, and bribery. Threats to safety can come from any sources. It could come from armed groups, humanitarian actors, or the environment (e.g. standing in the sun on a hot day, crossing a river to access a service).</i></p> |
| Answer | |
| 2.2 | <p>What could be done to improve safety when accessing services? By whom?</p> <p><i>Facilitator Notes: Probe about community, agency and government.</i></p> |
| Answer | |
| 2.3 | <p>Describe how you feel about the way services are delivered.</p> <p><i>Facilitator Notes: Consider probing about respect, confidentiality, or consideration by staff. Possible follow-up questions: Do you feel respected? Do you feel that your opinion is considered by the staff? Do you feel that your dignity is respected when you access a service? If yes, please elaborate. If no, what concerns have you experienced?</i></p> |
| Answer | |
| 2.4 | <p>What could be done to improve dignity in services provision? By whom?</p> |
| Answer | |

| 3 | Participation |
|--------|--|
| 3.1 | <p>Have you been involved in decision-making processes around the services provided in your community by humanitarian organisations? If yes, how have you been involved?</p> <p><i>Facilitator Notes: Consider probing about participation at different stages of the project cycle (e.g. assessment, design, implementation, or monitoring & evaluation).</i></p> |
| Answer | |

| | |
|--------|--|
| 3.2 | If you are unhappy about any aspect of the services/work delivered by humanitarian organisations in your community – including staff conduct or problems of access, safety, and dignity – do you know how to give feedback or complaint? <i>Facilitator Notes: Consider probing for areas of dissatisfaction.</i> |
| Answer | |
| 3.3 | How do you provide feedback and complaints about services in your community? |
| Answer | |
| 3.4 | In your community, do you feel that the community's feedback and complaint are being considered and responded to? |
| Answer | |
| 3.5 | What could be done to better include your views and perspectives in humanitarian programming? |
| Answer | |

Closure

Reiterate to the participants that the information collected shall be used to help humanitarian actors to deliver aid in the community. Please ensure you clarify that the assessment is by no means a commitment to support all the needs of the community. Thank the participants for their contribution.

Reporting

The findings of the beneficiary assessment can be used to complete Tool#B2.

TOOL #B2 – PROTECTION RISK & MITIGATION MEASURES MATRIX

This template should be used to present the protection risks identified for the specific sector/project and their related prevention and mitigation measures identified through consultation with the affected population. The findings of the Beneficiary Assessment (Tool #B1) can be used to complete the following table.

The following questions can help identify the main issues that came out of the discussion with beneficiaries.

- What kind of threats did beneficiaries say they encounter when accessing services? Where are these threats coming from? What solution did beneficiaries propose?
- What kind of barriers did beneficiaries encounter when accessing services? What solutions did beneficiaries propose?
- Do beneficiaries participate in the decision making around project design and implementation? How would beneficiaries like to participate?
- Do beneficiaries know how to submit feedback and complaints? Do they have suggestions on how to improve this?

| SECTOR | ACTIVITY | PROTECTION RISKS | MITIGATION MEASURES |
|--------|----------|------------------|---------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
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| | | | |
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| | | | |

TOOL #B3 – PROJECT DESIGN ASSESSMENT

This template should be used to score the project proposal according to its alignment with Protection Mainstreaming Principles.

Please circle the response that most reflects the situation, based only on what is written in the proposal or annexes. Where possible please provide additional information / comments on the multiple choice selection you make. This information will be very useful in forming project design and implementation, and can also be reviewed during a grants opening meeting. Ideally, the individual completing this assessment will also have been trained on Protection Mainstreaming. There are four sections do this assessment, looking at 1) needs assessment and outcomes, 2) project activities, 3) feedback mechanisms and response, and 4) monitoring indicators.

For the purpose of this assessment “context-specific population groups” refers to any potentially vulnerable or marginalized group which has a defining characteristic other than age, gender and disability (e.g. ethnic/religious minorities, people living with HIV, LGBTI individuals, political affiliation etc.).

| | |
|------------------------------------|--|
| Name / Title of Respondent | |
| Date of Assessment | |
| Proposal Name | |
| Proposal Location / Country | |
| Proposal Donor | |
| Gender Marker Code | |

| | QUESTIONS | MULTIPLE CHOICE OPTIONS |
|----------|---|--|
| 1 | Focus on project needs assessments and project outcomes within proposal design | |
| 1.1 | Does the needs assessments used to inform the project design consider the specific needs of different population groups? | A: Do not mention the specific needs of different categories of the population. B: Consider the specific needs of context-specific population groups, but not of different age, gender and disability groups. C: Consider different age, gender and disability groups, but not context-specific population groups. D: Consider all age, gender and disability groups & context-specific population groups. |
| 1.2 | Were different population groups consulted in the needs assessment and project design process? | A: The population was not consulted or no evidence provided either way. B: Yes for context-specific population groups, no for different age, gender and disability groups. C: Yes for different age, gender and disability groups, no for context-specific population groups. D: Yes for all age, gender and disability groups & context-specific population groups. |
| 1.3 | Do project outcomes specifically seek to address inequalities or protection threats (i.e. violence, coercion, exploitation, deprivation, or neglect)? | A: No B: Yes, project outcome(s) address inequalities or protection threats for context-specific population groups, but not specifically for different age, gender and disability groups. C: Yes, project outcome(s) address inequalities or protection threats for different age, gender and disability groups, but not specifically for context-specific population groups. D: Yes, project outcome(s) address inequalities or protection threats for age, gender and disability groups and context-specific population groups. |
| 2 | Focus on project activities within planned interventions | |
| 2.1 | Do project activities identify and address barriers to access that different population groups could face in relation to the project? | A: No B: Yes for context-specific population groups, no for different age, gender and disability. C: Yes for different age, gender and disability, no for context-specific population groups. D: Yes for all age, gender and disability groups & context-specific population groups. |
| 2.2 | Do project activities identify and address physical and psychological threats that different population groups could face in relation to the project? | A: No B: Yes for context-specific population groups, no for different age, gender and disability. C: Yes for different age, gender and disability, no for context-specific population groups. D: Yes for all age, gender and disability groups & context-specific population groups. |

| | QUESTIONS | MULTIPLE CHOICE OPTIONS | | | |
|-------------|---|--|--------------|--------------|--------------|
| 2.3 | Do project activities describe a concrete plan for involving different population groups in as many stages of the programme cycle as possible? | A: No B: Yes for context-specific population groups, no for different age, gender and disability. C: Yes for different age, gender and disability, no for context-specific population groups. D: Yes for all age, gender and disability groups & context-specific population groups. | | | |
| 2.4 | Do project activities describe how different beneficiary population groups will be provided with information about planned project activities, and about how delivery is progressing? | A: No B: Yes for context-specific population groups, no for different age, gender and disability. C: Yes for different age, gender and disability, no for context-specific population groups. D: Yes for all age, gender and disability groups & context-specific population groups. | | | |
| 3 | Focus on project feedback / complaint mechanisms | | | | |
| 3.1 | Does the project design include the provision of accessible and functioning feedback / complaint mechanisms for beneficiaries to comment on the services they are provided with? | A: No B: Yes, but there is no explanation about how access will be ensured for different population groups. C: Yes, and there is an explanation for how different age, gender and disability groups will access those mechanisms. D: Yes, and there is an explanation for how age, gender and disability groups and context-specific population groups will have access. | | | |
| 3.2 | Does the project design include information about how feedback / complaints mechanisms will be handled? | A: No B: Yes, but there is no information about how the response to feedback will respect the safety and dignity of different population groups. C: Yes, and there is an explanation for how age, gender and disability groups' safety and dignity will be respected in response to feedback. D: Yes, and there is an explanation for how different age, gender and disability groups and context-specific population groups' safety and dignity will be respected in response to feedback. | | | |
| 4 | Focus on monitoring indicators within planned interventions | | | | |
| 4.1 | Are project monitoring indicators disaggregated? | A: No B: Yes, by context-specific population groups, but not different age, gender and disability groups. C: Yes, by age, gender and disability, but not for context-specific population groups. D: Yes, by age, gender and disability, and by context-specific population groups. | | | |
| 4.2 | Do project monitoring indicators measure access, safety, and dignity of beneficiaries? | A: No B: Yes, but there is no information about how different population groups will participate. C: Yes, and there is an explanation for how different age, gender and disability groups will participate. D: Yes, and there is an explanation for how different age, gender and disability groups and context-specific population groups will participate. | | | |
| TOTAL SCORE | | Number of A: | Number of B: | Number of C: | Number of D: |

Ranking

| | |
|--------|---|
| A | Project Amendment Required – Referral to technical specialist recommended for project amendment |
| B or C | Project Reflects Adequate Evidence of Protection Mainstreaming – Possible review required senior management level |
| D | Project Reflects Exemplary Evidence of Protection Mainstreaming – No adjustments required |

Corresponding Gender Marker Codes

| | |
|----------|--|
| Code N/A | Project has no direct contact with affected populations and does not affect resources, goods or services accessed by affected populations. |
| Code 0 | Majority of A or B answers AND one or more sections have no C or D answer. |
| Code 1 | Majority of A or B answers AND at least one C or D answer for each section |
| Code 2 | Majority of C or D answers AND at least one C or D answer for each section |
| Code 3 | Majority of C or D answers AND at least one C or D answer for each section AND Question 1.3 is Answer C or D |

IASC Gender and Age Marker

The new IASC Gender & Age Marker encourages reviewers to assess the strength of programming relevance and identifies whether gender and/or age are consistently considered systematically through the proposal or implemented project. The completed Marker identifies which gender and/or age groups are pertinent and examples of humanitarian practice.

TOOL #B4 – STAFF ASSESSMENT

This template should be used to assess the operational staff knowledge and skillset on Protection Mainstreaming.

Please tick the relevant box (Yes, No, Partially) and provide additional information if applicable.

| | |
|---|--|
| Name of organisation | |
| Location / Country | |
| Name | |
| Gender | |
| Job Title | |
| Time working with the organisation | |

| | QUESTIONS | YES | NO | PARTIALLY | ADDITIONAL INFORMATION |
|---|--|-----|----|-----------|--|
| 1 | Have you ever been trained on Protection Mainstreaming*? | | | | <i>If yes or partially, please specify when/where you were trained</i> |
| 2 | Do you feel that Protection Mainstreaming is relevant or important to your work? | | | | <i>If yes or partially, please explain</i> |
| 3 | Do you take the Protection Mainstreaming key elements** into account in your work/project? | | | | <i>If no, please explain why not. If yes, please explain which key elements you take into account and provide one example of how you include them into your work</i> |
| 4 | Do you feel you are given the tools and resources (material or other) to effectively incorporate the Protection Mainstreaming key elements into your work? | | | | <i>If no, explain what you would need</i> |
| 5 | Have you ever been trained on the Code of Conduct, including a Child Protection Policy? | | | | <i>If yes, please explain what are the key elements of the Code of Conduct</i> |
| 6 | Have you ever been sensitized on the Policy on Protection from Sexual Exploitation and Abuse (PSEA)? | | | | <i>If yes, please explain what are the key elements of the PSEA</i> |
| 7 | Do you know what you should do in case you witness the violation of a beneficiary's right? | | | | <i>If yes or partially, please explain what you would do for:</i> <ul style="list-style-type: none"> • Sexual exploitation and abuse by a staff • Sexual exploitation and abuse by someone else • Use of child labour by a staff • Discrimination by a staff |

| | QUESTIONS | YES | NO | PARTIALLY | ADDITIONAL INFORMATION |
|----|---|-----|----|-----------|--|
| 8 | Have you been trained on how to deal with protection incidents you witness or hear about? | | | | <i>Please explain what you think you should do if you witness or hear about a protection incident in the field. Do you know if any guidelines that explain this?</i> |
| 9 | In internal or external coordination meetings, do you ever refer to protection mainstreaming key elements or concerns with your colleagues? | | | | <i>If yes, please explain</i> |
| 10 | Are there any challenges to applying Protection Mainstreaming in your work? | | | | <i>If yes, please explain</i> |
| 11 | Do you feel you know enough about how to ensure that the needs of different groups – women, girls, men, boys, people with disabilities, people living with HIV, older people, ethnic minorities, and other vulnerable groups – are met? | | | | <i>If no, please explain</i> |

* Protection Mainstreaming is about minimizing or eliminating the threats to safety and dignity when accessing services; minimizing or eliminating barriers to accessing services; and maximizing the participation and empowerment of beneficiaries throughout the intervention.

** The key Protection Mainstreaming elements are: Safety, Dignity and Do no Harm; Meaningful Access; Accountability; Participation and Empowerment.

TOOL #B5 – PROTECTION MAINSTREAMING ACTION PLAN (PMAP)

The PMAP is a tool available in the GPC Protection Mainstreaming Training Package¹⁵. A PMAP Monitoring System with a colour code has been added to measure the progress of the implementation of the planned actions by humanitarian organisations. The findings of the PMAP should be shared with the Cluster Coordinator and the Protection Cluster.

| | |
|---------------------------------|--|
| Name of the Organisation | |
| Project Code / Title | |
| Location / Country | |
| Date PMAP | |
| Last reviewed | |

| | | | | | | | |
|--|-------------------|-----------------|---------------------------|---------------------------|----------------------|-------------------------------|--|
| Protection Mainstreaming Principle | | | | | | | |
| Indicator | | | | | | | |
| Planned Activity to Mitigate Protection Risks Identified (see Tool #B2) | Start Date | End Date | Responsible Person | Resources Required | Cost Estimate | Progress (Colour Code) | Implementation Outcome and Corrective Measure |
| 1.1 | | | | | | | |
| 1.2 | | | | | | | |
| 1.3 | | | | | | | |

Colour Code

- Measure implemented with success
- A problem occurred during the implementation (due to a change in the environment, time constraint, etc.)
- Measure not implemented and should be further assessed

¹⁵ Global Protection Cluster (GPC), *Protection Mainstreaming Training Package*, 2014, Resource 20: Mainstreaming Action Plan, p.223

TOOL #B6 – BENEFICIARY ASSESSMENT (ENDLINE)

Objective

The objective of this survey is to assess beneficiary perceptions and experiences in terms of safety, dignity, access and participation at the end of a project. This assessment should be used to monitor the impact of a project / intervention on a community.

Methodology

The methodology chosen to conduct this assessment is **at the discretion** of the organisation depending on the time and resources available as well as the context of intervention. It can be done through Focus Group Discussion, Household Survey and/or Key Informant Interviews. Please consult Annex 2 – Key Informant Interviews Do/Don't and Annex 3 – Focus Group Discussion Methodology for further details.

Key Terminology

It is important to introduce key terminology before starting the assessment, so that everyone understands the terms that will be used during the discussion. **Feel free to adapt the terminology to your context of intervention.**

- **Access:** For a service to be accessible it must be available in sufficient quantity and quality, provided on the basis of needs and without discrimination, be physically and financially accessible and known of by the community, whilst being culturally appropriate and sensitive to age and gender needs and requirements.
- **Safety:** It describes the condition of being protected against physical and psychological harm.
- **Dignity:** It describes the fact that people have a right to be valued, respected and receive ethical treatment. The emotional experience of a person is as important as their physical safety, and often human rights violations can be humiliating for a person, affecting their sense of self-esteem and of human dignity.
- **Participation:** A concept describing gathering people's perspectives and opinions and involving the community in decision-making.

Introduction

"Good morning /afternoon. My name is _____ from _____. We are conducting interviews / FGDs to better understand the impact of our programme on your community.

Explain the objectives of the assessment to the participants:

- We want to know if you managed to access services without any barriers.
- We want to know if you felt safe when accessing services and receiving humanitarian assistance.
- We want to know whether you felt respected by the service providers.
- We want to know whether you participated in the decision taken on the project.

Participation is voluntary and no remuneration is offered. If you do decide to take part, you can refuse to answer any questions and may stop the interview at any time. All information collected remains confidential and no names are collected. Do you accept to participate?"

Questionnaire

Beneficiaries may answer several questions at once. The enumerator should be mindful that the questionnaire should **not be rigidly interpreted**. The questionnaire is a guide of questions to lead the discussion. There is no particular order and the questions can be adjusted as the discussion goes along with participants.

All answers should be disaggregated by categories (men, women, boys, girls, older people, persons with disabilities and context-specific vulnerable groups).

| 1 | Access |
|----------|---|
| 1.1 | Is there an operational and representative committee for the management of facilities and service delivery in your community? |
| Answer | |
| 1.2 | Did you have access to the services provided by the project? |
| Answer | |
| 1.3 | Were you aware of the services provided? |
| Answer | |

| 2 | Safety & Dignity |
|----------|--|
| 2.1 | Has your safety been affected by the project? If yes, how (improved, maintained, deteriorated)? |
| Answer | |
| 2.2 | Did the services delivered were respecting your cultural values and practice? Has your dignity has been affected by the project? If yes, how (improved, maintained, deteriorated)? |
| Answer | |

| 3 | Participation |
|----------|---|
| 3.1 | Is there a complaints and feedback mechanism established in your community? Can you access it in a confidential manner? |
| Answer | |
| 3.2 | Do you know how to place feedback and complaints? Have you receive a response to your complaints/feedback? |
| Answer | |
| 3.3 | Have you been informed of your rights and obligations as recipients of humanitarian aid? |
| Answer | |
| 3.4 | Do you know which were the targeting criteria used to access services? Did you understand how beneficiaries were selected? |
| Answer | |
| 3.5 | Have you participated in decision making around the programme (e.g. have you participated in FGD, have you answered questions from surveyors, do you think that the opinions you shared had an impact on the programme/service delivery?) <i>Refer to the participation ladder.</i> |
| Answer | |

Closure

Reiterate to the participants that the information collected shall be used to monitor the programme that has been implemented in their community. Thank the participants for their contribution.

Reporting

The findings of the beneficiary assessment can be used to complete Tool#B8.

TOOL #B7 – PROTECTION MAINSTREAMING PROCESS SCORE CARD

This template should be used to assess the level to which the organisation has followed the steps to effectively mainstream protection.

| | |
|---------------------------------|--|
| Name of the Organisation | |
| Project Code / Title | |
| Location / Country | |
| Date | |

| | QUESTION | ANSWER | SCORE | Total |
|----------|---|-------------------------------------|-------------------|-------|
| 0 | Organisational Commitment | | | |
| 0.1 | Has the organisation developed a Code of Conduct that includes PSEA? | Yes No | (2) (0) | /10 |
| 0.2 | Have staff been trained on Protection Mainstreaming during the last year? | All Some None | (3) (2) (0) | |
| 0.3 | Has the organisation identified Protection Mainstreaming Focal Points? | Yes No | (3) (0) | |
| 0.4 | Is the staffing structure mindful of the demographics in the intervention area (gender-balanced, ethnic and culturally representative)? | Yes No | (2) (0) | |
| 1 | Assessment and Analysis | | | |
| 1.1 | Did you have access to an up-to-date Protection Analysis conducted by the Protection Cluster or other protection organisations? | Yes No | (4) (0) | /10 |
| 1.2 | How useful was the Protection Analysis to understand the protection risks in your area of work? | Very useful Useful Not useful | (2) (1) (0) | |
| 1.3 | Have you undertaken a Beneficiary Assessment to discuss protection risks and mitigation measures with the affected communities? | Yes No | (2) (0) | |
| 1.4 | Has the Protection Risk Analysis & Mitigation Measures Matrix been completed based on the findings of those discussions? | Yes No | (2) (0) | |
| 2 | Project Design | | | |
| 2.1 | Has a Project Design Assessment been completed prior to submitting the new project for funding? | Yes No | (2) (0) | /10 |
| 2.2 | If required, has the project proposal been revised to better align it with key protection mainstreaming principles? | Not required Yes No | (2) (1) (0) | |
| 2.3 | Has a Staff Assessment been completed to evaluate knowledge and skillset on protection mainstreaming? | Yes No | (2) (0) | |
| 2.4 | If required, has the project proposal been revised to include time and resources to conduct protection mainstreaming trainings? | Not required Yes No | (2) (1) (0) | |
| 2.5 | Was a Protection Mainstreaming Action Plan developed? | Yes No | (2) (0) | |
| 3 | Implementation | | | |

| | QUESTION | ANSWER | SCORE | Total |
|-------------|--|----------------------------|-------------------|-------|
| 3.1 | What was the level of implementation of planned actions? | Fully Partially None | (4) (2) (0) | /4 |
| 4 | Monitoring and Evaluation | | | |
| 4.1 | Has the Process Score Card been completed? | Yes No | (2) (0) | /6 |
| 4.2 | Has the Impact Score Card been completed? | Yes No | (2) (0) | |
| 4.3 | Has a Beneficiary Assessment (Endline) been completed? | Yes No | (2) (0) | |
| TOTAL SCORE | | | | /40 |

Ranking

| | |
|-------------------|--------------------------------|
| Below 20 | Protection is not mainstreamed |
| Between 20 and 29 | Needs improvement |
| Between 30 and 35 | Minimum standards reached |
| Above 35 | Outstanding |

| |
|----------|
| Comments |
|----------|

TOOL #B8 – PROTECTION MAINSTREAMING IMPACT SCORE CARD

This template should be used to assess the impact of having mainstreamed protection on affected populations. The responses for the scorecards have to be provided by the community. Ideally, the table should be completed by the same team involved in the initial beneficiary consultation (Baseline). The following scorecard is a template. Similar questions can be tailored and disaggregated for other groups identified as especially vulnerable in the context of intervention.

| | |
|---|--|
| Name of the Organisation | |
| Project Code / Title | |
| Location / Country | |
| Date | |
| Number of participants (disaggregated by gender & age) | |

| | QUESTION | ANSWER | SCORE | TOTAL |
|----------|--|--|-------------------|-------|
| 1 | Security, Dignity & Do No Harm | | | |
| 1.1 | Has the security & dignity of men been affected by the project? | Improved Maintained Deteriorated | (2) (1) (0) | /14 |
| 1.2 | Has the security & dignity of women been affected by the project? | Improved Maintained Deteriorated | (2) (1) (0) | |
| 1.3 | Has the security & dignity of boys been affected by the project? | Improved Maintained Deteriorated | (2) (1) (0) | |
| 1.4 | Has the security & dignity of girls been affected by the project? | Improved Maintained Deteriorated | (2) (1) (0) | |
| 1.5 | Has the security & dignity of older people been affected by the project? | Improved Maintained Deteriorated | (2) (1) (0) | |
| 1.6 | Has the security & dignity of persons with disabilities been affected by the project? | Improved Maintained Deteriorated | (2) (1) (0) | |
| 1.7 | Has the security & dignity of context-specific vulnerable groups* been affected by the project? | Improved Maintained Deteriorated | (2) (1) (0) | |

| | QUESTION | ANSWER | SCORE | TOTAL |
|----------|--|--|-------------------|-------|
| 2 | Meaningful Access | | | |
| 2.1 | Is there an operational and representative committee for the management of facilities and service delivery? | Yes, operational and representative Operational but not representative No committee in place | (2) (1) (0) | /14 |
| 2.2 | Do men and boys have access to services provided by the project? | Full (access at all times) Partial (full access but not always) Limited (at least one has no access) | (2) (1) (0) | |
| 2.3 | Do women and girls have access to services provided by the project? | Full (access at all times) Partial (full access but not always) Limited (at least one has no access) | (2) (1) (0) | |
| 2.4 | Do older people have access to services provided by the project? | Full (access at all times) Partial (full access but not always) Limited (at least one has no access) | (2) (1) (0) | |
| 2.5 | Do persons with disabilities have access to services provided by the project? | Full (access at all times) Partial (full access but not always) Limited (at least one has no access) | (2) (1) (0) | |
| 2.6 | Do context-specific vulnerable groups* have access to services provided by the project? | Full (access at all times) Partial (full access but not always) Limited (at least one has no access) | (2) (1) (0) | |
| 2.7 | Are beneficiaries aware of the services provided? | Fully aware (90% of them) Partially aware (between 50-89%) Not aware (less than 50% of them) | (2) (1) (0) | |
| 3 | Accountability | | | |
| 3.1 | Is there a complaints and feedback mechanism established in the community? | Yes, mechanism operational In place but not operational No feedback mechanism | (2) (1) (0) | /8 |
| 3.2 | Is the complaints and feedback mechanism accessible to all groups (men, women, boys, girls, older people, persons with disabilities, ethnic minority groups, people living with HIV, etc...) in a confidential manner? | Yes, to all groups At times No | (2) (1) (0) | |
| 3.3 | Are beneficiaries aware of how to place feedback and complaints? | Fully aware (90% of them) Partially aware (between 50-89%) Not aware (less than 50% of them) | (2) (1) (0) | |
| 3.4 | Have the complaints/feedback been responded to or forwarded to the appropriate actor? | Always Sometimes No | (2) (1) (0) | |

| | QUESTION | ANSWER | SCORE | TOTAL |
|-------------|---|--|---|-------|
| 4 | Empowerment & Participation | | | |
| 4.1 | Have local authorities regularly been consulted and involved in your project? <i>(If authorities not available, please score 1)</i> | Yes Partially No | (2) (1) (0) | /12 |
| 4.2 | Were beneficiaries informed on their rights and obligations as recipient of humanitarian aid, as part of your project? | Yes No | (2) (0) | |
| 4.3 | Did the community understand how beneficiaries were selected and which were the targeting criteria for your project? | Fully understood Partially understood Did not understand | (2) (1) (0) | |
| 4.4 | How would you categorize the level of participation of the community in programme decisions (use the participation ladder)? | Ownership Interactive Functional Material Motivation Consultation Information Transfer Passive | (6) (5) (4) (3) (2) (1) (0) | |
| TOTAL SCORE | | | | /50 |

Ranking

| | |
|-------------------|---------------------------------------|
| Below 15 | No positive impact |
| Between 15 and 25 | Limited impact |
| Between 26 and 45 | Maintained the protective environment |
| Above 45 | Protective environment improved |

ANNEXES



The table below lists the annexes mentioned throughout the Toolkit:

| Number | Annex | Target User | Description |
|--------|---------------------------------------|--------------------|--|
| 1 | Protection Analysis Methodology | Protection Cluster | Methodology to conduct a protection analysis |
| 2 | Key Information Interview Methodology | All organisations | Tips to conduct KII |
| 3 | Focus Group Discussion Methodology | All organisations | Methodology to conduct FGD |
| 4 | Protection Cases Referral | All organisations | Recommended steps to deal with protection case |

ANNEX 1 – PROTECTION ANALYSIS METHODOLOGY

1. INTRODUCTION

The first step to mainstreaming protection is to highlight and comprehend protection risks. Conducting a Protection Analysis will allow humanitarian organisations to gain the necessary understanding of the context in which they are planning to operate, which will help them later analyse the potential risks linked to their projects. As mentioned in Chapter 1, the Field Protection Cluster has an important role in supporting humanitarian actors (other clusters, operational organisations) to develop protection strategies and to mainstream protection. One of its main responsibilities is the development of a Protection Analysis, which identifies protection threats, particularly vulnerable individuals or groups and existing capacities or coping mechanisms. This exercise is mandatory for every country operation and can be part of the development of the Humanitarian Needs Overview (HNO) or the Protection Cluster Strategy. After the data collection and data analysis, the Protection Cluster with the support of protection expertise should fill out the Protection Analysis Report (Tool #A1). Additional assessment, mapping, monitoring reports should be annexed and made available to all clusters and operational partners. The outcomes of the protection analysis should be regularly presented at ICCG/HCT meetings or through bilateral meetings with organisations with no protection expertise. This guideline is provided to facilitate and assist the Protection Cluster in conducting protection analysis and measuring protection needs.

2. PROTECTION RISK

Quantifying people's protection needs is articulated in terms of threat, vulnerability, and capacity. It is expressed by the following formula: $RISK = THREAT + VULNERABILITY / CAPACITY$.

Threat is the potential for physical or psychological harm and potential barriers to access humanitarian aid and the information needed to make informed decisions by beneficiaries. Perpetrators include armed forces and militia groups, community and family members, and even aid workers. Access can be hindered to facilities by limited mobility. For example, children face the threat of being raped by armed groups.

Vulnerability relates to factors that increase the likeliness of facing threats. This is affected by factors such as gender, age, ethnic/religious group, disability, and the ability to access reliable and verified information. For example, IDPs are more vulnerable due to the fact that they are displaced and are often not represented in local governance mechanisms.

Characteristics shared by vulnerable groups may include:

- Highly **exposed** to – or impacted by – natural or human hazards;¹⁶ e.g. coastal areas are more exposed to typhoons; women and girls are more exposed to gender based violence, etc.
- Highly **susceptible** to the damaging effects of specific hazards; e.g. the health of children and pregnant women can be more negatively impacted by food or water scarcity.
- Having **uncovered needs** that can threaten their dignity, safety and/or survival.
- Having **reduced capacities**, skills or resources to prevent, avoid, cope, endure and/or recover from the negative effects of hazards; e.g. lack of family/community support, difficulties accessing aid due to mobility constraints, etc.
- At risk of or factually facing barriers to access humanitarian aid in natural and manmade disasters, whatever the factors defaulting access may be: **environmental factors** (i.e. non accessible distributions), **personal factors** (e.g. difficulties reaching aid), and being these **recurrent/chronic factors** (e.g. gender, ethnic, disability discrimination are recurrent environmental factors; permanent impairments are chronic personal factors) or **contextual/temporary factors** (geographical discrimination of humanitarian actors is a contextual environmental factor; temporary impairments are contextual personal factors).

Capacities are the strengths both individuals and communities have to keep themselves safe: e.g. designated safe spaces, community plans, linkages with protection-sensitive institutions, awareness of rights and responsibilities, and the ability to communicate with their peers and with aid agencies. For example, women, girls, and boys may use survival sex if they cannot meet their families' basic needs.

In response to the protection risk, intervention can include the follow actions:

- **Decrease the threat:** By focusing on those responsible for the protection risk, perpetrators, and those who can influence either group (change behaviour, thinking, making the threat costly) by focusing on the barriers to access including physical, social, and discrimination barriers.
- **Decrease vulnerabilities:** By adapting daily activities to reduce exposure to risk (time and location), understanding vulnerability factors that are resulting in some groups being more vulnerable than others, and where possible addressing vulnerability factors such as poverty and discrimination through the removal of barriers to information, services and opportunities.
- **Strengthen capacities:** By strengthening community action (movement in groups, community watch groups, building knowledge of legal rights, contingency plans/early warning, and advocacy to people with influence – leaders, local police, providing the right information for people to make decisions).

3. METHODOLOGY

The Protection Analysis is conducted through Desk Review, Key Informants Interviews (KII) and/or Focus Group Discussions (FGD) with the affected population by qualified protection specialist.

To be done by the Protection Cluster with the support of protection organisations.

- Conduct a **Desk Review** to extract and analyse data and information from existing reports, online documents, and previous assessments.
- Conduct **Key Informant Interviews** (KI) with local authorities, local NGOs, community representatives.
- Conduct **Focus Group Discussions** (FGD) to gather information from the affected population.

4. ANALYSIS TOOLS

The risk equation and the inverted tree can be used as analytical tools to highlight and comprehend protection risks. The following information are collected:

¹⁶ Hazard is defined as “a potentially damaging physical event, phenomenon or human activity that may cause the loss of life or injury, property damage, social and economic disruption or environmental degradation. The United Nation for Disaster Risk Reduction. Terminology. 2009

RISK EQUATION = THREAT x VULNERABILITY / CAPACITY

- **THREATS:** What are the protection threats faced by the civilian population? How and why is the civilian population at risk, and by whom?
- **VULNERABILITIES:** Who are the populations and communities at risk? Which individuals and groups are particularly vulnerable and why (consider age, gender, diversity perspective)?
- **CAPACITIES:** What are the mechanisms adopted by the population to cope with the threats? What is the national response (e.g. existing services) to protection risks adopted by the authorities (national, regional, and local) and by the civil society?

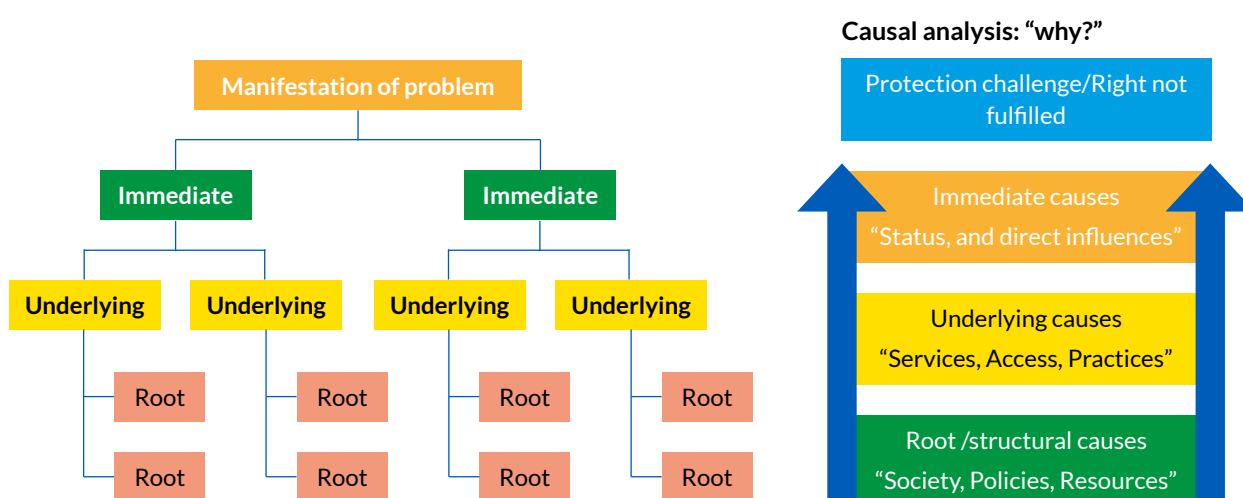
The Inverted Tree

The inverted tree is a tool that facilitates looking closely at the often hidden root causes of a protection concern and distinguishing that from the “effects”, which are usually more visible. Process – wise the problem tree is a tool for consensus building and participation as it requires agreement among participants on the main protection challenges and root causes.

- Immediate causes determine the current status of the problem.
- Underlying causes are often the consequence of policies, laws and availability of resources. They may reveal related complex issues and require interventions that take significant time in obtaining results (at least five years).
- Root/structural causes reveal conditions that require long term interventions in order to change societal attitudes and behaviour at different levels, including those at the family, community and higher decision-making level.

To undertake this analysis, often referred to as causal analysis, the main question to ask is ‘why’. This guides the participants in identifying the immediate, underlying, and root causes.

- Immediate causes refer to the status and direct influences. For example, school fees, distance to school, domestic chores, early marriage, etc. may cause poor school enrolment rates for girls.
- Underlying causes refer to services, access, practices, e.g. education policies favour the better off, discriminatory attitudes towards girls and the poor, little attention to child stimulation in early years, education not seen as valuable.
- Root causes may include gender values, ethnically based discrimination, poor organisation of the civil service, inadequate budget allocations, etc.



5. HONESTY AND INTEGRITY

The credibility of Protection Analysis rests on the accuracy and integrity of data collection. The final report must be accurate and reflect the views of the participants. Assumptions should be avoided and data of any kind should never be falsified.

6. CONFIDENTIALITY

Confidentiality is closely linked to the safety of respondents and ensuring confidentiality protects participants, builds trust, and creates a positive environment, creating a greater likelihood of collecting reliable data. Facilitators and organisations involved must understand that participants are only giving out this kind of information if they trust the facilitators and the organisation responsible for the session. In addition, prior to the sessions, facilitators are mandated to guarantee the participants that information they record will be kept strictly anonymous and confidential. Informed consent from all participants should be requested.

To ensure confidentiality:

- No names should be written on questionnaires. Any necessary identifying information should be kept separately from the survey questionnaires.
- Before starting any FGD or KII, specify that if one participant wants to discuss any specific incident, they should not use any names or other information that could be used to identify the person(s) involved.
- KII and FGDs should be conducted in private, preferably outside the home, away from curious onlookers and where others cannot overhear discussions.
- Have clear policies and procedures in place to guide staff on how to respond if they become aware of, or witness to, abuses and on the confidentiality of related information.
- The facilitators/interviewers should be prepared to switch to less sensitive lines of questioning should the KII or FGD be interrupted.

Interviewing people about painful experiences can evoke strong feelings in both the participants and the facilitators/interviewers, and can lead to emotional responses that can put participants at risk. Respecting basic rules and using common sense in such situations (get out of danger, leave immediately, get assistance, communicate problem to the assessment teams, seek police support) are helpful in managing the emergency situation.

7. NEUTRALITY

Facilitators, staff and organisations responsible for the conducting the FGD must strive towards neutrality and impartiality during the sessions, regardless of any political, religious, social, or clan-based affiliation. It is neither necessary nor appropriate to comment on or defend any local, state, or public policy. There are no right or wrong answers in a FGD and facilitators have to understand that the discussion is a time to listen, and not to inform.

8. TRAINING, SKILLS, AND TECHNIQUES

The Protection Analysis should be conducted by qualified humanitarian staff with protection expertise. Strong communication skills are essential for success in interviewing as they affect the whole participatory process and engage listening skills, coupling both appropriate non-verbal – facial expressions, body language – and verbal expression. In order to conduct successful KII and FGDs, it is important to communicate in a way that the objectives of the assessment/data collection are clearly understood and unrealistic expectations are not created. In addition, the ability to record accurately what participants are saying, as opposed to noting what one might expect to hear or wish to hear, is key. Language of the discussion should be the one in which the participants are most familiar with. Working with interpreters might require additional preparation time to ensure basic tips on interpretation are given.

Social and interpersonal skills include the ability to guide the KII or FGD smoothly and encourage participants' efforts in answering the questions (there is no right answer to a given question; disagreements among participants are as valuable and informative as the answers of particular individuals). Social skills also refer to the assessment team member's ability to be sensitive to cultural issues and behavioural expectations as well as avoiding humanitarian jargon and clinical terms such as "psychosocial trauma". Additionally, specific support may be required for people with disabilities (alternative communication, sign language interpretation, accessibility) or children (creative mediums of art and play).

All interviews should be ended on a positive note with the interviewer reinforcing the respondent's own coping mechanisms and reminding him or her that the information she or he has shared is important and will be used to help other people.

ANNEX 2 – KEY INFORMANT INTERVIEWS METHODOLOGY

Here below are some tips to conduct Key Informant Interviews.

Do:

- Introduce yourself and request permission to carry out the interview. Explain the objective and anticipated outcome of the assessment.
- Ensure the data collection instrument has space for capturing direct observations and notes.
- Choose your key informants well, match knowledge gaps with most probable holders of that information.
- Choose a limited number of critical topics.
- Be alert to non-verbal signs and behaviours which indicate how comfortable the person is with the interview; adjust the topics and time frame accordingly.
- Be consistent. Use the same data collection and analysis methods in each community visited and record data consistently to enable comparative analysis.
- Give voice to all vulnerable groups (e.g. older persons, persons with disabilities, religious and ethnic minorities). In order to do so, ensure the accessibility of venues and engage people with experience in communicating with these groups to support in the assessment.
- Give informants the opportunity to ask questions or share thoughts on additional issues.

Don't:

- Waste time talking as a whole team to one respondent.
- Substitute your direct observation for the respondent's answer or explanation to a question.
- Put the interviewee in a compromising situation. Explain to observers why you want to talk specifically to that person and on what topic.
- Interrogate key informants; rather, let them talk while guiding the conversation.
- Create expectations about future humanitarian support.
- Monopolize the time of individual interviewees.
- Limit yourself to one respondent's information with regards to one topic; rather, triangulate data by asking others until it is possible to confirm consensus or non-consensus on this point.
- Ask questions that may stigmatize people or endanger them.
- Use people's names when collecting information. Ensure the anonymity of the data collected.
- Let a translator answer a question for the interviewee or dominate the interview process.

ANNEX 3 – FOCUS GROUP DISCUSSION METHODOLOGY

1. INTRODUCTION

The primary output of focus group discussions is a report that provides in-depth information on beneficiary perceptions and experience. It is a sensitive exercise that requires qualified staff to conduct it.

2. SELECTION OF PARTICIPANTS

In order to ensure the best output, it is important to create conditions in which the participants will be able to speak up freely and express their opinion. This includes the accessibility of venues, tools and the training received by facilitators to communicate with different type of vulnerable groups.

Age, Gender and Diversity Approach

The FGD should be representative of different categories of the affected population, especially the most vulnerable and marginalized. It is recommended to hold FGDs with at least different age groups, different gender groups, and persons with disabilities.

A common breakup of groups could be:

- FG1: Girls (Aged 8-13)
- FG2: Girls (Aged 13-18)
- FG3: Women (Aged 19-45)
- FG4: Women (Aged 45+)
- FG5: Boys (Aged 8-13)
- FG6: Boys (Aged 13-18)
- FG7: Men (Aged 19-45)
- FG8: Men (Aged 45+)
- FG9: Persons with disabilities
- FG10: Ethnic or Religious Minorities (or other context-specific vulnerable groups)

Participants are selected based on the following guidelines:

- Ideal size for each group session is around 10 participants – two or three extra participants should be invited in case not all invitees show up;
- Participants should be selected with various educational levels, geographic coverage, and social class. Importantly, they should not be related to NGOs or civil society organisations; unless they are from a specific group which is otherwise hard to reach (i.e. from an association of people living with HIV)
- Participants should understand that participation in focus group discussions is completely voluntary, and that they will receive no tangible benefit such as monetary incentives.
- Participants should understand that anything disclosed within the groups remains fully confidential.
- In some communities, participants may feel more comfortable with, or outspoken about, sensitive issues when they are with participants of a homogeneous profile. Depending on the power structure or relationships within the community, focus group sessions according incorporating an age, gender and diversity approach.

3. SELECTION OF FACILITATORS

3.1. Role of facilitators

The organisation running the focus group session should provide the facilitators responsible for conducting the discussions, fulfilling the following roles:

- One facilitator
- One translator / note-taker

By having a dedicated note taker, the lead facilitators can concentrate on having direct contact with participants. The translator/note-taker can assist with time keeping, observe participants to make sure everyone gets a chance to share thoughts or dissenting opinions, and are available to leave the group and provide individual assistance in the event participants become emotionally overwhelmed during the group discussion.

The selection of the facilitator for each FGD is a delicate process. In some contexts, selecting a facilitator with the same demographic profile may deter participants from speaking freely while in others, it creates a conducive atmosphere to discussing sensitive issues. Therefore, except for sessions with women, which should be handled by at least one female facilitator, it is up to the judgement of the humanitarian actors to decide on the best approach for other FGDs.

Note-takers should take notes of the entire discussion including, if possible¹⁷, the information of who said what for both participants and facilitators in chronological order. It is important that note-takers take information of the discussion as accurately as possible.

3.2. Characteristics of qualified facilitators

The characteristics of facilitators are key to producing satisfactory outputs from each focus group session. Below are some of the key profiles each organisation can refer to for facilitators:

- Fluent in the local language;
- Appropriate age level to be able to draw sincere opinions and trust;
- Gender (generally the facilitator should be the same gender as the participants);
- Good verbal and interpersonal skills including when discussing sensitive topics;
- Good listening skills;
- Ability to be non-judgmental and respect the dignity of respondents;
- Ideally previous experience with focus groups or other research activities.
- Training and experience on how to communicate with children, youth and people with difficulties communicating (such as some people with disabilities) would be an asset.

In situations where an experienced facilitator is unavailable, it is important to prioritise the characteristics of being non-judgmental, and avoiding the temptation to offer opinions, agree, or disagree with commentary from participants.

4. ORGANIZING FOCUS GROUPS SESSIONS

4.1. Location

The location where the sessions will be held should be selected bearing in mind neutrality, privacy, and accessibility. The location should be away from noisy or busy areas where participants can speak without fear of being disturbed or overheard.

¹⁷ If including information on the speaker prevents the note-taker from adequately reporting on the session, the identity of the speaker may be omitted.

4.2. Time

Select the time of the day that eases stress levels and optimizes the focus of participants as well as facilitators. Each session should not last more than 1 hour in order to maintain participants' level of concentration. It can be helpful for the assistant facilitator to signal the lead facilitator when particular sessions are lasting too long. The participants of some focus groups may want to share some personal story of their experiences with facilitators after the session. However, the purpose of conducting FGDs is NOT to identify/record specific cases or survivors. This requires a different set of skills and knowledge of what services are available. Lastly, facilitators should secure enough time to review the notes right after the session in order to maintain the accuracy of the record.

5. INSTRUCTIONS FOR THE SESSION

5.1. Before the focus group session

- Explain that all the information will be kept confidential and anonymous, and no names will be used for reporting or analysis.
- All the facilitators and note takers must be familiar with the questionnaire;
- Complete the list of participants as in 1-D-1 of the FGD form by allocating alphabetical codes instead of names, age, gender and ethnic group;
- Ensure facilitators are aware of what services are available, in case a situation arises that requires referral;
- Always begin a FGD by explaining the procedures and objectives of the discussion. Make sure that all participants are aware of who you are, why you are conducting the session, what types of questions you will be asking, and how the information you obtain from them will be used;
- In particular, remind the participants they are not going to receive any financial or other types of direct benefits by participating in the FGD;
- Be certain that all participants understand the format and discussion topics in advance and can choose not to participate if they are in any way uncomfortable; and
- Inform the participants that they are not expected to discuss individual incidents of violence and should NEVER reveal any identifiable personal information such as the names of survivors or perpetrators.

5.2. Ground rules during session

The following ground rules should be discussed with the participants before the main session starts. These ground rules also apply to the facilitators. Those who do not agree should be invited to leave the focus group discussion without being stigmatised.

- Respect each other's privacy and confidentiality. After the FGD is over, do not speak about what was discussed or by whom with anyone, even people who were part of the same focus group session;
- Switch off mobile phones;
- Do not interrupt when someone else is speaking;
- Do not try to convince others or monopolise the discussion;
- Do not share any personal / private information when telling your opinions or stories (e.g. names of offenders etc.). In the case that some participants want to share private stories, facilitators should secure time after the session to meet privately.

5.3. Conducting sessions

Facilitators

- The facilitators should use the list of questions to direct the discussion and cover all the relevant topics while allowing the discussion to flow naturally.
- If facilitators notice that responses from the participants are becoming too general or abstract, encourage them to share some cases or examples to obtain as concrete information as possible. If no one is speaking out on some questions (especially sensitive questions), skip the question and perhaps come back to it later when the group feels more comfortable talking about these issues.
- Facilitators should encourage those who are less verbal to contribute to the discussion: it is the facilitator's responsibility to ensure that one or a few participants do not take control of the discussion.
- At the end of each section, the lead facilitator should summarize the main points of discussion before moving to the next section to have a general consensus of what was discussed (this does not mean the group has to reach a single agreement, it is rather to make sure that there are no misunderstandings).

Co-facilitator / Note-taker

Note-takers concentrate on taking notes, including recording verbal expressions of the participants in chronological order (if there is any significant behaviour or emotional expression, take note of them as well).

5.4. Immediately after discussion

Facilitators, co-facilitators / note-takers, and other staff involved in the session should secure enough time for a meeting right after each session (at least one hour) to go through the entire notes and check any missing points from the notes or any other special observation from the discussion.

ANNEX 4 – PROTECTION CASES REFERRAL

Given the sensitivities of protection issues, a referral form for when other clusters come across protection issues that merit referral to the Protection Cluster is considered good practice. The below Inter-Cluster referral form identified protection concerns that merit referral to the Protection Cluster.

INTER-CLUSTER REFERRAL FORM

Normal Urgent Emergency

Date of Referral: _____

Date of Report (dd/mm/yy)

| | |
|---|--|
| Reported by (Name, position) | |
| Organisation/agency | |
| Contact number of person reporting | |
| Governorate | <input type="checkbox"/> North <input type="checkbox"/> Gaza <input type="checkbox"/> Middle <input type="checkbox"/> Khan Younis <input type="checkbox"/> Rafah |
| Locality and address | |

Background Information (Details of concern(s), allegation(s) or incident(s)? dates, times, problem description, duration, and frequency, services already provided etc.). Describe the specific needs you observed. Why you are referring this particular case? Has client been referred to any other organisations? Specify if the person involved has given consent to refer?

| Tick | Relevant Cluster | Main Needs/Services Requested: (please explain any requested services in the space provided) |
|--------------------------|------------------|--|
| <input type="checkbox"/> | PROTECTION | <ul style="list-style-type: none"> • GBV: domestic/family violence, SGBV (adult and children) • Legal: legal counselling and aid, legal representation, court representation, HLP documentation, Collaborative Dispute Resolution (CDR) processes • Child Protection: injured children, physical violence and other harmful practices, emotional behavioural difficulties including mental health needs, child labour, unaccompanied and separated children, exploitation, and children in conflict with the law. • Psychosocial/Mental Health: mental health disorders, post-traumatic stress disorder, affecting all including adults and children • ERW Risk • Older Persons and Persons with Disabilities (adult and children): accessibility to services/assistance, unaccompanied older/persons with disabilities • Physical, Sexual and Psychological Violence (adult and children) • Neglect (children, older people, and persons with disabilities) |
| <input type="checkbox"/> | SHELTER | Rental assistance, winterization assistance, NFIs, etc. |
| <input type="checkbox"/> | WASH | |
| <input type="checkbox"/> | HEALTH | |
| <input type="checkbox"/> | FOOD SECURITY | |
| <input type="checkbox"/> | EDUCATION | |
| <input type="checkbox"/> | OTHER? | |

| Tick | Sector | Name | Organisation | Email | Mobile Number |
|--------------------------|---------------------|------|--------------|-------|---------------|
| <input type="checkbox"/> | PROTECTION | | | | |
| <input type="checkbox"/> | SHELTER | | | | |
| <input type="checkbox"/> | WASH | | | | |
| <input type="checkbox"/> | HEALTH | | | | |
| <input type="checkbox"/> | FOOD SECURITY | | | | |
| <input type="checkbox"/> | EDUCATION | | | | |
| <input type="checkbox"/> | OTHER CONTACT OCHA: | | | | |

Good Practice

State of Palestine

A joint task force of the Protection Cluster and Health and Nutrition Sector was established to implement a mechanism for health partners to refer protection concerns to relevant actors. The Protection Cluster Child Protection Working Group and the Education Cluster have also worked together on school transportation for communities at risk and established protective presence at identified “at risk” checkpoints where school children have faced difficulties on their journey to school¹⁸.

State of Palestine

Protection actors who are monitoring eviction cases refer the beneficiaries to not only the Legal Task Force (which is part of the Protection Cluster and supports beneficiaries with legal aid) but when cases of trauma and mental suffering of women and children are observed after an eviction, these cases are also referred to the Mental Health and Psychosocial Support (MHPSS) Task Force.

Sample Pakistan Protection Cluster Referral Forum on the GPC Community of Practice¹⁹

| Priority | Referred via: | Referral Date: |
|---|---|----------------|
| <input type="checkbox"/> High (Follow up requested within 24 hours) | <input type="checkbox"/> Phone (High priority only) | |
| <input type="checkbox"/> Medium (Follow up within 3 days) | <input type="checkbox"/> Email <input type="checkbox"/> Fax | |
| <input type="checkbox"/> Low (Follow up within 7 days) | <input type="checkbox"/> In Person | |

| Referred To: | Referred By: |
|--------------|--------------|
| Agency: | Agency: |
| Address: | Address: |
| Phone: | Phone: |

¹⁸ GPC Community of Practice, GPC Cluster Coordination Space, <https://gpccoordinators.unhcrideas.org/Page/ViewIdea?ideaid=20875>

¹⁹ GPC Community of Practice, GPC Cluster Coordination Space, <https://gpccoordinators.unhcrideas.org/Page/ViewIdea?ideaid=20875>

| | |
|-------------------------------|----------|
| Email: | Email: |
| Contact details Focal Person: | Contact: |

| Client Information | | |
|--------------------|------|---------------------------|
| Name: | | |
| Son/ D/of: | DOB: | UNHCR Card/ POR card No.: |
| Address: | Sex: | Nationality: |
| Phone: | | Language: |

| If Client Is a Minor | |
|--|------------------------------------|
| Name of primary caregiver: | Contact information for caregiver: |
| Relationship to child: | |
| Caregiver is informed of referral? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, explain) | |

SPECIFIC NEEDS

| Refer to NGO if: | Refer to UNHCR AND NGO if: |
|--|---|
| Child at risk <input type="checkbox"/> Child with special education needs <input type="checkbox"/> Teenage Pregnancy <input type="checkbox"/> Drug Addiction | Child at risk: <input type="checkbox"/> Survivor of or at risk of abuse/neglect <input type="checkbox"/> Child carer <input type="checkbox"/> Child spouse <input type="checkbox"/> Child engaged in worst form of child labor |
| Woman at risk: <input type="checkbox"/> Pregnant / lactating <input type="checkbox"/> Single woman at risk | Unaccompanied / Separated Children: <input type="checkbox"/> Unaccompanied or separated child <input type="checkbox"/> Child in institutional care |
| Older Person at risk: <input type="checkbox"/> Older person caring for dependents <input type="checkbox"/> Unable to care for self | <input type="checkbox"/> Survivor of Sexual and Gender Based Violence <input type="checkbox"/> Health <input type="checkbox"/> Psychosocial <input type="checkbox"/> Safety/ Security <input type="checkbox"/> Legal/ Justices |

| | |
|---|---|
| <input type="checkbox"/> Single parents (dependents < 18) | Survivor of Torture <input type="checkbox"/> Mental / physical impairment hindering functions in daily |
| Disability <input type="checkbox"/> Moderate mental and/or physical disability <input type="checkbox"/> Severe mental and/or physical disability | Specific legal and physical protection needs <input type="checkbox"/> At risk of physical and/or psychological violence, abuse or neglect or exploitation <input type="checkbox"/> Detained/held in country of asylum <input type="checkbox"/> At risk of exportation |
| Serious medical condition <input type="checkbox"/> Addiction <input type="checkbox"/> Chronic Illness <input type="checkbox"/> Mental Illness <input type="checkbox"/> Difficult Pregnancy <input type="checkbox"/> Critical medical condition (emergency treatment required) | |

Background Information/Reason for Referral: (problem description, duration, frequency, etc.)

| Services already provided: (include any other referrals made) | | |
|---|---------|----------------------|
| Agency | Support | Date (incl. ongoing) |
| | | |

| Services Requested: | | | | |
|--|--|-------------------------------------|------------------------------------|---|
| <input type="checkbox"/> Physical Health | <input type="checkbox"/> Mental Health | <input type="checkbox"/> Protection | <input type="checkbox"/> Education | <input type="checkbox"/> Financial assistance |
| <input type="checkbox"/> Material assistance | <input type="checkbox"/> Home visit | <input type="checkbox"/> Other | | |
| Specify: | | | | |

Consent to Release Information (Read with client and answer any questions before s/he signs below)

I, _____ (client name), understand that the purpose of the referral and of disclosing this information to _____ (referral agency) is to ensure the safety and continuity of care among service providers seeking to serve this family. The service provider, _____ (referring agency), has clearly explained the procedure of the referral to me and has listed the exact information that is to be disclosed. By signing this form, I authorize this exchange of information.

Signature of Responsible Party: _____ (Client or Caregiver if a minor) Date: _____

Details of Referral:

Client has been informed of referral? Yes No (If no, explain)

Client has signed consent to release information? Yes No (If no, explain)

Any contact or other restrictions? Yes No (If yes, explain)

Receiving Organisation:

Referral received by:

Response provided to referring agency by:

Date:

Date:

Referring Organisation:

Case Worker Name/ Designation:

Contact No:

