

# RESOURCE 9: GPC SECTOR CHECKLISTS

## Protection Programs

### Tips for Protection Mainstreaming

Edition 1 (May 2014)

The content for this note is taken mainly from the following sources:

- Minimum Inter-Agency Standards for Protection Mainstreaming (WVI)
- Disabilities among Refugees and Conflict-Affected Populations - Resource Kit for Fieldworkers (WRC)
- Minimum Standards for Child Protection in Humanitarian Action (CPWG)
- GBV Guidelines (IASC)
- Humanitarian Charter & Minimum Standards in Humanitarian Response (Sphere)

This note is divided into three sections, representing the four key elements of Protection Mainstreaming. The content is not meant to be exhaustive, but presents examples of key actions that should be taken to ensure the integration of protection principles *in the delivery of humanitarian assistance*.

Although each action described should be considered throughout implementation, there are some key actions which are especially important to consider during emergencies and during the assessment/project design stage of the project cycle. These are highlighted with the following symbol-codes:

- Emergencies 
- Assessment & Project Design Stage 

Some actions can be sensitive by their nature. In these cases, it is suggested to reach out to a Protection specialist. These are highlighted with the following symbol: 

### Prioritise safety and dignity, and avoid doing harm

- Ensure the location of facilities and the routes to them are distant from threats of violence; especially the risk or threat of gender-based violence (GBV) and attacks from armed groups.

#### Notes:

- *Talk to different groups of community members separately to identify/map safe and unsafe areas (elderly men, elderly women, adult men, adult women, adolescent boys, adolescent girls, boys, girls, disabled males, disabled females, minorities).*
  - *Ensure lighting is provided along the route to minimise night-time risks. Make considerable efforts to light and/or protect unsafe areas and routes. Examples could include installing lights, distributing personal flashlights, incorporating a buddy system, advocating for community watch or security personnel to monitor areas regularly.*
  - *Do not place facilities near possible perpetrators.  **N.B.** The police and armed forces are often seen as perpetrators of violations. Whether they provide a reassuring feeling or instill fear depends on the context. It is important to consult the community and potential beneficiaries about their preferences.*
  - *Arrange appropriate policing if required. *
- Make **infrastructure** adaptations such as fitting ramps and railings to facilities so that all individuals and groups can access and use the facilities in safety and with dignity.
- #### Notes:
- *Use direct observation and discussion groups with persons with disabilities in the community to identify the type of adaptations that are needed.*

- Ensure that **confidentiality and privacy** are respected in all forms of consultation, counseling and personal information sharing.

**Notes:**

- *Ensure rooms are well separated from public spaces or the waiting area.*
  - *If separate rooms cannot be provided, consider establishing a wall or at least put up a curtain.*
  - *Ensure that an information sharing protocol is established so that a survivor of violations will not need to repeat their story, potentially exposing them to further trauma.*
  - *Do not collect information that is not needed to contribute towards promoting the well-being of the individual.*
  - *Talk with women and girls about privacy norms in shared shelters, latrines, wash areas, etc.*
  - *Advocate for, or install, partition walls, doors and locks.*
- Do not share **identifiable information** (e.g. names, addresses, or traits and characteristics about the case that can lead to identification etc.) unless consent has been given by the beneficiary

**Notes:**

- *If requesting consent to collect and use data, make sure the beneficiary is clearly informed of all services and has the capacity to give informed consent (e.g. children or persons with intellectual disabilities may give consent without fully understanding or having the capacity to do so).*
  - *Make sure that data storage is secure and that contingency plans are in place to secure, move or destroy the data in the event that the area must be evacuated.*
- Make sure that only qualified psychosocial workers are on staff to receive and counsel survivors of violations, especially when dealing with children and/or survivors of GBV.

**Notes:**

- *When working with children ensure there are trained child advocates/counselors on staff or who can be easily referred to.*
  - *Ensure that staff are aware of and can easily refer to staff or other service providers who are trained specifically to counsel and support GBV survivors.*
- Make sure that there is a variety of staff (male, female, members of minorities) who have firsthand knowledge of gender and cultural sensitivities.
  - If NFIs or prizes are distributed during awareness-raising sessions, make sure the value of the items do not create tension or added risk for the beneficiaries (e.g. pushing and shoving to reach prizes, theft of the prizes following the event, etc.). Pay special attention to vulnerable groups such as women, the elderly or children.

**Notes:**

- *If valuable gifts are distributed, consider delivering these at home away from the public eye.*
- *Make sure the NFIs are of appropriate size so that women, children, the elderly and the disabled can carry them.*
- *Develop strategies to distribute to population with special needs such as pregnant women, children, single parents with young children, elderly, sick, disabled and marginal populations.*

## Meaningful Access

- Ensure that services are provided at an **adequate time** when individuals can realistically access them.

**Notes:**

- *Consider the provision of services outside of work hours (e.g. working through focal points or providing services at night/on weekends). For example, if a service or registration only takes places from 9:00 to 17:00, what procedures are in place to ensure the protection of individuals arriving at 17:01? Do these procedures take into consideration age and gender? Establish flexible staff schedules to allow them to access key clients within their time schedule and calendar.*
- *Is there 24/7 access to emergency protection services? (e.g. medical care)*
- *Consider the use of mobile technologies for beneficiaries to access services.*

- Ensure that services can be accessed by **women and girls**

**Notes:**

- *Consider that in most contexts, women and girls are restricted from accessing services simply because of their gender. Talk to women and girls directly, and separately from men and boys, to understand what barriers they face. Take into consideration the protection issues that come along with talking to women/girls alone. Have same sex staff. Prepare work with community leaders to ensure access to women and girls alone.*
- Ensure that services can be accessed by **persons with reduced mobility** (e.g. persons with physical disabilities, the elderly, bed-ridden individuals)

**Notes:**

- *Make access paths smooth and fit ramps for wheelchair access. Consider different physical disabilities. Different wheelchairs may require different amounts of space. Artificial limbs may make even relatively short distances difficult. Talk to persons with physical disabilities about what solutions would best fit their needs.*
- *For individuals who cannot access the services, ensure that special arrangements are made to make them available (e.g. mobile counseling centers, home visits).*
- *Recognise that protection issues can be exacerbated for persons with disabilities. Women with disabilities and girls are at higher risk of GBV.*
- *Team up with a local NGO working with persons with disabilities to train staff and mobilise individuals for home counseling and services.*

- Ensure that services can be accessed by **persons with non-mobility-related disabilities** (e.g. the blind, hard of hearing, intellectually disabled)

**Notes:**

- *Provide information about services in both verbal and written form. Consider developing pictorial representations and explanations (e.g. of referral pathways to services)*
- *Ensure that staff are trained to work with individuals with intellectual disabilities, including how to ensure proper confidentiality and informed consent. Local NGOs often already have the technical knowledge.*
- *Recognise that protection issues can be exacerbated for persons with disabilities. Women with disabilities and girls are at higher risk of GBV.*

- Ensure that **Lesbians, Gays, Bi-Sexuals, Transgender, and Intersex individuals** (LGBTI) have access to services

**Notes:**

- *Engage staff in discussions on the inclusion of Lesbian, Gay, Bi, Transgender, and Intersex (LGBTI) individuals in program activities and services. LGBTI individuals are regularly excluded from assistance, often because they believe they will be refused assistance because of their identity. However, unlike other minority groups that are discriminated against or ignored, in many countries, LGBTI individuals risk direct attack and violence or even persecution through national laws. Such attitudes are also prevalent amongst aid workers. At all times, it is important to prioritise safety, and not put individuals at further risk (e.g. It is important to support LGBTI individuals' access to services, but do not reveal their gender identity without their clear consent.)* 

- Ensure that lack of **documentation** does not exclude individuals from accessing services.

**Notes:**

- *Consider that lack of documentation can affect access to services and attendance. E.g. in Pakistan, parents without documentation had no access to food distributions, and sent their children to work instead of school*
- *Some of the most marginalised people are under-schooled or illiterate so may not have school certifications. Consider whether these certifications are absolutely necessary, so that they are not unnecessarily excluded from services.*
- *Beneficiaries should be assisted to obtain documentation or referred to an organisation that does.* 

- Ensure that beneficiaries **know** their rights and **how to assert** them (e.g. accessing your services).

**Notes:**

- *In assessments, lack of awareness about rights and services is regularly identified.*
- *Rights awareness should be provided in sufficient quantity in languages understandable to all beneficiaries, especially to new arrivals in displacement settings.*
- *Consider literacy levels when developing materials for printing. Printed materials should consider literacy levels (e.g. use of pictograms instead of text). Lack of awareness about rights and services is regularly a gap identified in assessments.*

- **Monitor** access and discrimination.

**Notes:**

- *Ensure project indicators (e.g. number of individuals accessing services) are disaggregated by age, gender, and location or specific group (e.g. persons with disabilities, ethnic minorities).*
- *Where possible train the protection committees and beneficiaries to monitor access*
- *Make sure services reach the most vulnerable.*

### Accountability, Participation and Empowerment

- Identify the **power dynamics** within the intervention area. What are the minority groups and who is vulnerable or marginalised? Do they have access to your services?

**Notes:**

- *Consult with the Protection Cluster/ Protection Actors, including the GBV and Child Protection sub-clusters, about power dynamics in the area of intervention.* 🙋⚠️🗉
- *Use this information to inform monitoring activities and identify any barriers to access or discrimination against particular groups.*

- Identify **local authorities and civil society** specialised in working with persons with disabilities. Strengthen and support their role, and learn from them.

**Notes:**

- *Coordinate with specialised agencies to identify low-mobility individuals and include them in the program assistance. Most countries already have national or local NGOs offering services to vulnerable groups. These may not operate in the same areas, but could become a valuable resource for the training of staff and the referral of cases.*
- *Actors operating in the same locality could help mobilizing low-mobility individuals for key activities.*
- *International NGOs working on these issues include Handicap International and HelpAge*

- **Report and share protection concerns** with the Protection cluster, including the GBV and Child Protection sub-clusters. Other actors may be able to provide assistance.

**Notes:**

- *Cases of violations should be referred promptly and in accordance with standard operating procedures established in the area.*

- Make sure to **consult** all layers of society when identifying and responding to Protection needs 🗉

**Notes:**

- *Different criteria may affect the power dynamics in an intervention area. For example, in some places it will be important to consult different socio-economic groups (e.g. ethnic or economic minorities). In all situations, one should include women, men, boys, girls, the elderly, and persons with disabilities to understand their needs and preferences for location, design, and methodology of assistance.*
- *Beyond engaging with and considering the protection needs of different groups, it is also important to involve members in identifying possible solutions. In addition to making the response more relevant and potentially durable, this will build the confidence and self-esteem of the beneficiaries concerned.*

- Find out what are the different community groups' **coping strategies**. Are beneficiaries placing their safety and dignity at risk? Risks must be recognised as soon as possible and interventions undertaken to help people avoid resorting to or mitigating the risk of coping strategies that could have a negative impact. Promote and support self-protection capacities wherever possible.

**Notes:**

- *In one IDP camp, documentation had to be renewed after marriage. The delay caused beneficiaries to stop receiving food rations, which in turn led parents to send their children to work. Actors in the camp successfully campaigned the distribution agency to temporarily continue to deliver food until documentation could be obtained.*
- If protection committees are established, promote **meaningful representation** of all layers of society and that all members are trained on "protection mainstreaming principles".

**Notes:**

- *Members of protection committees can play a key role in identifying issues related to exclusion and discrimination.*
- *It might be necessary to be proactive and actively recruit representation/participation because some segments of the population may not feel that they have the right to speak up and participate even when the door open to them because of cultural norms and marginalisation.*
- Set up accessible, well understood mechanisms for **suggestions and complaints**

**Notes:**

- *Do not assume an "open door" policy is enough. Make sure that there are other possibilities for submitting complaints that do not require the beneficiaries to expose themselves to project staff.*
- *RESPOND to complaints, regardless of whether corrective measures can/need to be put in place*
- *Staff the mechanism with both men and women and ensure it is accessible for children.*
- *Organise awareness raising sessions so that people know the mechanisms works.*

# WASH Programs

## Tips for Protection Mainstreaming

Edition 1 (May 2014)

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This note is meant to be used as part of the GPC Protection Mainstreaming Training. It is divided into three sections, representing the four key elements of Protection Mainstreaming. The content is not meant to be exhaustive, but presents examples of key actions that should be taken to ensure the integration of protection principles in the delivery of humanitarian assistance.

Although each action described should be considered throughout implementation, there are some key actions which are especially important to consider during emergencies and during the assessment/project design stage of the project cycle. These are highlighted with the following symbol-codes:

- Emergencies 
- Assessment & Project Design Stage 

Some actions can be sensitive by their nature. In these cases, it is suggested to reach out to a Protection specialist. These are highlighted with the following symbol: 

### Prioritise safety and dignity, and avoid doing harm

- Ensure, the **location** of EH facilities and routes to them are away from actual or potential threats such as violence; especially the risk or threat of gender-based violence (GBV), and attacks from armed groups.  

#### Notes:

- *Consider installing lights near the latrines, especially if these are communal or away from homes. If lighting is not possible, consider alternatives such as providing torches for each household. Be careful not to put individuals at risk with valuable assets.*
  - *Do not place facilities near possible perpetrators. N.B. The police and armed forces are often seen as perpetrators of violations. Whether they provide a reassuring feeling or instill fear depends on the location. It is important to consult the community and potential beneficiaries about their preferences.*
  - *Consider ways to reduce/manage/cope with these threats, including location, accompaniment (e.g. fetching water in groups, formation of water committees, etc.)*
  - *Arrange appropriate policing if required (e.g. water monitors)*
- Make **infrastructure** adaptations such as ramps and railings to EH facilities so that all individuals and groups can access and use facilities in safety and dignity. Use discussion groups and observation to detect/discuss this and ask the community to come up with solutions.
- **Latrines design** must preserve the safety and dignity of its users.  

#### Notes:

- *If an individual does not feel safe or dignified in using the latrine, (s)he may go elsewhere, potentially exposing themselves or others to harm.*
- *Physically separate and label the latrines "male" and "female".*
- *Ensure latrine design accounts for children (e.g. size of pits may present a safety risk for children).*
- *It is preferable that latrines and showers can be locked from the inside to ensure privacy. Discuss with beneficiaries what they would prefer. Example: Children in one country were reluctant to use traditional sliding locks and had alternative ideas (e.g. wood and nails).*

- **EH facilities design** must preserve the safety and dignity of its users. ⚠️🗺️

**Notes:**

- *Raised platforms and ramps at water points to ensure safe manual lifting to all, especially children, pregnant women, and persons with disabilities.*
- *Discuss latrine/bathing station design with various groups – including children and people with disabilities – and adapt the design, if necessary, to accommodate their specific needs. In one education program, the staff knew that children would need latrines. They did not talk to the children, who it was later found out were afraid of the size of the hole. Children continued to defecate outside the latrines, which created a hygiene problem.*
- *Ensure separate toilet and bathing facilities for males and females. Make sure they are clearly marked in pictorial form and work with the community to ensure they are used by the indicated sex.*
- **Consider that women and children are the most likely to be collecting water**, and might be waiting in the sun for hours for a turn to fill their jerry can. Establish safe and shaded waiting areas where possible.
- *Schedule water collection times to limit overcrowding at the water points; collection in shifts.*
- *Children should not carry jerrycans. However, assuming they will be forced to do so, make sure that jerrycans are not so large as to cause injury.*
- *Ask individuals collecting water when they would prefer taps/pumps to be open. Recognise that different people have different work schedules; women and girls, who are typically the water collectors, have specific times when they are busy making meals.*
- *Ensure that you have discussions on latrine/shower design with various groups and adapt the design, if necessary, to accommodate their specific needs. Topics to discuss include: privacy (make sure 'walls' are providing sufficient/safe cover), that persons with disabilities can access the services without or with minimal additional help. Consult the community on their preferences regarding the design. In one Burmese camp, women requested walls for privacy, but without a locking door, which was felt could create an environment for assault. In several other settings, beneficiaries especially requested locking doors.*
- *Foresee menstrual hygiene needs for women and provide appropriate hygiene materials to individuals and groups with unique needs. Include strategies to dispose of hygiene materials.*
- If setting up EH facilities for displaced communities, consult them as well as host communities about EH needs so as to **avoid community tensions**. Make sure that there is no tension or inequality that could lead to violence and harassment of one group or another. 🗺️

**Notes:**

- *Assess whether inequitable access to water and / or sanitation facilities is causing tension or conflict within the community AND with other surrounding communities.*
- *In camp settings, consider providing services to the local community as well.*
- *Example: In one program, an agency built latrines for IDPs living with the host community. Once the latrines were built, the host community prevented IDPs from accessing the latrines.*
- Ensure **cleaning chemicals** are stored safely (e.g. for cleaning EH facilities)

**Notes:**

- *Children and adolescents can mistake chemicals – especially water purifying tablets – for candy or prophylactics. Proper awareness raising combined with proper storage can prevent improper use.*

### Meaningful Access

- Ensure that the **location** of water points and latrines are accessible to all. 🗺️

**Notes:**

- *Discuss with all representative samples of society (e.g. men, women, girls, boys, elderly, ethnic groups, persons with disabilities) that should have access to the service. Adapt the location to reduce the distance and to ensure that the most vulnerable/marginalised have access.*
- *Considering that most often women and children collect water, talk to them directly about the safety of the location and the routes to the location.*

- Ensure that services can be accessed by **persons with reduced mobility** (e.g. persons with physical disabilities, the elderly, bed-ridden individuals)  

**Notes:**

- *Make access paths smooth and fit ramps for wheelchair access. Consider different physical disabilities. Hand pedal wheelchairs require more space. Artificial limbs may make even relatively short distances difficult. Talk to persons with physical disabilities about what solutions would best fit their needs.*
  - *Install handlebars and removable seats in latrines for persons with disabilities. Permanent seats risk being removed or unused if it does not fit with traditional practice.*
  - *Provide bed pans for bed-ridden individuals.*
  - *If some cannot access the services, ensure that special arrangements are made to bring water to them. It should not be assumed that friends and family will do it, as this can result in children being forced to carry heavy jerrycans. In Darfur, donkey carts were hired to carry water once per week to low-mobility individuals.*
- Ensure that beneficiaries **know** their right to safe drinking water, and where/how to obtain it. 

**Notes:**

- *Rights awareness should be provided in sufficient quantity in languages understandable to all beneficiaries, especially to new arrivals in displacement settings.*
- *Printed materials should consider literacy levels (e.g. use of pictograms or verbal communication instead of text). Lack of awareness about rights and services is regularly a gap identified in assessments.*
- *Consider public private partnership approaches in water service provision in non-emergency settings as this will ensure that right to adequate water is commensurate to responsibility of individuals and communities in ensuring that safe water is provided and maintained*

- **Monitor** access, discrimination, and whether any water or other services are being diverted.

**Notes:**

- *Ensure project indicators (e.g. number of individuals accessing services) are disaggregated by age, gender, and location or specific group (e.g. persons with disabilities, ethnic minorities). *
  - *Compare usage figures to existing demographic data. Discrepancies can tell you which groups do not have access.*
  - *Where possible train the EH committees and beneficiaries to do this. Committees can work with contractors to make sure designs are disability friendly.*
  - *Make sure services are reaching the most vulnerable.*
- Identify what are the **power dynamics** within the intervention area. Who has access to water resources? Who has access to decision-making and the ability to influence decisions on water resources?

**Notes:**

- *Consult with the Protection Cluster/ Protection Actors, including the GBV and Child Protection sub-clusters, about power dynamics in the area of intervention.   *
- *Consult community members on power dynamics as perceived by them and how equity can be achieved in their perspective.*
- *Use this information to inform monitoring activities and identify any barriers to access or discrimination against particular groups. Take this into consideration when determining locations for EH facilities.*

### Accountability, Participation and Empowerment

- Identify **local authorities and civil society** specialised in working with **persons with low mobility or disabilities**. Strengthen and support their role, and learn from their experience how to improve service delivery.

**Notes:**

- *Coordinate with specialised agencies to identify low-mobility individuals and include them in the program assistance. Most countries already have national or local NGOs offering services to vulnerable groups. These may not operate in the same areas, but could become a valuable resource for the training of staff and the referral of cases.*

- *Actors operating in the same locality could help mobilizing low-mobility individuals for key activities.*
- *Notable international NGOs working on these issues include Handicap International and HelpAge.*
- *Ensure inclusion of people with special needs in management committees for EH facilities.*
- Coordinate with local authorities, as well as the education and health sectors to **ensure that public spaces, schools, and health posts also have EH services.**
- Before leaving an area, make sure that the responsible actors and systems for EH facility **maintenance** are in place.

**Notes:**

- *This will involve coordination with local authorities and possibly suppliers, but should focus on community capacities to maintain the structures in place (e.g. EH committees).*
- *In schools, student environment committees can be made responsible to monitor hygiene of EH facilities and report to the persons responsible for maintenance.*
- *Identify patrons in schools to guide activities of the school health/environmental clubs/committees.*
- **Report and share protection concerns** with the Protection cluster, including the GBV and Child Protection sub-clusters. Other actors may be able to provide assistance.

**Notes:**

- *Cases of violations should be referred promptly and in accordance with standard operating procedures established in the area.*
- *Sensitise communities on what constitutes violation.*
- Set up accessible, well understood **mechanisms for suggestions and complaints.**

**Notes:**

- *Do not assume an “open door” policy is enough. Make sure that there are other possibilities for submitting complaints that do not require the beneficiary exposing themselves to project staff.*
- *RESPOND to complaints, regardless of whether corrective measures can/need to be put in place.*
- *Staff the mechanism with both men and women and ensure it is accessible for children.*
- *Organise awareness raising sessions so that people know how it works.*
- *Consider a joint complaints mechanism with other sectors (e.g. Protection) to minimise confusion.*
- Make sure to **consult** all layers of society when identifying and responding to EH needs. 

**Notes:**

- *Different criteria may affect the power dynamics. For example, in some places it will be important to consult different socio-economic groups (e.g. ethnic or economic minorities). In all situations, one should include women, men, boys, girls, the elderly, and persons with disabilities to understand their needs and preferences for location, design, and methodology of EH assistance.*
- *It is not enough to just consider the EH needs of all layers of society. They have to be involved in identifying the solutions. In addition to making the response more relevant and potentially durable, this will build the confidence and self-esteem of the beneficiaries concerned. Example: In one Education program, the staff knew that children would need latrines. They did not talk to the children, who it was later found out were afraid of the size of the hole. Children continued to defecate outside the latrines, which created a hygiene problem.*

- Find out what are the **coping strategies**. Where do people get water when there is shortage? Where do people go to the toilet? Are they placing their safety and dignity at risk? Risks must be recognised as soon as possible and interventions undertaken to help people avoid resorting to negative coping strategies.  

**Notes:**

- *If there is a water shortage, do women travel long distances to get water and are they at risk? Consider accompaniment or water deliveries.*
- *During migration in search pasture and water, are women and children left behind? If so, what are their coping mechanisms then?*
- *Consider learning from local practice. Certain local plants combined with water boiling can create a filtering effect (e.g. Moringa Seeds). Displaced communities especially may not know these techniques that could help mitigate water born diseases in cases of water shortage.*

- Ensure that EH committees are representative of all layers of society (e.g. gender, age, ethnicity, socio-economic group, etc.) and that all members are trained in “protection mainstreaming principles.”

**Notes:**

- *They can play a key role in identifying issues related to exclusion, discrimination.*
- *If at all possible, provide the water committee with guidance on ‘peaceful’ resolution of conflicts (e.g. in managing queues, etc.)*
- *Sometimes it is necessary to be proactive to ensure meaningful participation from groups that don’t traditionally speak out.*
- *Insure that the voice of minority groups is represented in all committees managing EH facilities.*

# CCCM Programs

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Some actions can be sensitive by their nature. In these cases, it is suggested to reach out to a Protection specialist. These are highlighted with the following symbol: 

### Prioritise safety and dignity, and avoid doing harm

- Ensure camps and camp-like settings meet standards for distance from borders and conflict frontlines. Consider safety risks associated with landmines, explosive remnants of war (ERW), and natural hazards. If the area of intervention is mined or contaminated by ERW, please refer to Mine Action working group / organisations.
- Carefully examine risks of violence, especially gender-based violence (GBV), to boys, girls, men and women in their daily activities (e.g. fetching water, going to the market or to school, collecting firewood or getting fuel), and work with them and protection actors to identify preventive measures and responses.
- Ensure that effective security measures are in place, especially at night, such as police and/or community patrols where possible, adequate lighting or other security measures. Monitor high-risk security zones regularly and at different times of day (e.g. around showers, latrines, child-friendly spaces, schools and routes to schools, health facilities, water collection points, etc.).
- Be aware of existing land and property tenure arrangements, including statutory/legislative and customary access rights to land when selecting sites. If the land or property is privately held, consult with relevant stakeholders to obtain authorisation and formal agreement from owners. For technical support, refer to the working group or actors specialised in Housing, Land and Property within the Protection Cluster.
- Be aware of existing tensions between different ethnic, religious or other groups and consider cultural practices within the affected community. Regularly monitor and discuss with beneficiaries if they feel pressured, directly or indirectly, to return to their place of origin or relocate, or if they feel prevented from leaving the camp.

### Meaningful Access

- Treat all displaced persons equitably, regardless of their living situation (i.e. host-families, collective centers, are self-settled in urban or rural locations, or are living in spontaneous sites or planned camps).
- Make sure that a comprehensive registration system is in place, enabling women to be registered in their own name, and provisions are made for child-headed households. Ensure that the purpose of registration is properly communicated to all groups and that effective data protection measures are applied.

- Ensure that information about camp/site facilities and services is accessible to everyone, including persons with disabilities (sensorial impairments) and other persons with specific needs.
- Ensure that the design of the camp/site set-up and services are accessible to all categories of beneficiaries. Carry-out regular spot-checks as part of ongoing monitoring in the camp/site, to collect information – disaggregated by age and sex – from the various services and assistance providers.
- Ensure that service providers consider the needs of different ethnic, racial, national or social groups and ensure that the quality of their services is equitable.
- Ensure that all persons have equal access to work opportunities in the camp. Consult with all actors operating in the camp to determine whether monetary compensation will be offered for work, and ensure consistency in agreed approach. If compensation is offered, ensure equal payment for all persons without discrimination.

### **Accountability, Participation and Empowerment**

- Set-up referral systems in partnership with protection actors to provide an appropriate response and specialised assistance to persons with specific needs. Apply standards on data management and implement measures to secure referral data i.e. to ensure that personal data and lists of beneficiaries of specialist protection interventions are kept confidential and stored in a secured manner to avoid unintended uses.

#### **Notes:**

- *A referral mechanism is not a rigid structure but a dynamic and inclusive process, which should incorporate: a) guidance on how to identify and appropriately treat persons with specific needs and survivors while respecting their rights and giving them power over decisions that affect their lives; b) a protocol or “pathway” to refer persons with specific needs and survivors to local and/or international agencies providing specialist protection and assistance, including medical, psycho-social and legal counselling services.*
- Set-up feedback and complaints mechanism to receive and investigate requests and grievances regarding CCCM interventions, facilities and services at the displacement sites, as well as allegations of intimidation, coercion, violence and sexual exploitation and abuse experienced by women, girls, boys and men in receiving assistance. Respond to all complaints, regardless of whether corrective measures can/need to be put in place.
  - **Notes:**
    - *Note: A complaints mechanism should a) include a standard complaints form; however all complaints should be reviewed, regardless of format; b) give persons submitting a complaint the opportunity to identify themselves whilst respecting their anonymity should they fear retaliation; c) include provisions to submit complaints through a person other than the one about whom the complaint is made; and d) must incorporate appropriate procedures for effective follow-up. The complaints mechanism should be staffed with both men and women, and it should be accessible for children and persons with specific needs.*
- Ensure that camp/site managers and coordinators have signed a code of conduct stating their commitment to respect and foster humanitarian standards and the rights of beneficiaries. Train managers and coordinators on the code of conduct and effectively monitor their adherence to the code. Compliance with the requirement to have a code of conduct is a non-derogatory criterion for the selection of all service providers.
- In partnership with protection actors, identify dedicated focal points and raise awareness about Prevention of Sexual Exploitation and Abuse (PSEA) by UN staff members, related personnel and partners. Provide clear information on the fact that beneficiaries do not have to provide services or favors in exchange for receiving services or accessing facilities.
- Ensure that women, men, girls and boys are fully involved in decisions relating to their situation, such as the development of camp/site policy, management, and site closure.

- Establish appropriate and sustainable mechanisms for meaningful dialogue with different age, gender, diverse groups of beneficiaries. To incorporate the views of persons with specific needs in decision-making processes, designate focal points within camp/site management structures and beneficiaries' committees.
- Ensure that local authorities and host communities are informed, consulted and included in decisions on site location and planning in order to reduce tensions between host communities and displaced populations.
- Involve all categories of affected persons (such as children, persons with disabilities and older persons) in assessments in order to collect accurate information about their specific needs.
- Provide appropriate support to national/local authorities and stakeholders, including capacity building, and encourage government ownership of the protection and assistance strategy for camps and settlements.

# Health Programs

## Tips for Protection Mainstreaming

Edition 1 (May 2014)

The content for this note is taken mainly from the following sources:

- Minimum Inter-Agency Standards for Protection Mainstreaming (WVI)
- Disabilities among Refugees and Conflict-Affected Populations - Resource Kit for Fieldworkers (WRC)
- Minimum Standards for Child Protection in Humanitarian Action (CPWG)
- GBV Guidelines (IASC)
- Humanitarian Charter & Minimum Standards in Humanitarian Response (Sphere)

This note is divided into three sections, representing the four key elements of Protection Mainstreaming. The content is not meant to be exhaustive, but presents examples of key actions that should be taken to ensure the integration of protection principles in the delivery of humanitarian assistance.

Although each action described should be considered throughout implementation, there are some key actions which are especially important to consider during emergencies and during the assessment/project design stage of the project cycle. These are highlighted with the following symbol-codes:

- Emergencies 
- Assessment & Project Design Stage 

Some actions can be sensitive by their nature. In these cases, it is suggested to reach out to a Protection specialist. These are highlighted with the following symbol: 

### Prioritise safety and dignity, and avoid doing harm

- Ensure that the **location** of health facilities and routes to them are away from actual or potential threats such as violence; especially the risk or threat of gender-based violence (GBV), and attacks from armed groups. 

#### Notes:

- *Identify areas in and around the clinic that could be potentially unsafe like dark alleys, proximity to the bush and mount lights or place security around them.*
  - *Consider installing lights near health centers, especially if lighting is not possible, consider alternatives such as providing torches for each household. Be careful not to put individuals at risk with valuable assets*
  - *Do not place facilities near possible perpetrators. N.B. The police and armed forces are often seen as perpetrators of violations. Whether they provide a reassuring feeling or instill fear depends on the location. It is important to consult the community and potential beneficiaries about their preferences.*
  - *Arrange appropriate policing if required.*
- Make **infrastructure** adaptations such as ramps and railings to health facilities and latrines so that all individuals and groups can access and use them in safety and dignity. Use direct observation and discussion groups with persons with disabilities in the community to identify the type of adaptations that are needed.
- Ensure that the health services are **respectful and inclusive of cultural and religious practice**.

#### Notes:

- *Consider the Power Dynamics between health staff and the patient. How can this affect the patient's responses, behavior, and general attitude towards the staff and services provided?*
- *Consider separate waiting areas (male/female).*
- *Employ female health staff members with skills and experience working with women.*
- *Employ health staff members with skills and experience working with children.*

- Ensure that **confidentiality and privacy** is respected in any form of consultation, counseling or personal information sharing.

**Notes:**

- *Ensure examination rooms are well separated from public spaces or the waiting area.*
  - *If separate rooms cannot be provided, consider establishing a dry-wall or at least put up a curtain.*
  - *Ensure that an information sharing protocol is established so that a survivor of abuse will not need to repeat their story, potentially exposing them to further trauma; and all efforts are made to ensure her confidentiality.*
  - *Do not collect information which is not needed to contribute towards promoting the well-being of the individual.*
- Do not share **identifiable information** unless consent has been given by the beneficiary (e.g. names, addresses, or traits and characteristics about the case that can lead to identification, etc.).

**Notes:**

- *If requesting consent to collect and use data, make sure it is properly informed and that the beneficiary has the capacity to give consent (e.g. children or persons with intellectual disabilities may give consent without fully understanding or having the capacity to do so).*
  - *Make sure that data storage is secure and that contingency plans are in place to secure, move or destroy the data in the event that the area must be evacuated.*
- Health facilities need latrines. **design** must preserve the safety and dignity of its users.

**Notes:**

- *Physically separate and label the latrines “male” and “female.” Have separate latrine/toilets for males and females and make sure they are labeled clearly for all literacy levels.*
  - *Ensure latrine design accounts for children (e.g. size of pits may present a safety risk for children)*
  - *It is preferable that latrines and showers can be locked from the inside to ensure privacy. Discuss this with beneficiaries what they would prefer. Example: Children in one country were reluctant to use traditional sliding locks and had alternative ideas (e.g. wood and nails)*
- If setting up Health facilities for displaced communities, consult them as well as host communities about health needs so as to **avoid community tensions**. Make sure that there is no tension or inequality that could lead to violence and harassment of one group or another.

**Notes:**

- *Assess whether inequitable access to health care is causing tension or conflict within the community AND with other surrounding communities.*
  - *In camp settings, consider also providing services to the local/host community.*
- Employ female health **staff** members with skills and experience working with women and children.
  - Put in place guidelines and mechanisms for monitoring and reporting instances of abuse and exploitation.

**Notes:**

- *Ensure all staff sign and adhere to a code of conduct that includes a “whistle blower” policy.*
- *Establish an accessible and well understood mechanism for complaints.*
- *Ensure staff understand and sign the code of conduct.*
- *There should be annual meetings on the code of conduct to remind everyone of their obligations.*

## Meaningful Access

- Ensure that the health facilities are accessible to all

**Notes:**

- *Discuss with all representative samples of society (e.g. men, women, girls, boys, the elderly, ethnic groups, persons with disabilities) that should have access to the services we provide. If necessary, adapt the location to reduce the distance and to ensure that the most vulnerable/marginalised have access. *
- *Consider how seasonal environmental conditions can prevent access to secondary health care centers and hospitals (e.g. floods). Are transport mechanisms in place to make access possible in these conditions?*
- *Organise transport if necessary.  In non-emergency contexts, consider pooled funds for emergency transport services.*

- Ensure that services can be accessed by **persons with reduced mobility** (e.g. persons with physical disabilities, the elderly, bed-ridden individuals)

**Notes:**

- *Make access paths smooth and fit ramps for wheelchair access. Consider different physical disabilities. Different wheelchairs may require different amounts of space. Artificial limbs may make even relatively short distances difficult. Talk to persons with disabilities about what solutions would best fit their needs.*



- *If some individuals cannot access the services, ensure that special arrangements are made to make them available (e.g. mobile health teams).* ⚠️
  - *Team up with a local NGO working with persons with disabilities to train staff and mobilise individuals for home counseling and services.* ♿
- Ensure that services can be accessed **by persons with non-mobility-related disabilities** (e.g. the blind, hard of hearing, intellectually disabled).

**Notes:**

- *Provide information about services in both verbal and written form.*
- *Ensure that staff is trained to work with individuals with intellectual disabilities, including on how to ensure proper confidentiality and informed consent. Local NGOs often already have the technical knowledge.*

- Ensure that health **staff** are representative of gender and ethnic differences.

**Notes:**

- *Health centers should have both male and female doctors/nurses. If female doctors/nurses are not available, consider advocating with the authorities to organise a female doctor rotation between locations. In this case, women must be adequately informed of which days a female doctor will be available.*

- Ensure that health **staff** know how to respond to the specific needs of victims of grave human rights violations, including rape and physical abuse.

**Notes:**

- *Staff should be trained and capable of providing psychosocial support to reduce trauma. If staff are not trained, they should have the information to refer patients to these services. To avoid trauma and reduce the chance of being singled out in the health center, victims of grave human rights violations should be prioritised.*
- *Staff should ensure the confidentiality of survivors and respect the wishes about the care provided.*
- *Train health staff to identify and respond to traditional harmful practices.*
- *Set up referral networks for services required in response to instances of abuse and exploitation in line with best practice.*
- *Special consideration should be given to the design of rooms, type of furnishings and equipment etc. that are in the examination/consultation rooms used for survivors of torture. This should be considered in design phase. Must avoid possibility of re-traumatisation.*

- Ensure that beneficiaries **know** their right to health care, and where/how to obtain it.

**Notes:**

- *Rights awareness should be provided in sufficient quantity in languages understandable to all beneficiaries, especially to new arrivals in displacement settings.*
- *Printed materials should consider literacy levels (e.g. use of pictograms instead of text). Lack of awareness about rights and services is regularly a gap identified in assessments.*

- **Monitor** access, discrimination, and whether any services are being diverted.

**Notes:**

- *Ensure project indicators (e.g. number of individuals accessing services) are disaggregated by age, gender, and location or specific group (e.g. persons with disabilities, ethnic minorities).* ♿
- *Compare disaggregated client numbers to existing demographic data. Discrepancies can tell you which groups do not have access.*
- *Where possible train the health committees and beneficiaries to do this. Committees can also work with contractors to make sure designs are disability-friendly.*
- *Make sure services are reaching the most vulnerable.*

- Identify what are the **power dynamics** within the intervention area. Who has access to health care?

**Notes:**

- Consult with the Protection Cluster/ Protection Actors, including the GBV and Child Protection sub-clusters, about power dynamics in the area of intervention. 🧑🏻‍🦺 ⚠️ 🗺️
- Use this information to inform monitoring activities and identify any barriers to access or discrimination against particular groups.

### Accountability, Participation and Empowerment

- Identify **local authorities and civil society** specialised in working with **persons with low mobility or disabilities**. Strengthen and support their role, and learn from their experience how to improve service delivery.

**Notes:**

- Coordinate with specialised agencies to identify low-mobility individuals and include them in the program assistance. Most countries already have national or local NGOs offering services to vulnerable groups. These may not operate in the same areas, but could become a valuable resource for the training of staff and the referral of cases. 🗺️
- Especially around reproductive health and family planning it is important to consult with boy and girl adolescents but make sure that girls are consulted separately. It might be useful to use NGO's working with youth but also recognise that the most at risk youth are more likely not associated with a group.
- Actors operating in the same locality could help mobilising low-mobility individuals for key activities.
- Key international NGOs working on these issues include Handicap International and HelpAge.
- Ensure that Health **staff** and committees are representative of all layers of society (e.g. gender, age, ethnicity, socio-economic group, persons with disabilities, etc.).
- Before leaving an area, make sure that the responsible actors and systems for health care are in place.

**Notes:**

- This will involve coordination with local authorities and possibly suppliers, but should focus on community capacities to maintain the structures in place (e.g. health committees).
- The plan on how to go about doing this should be spelled out during the design phase.
- **Report and share protection concerns** with the protection cluster, including the GBV and Child Protection sub-clusters. Other actors may be able to provide assistance.
- **Notes:**
  - Cases of violations should be referred promptly and in accordance with standard operating procedures established in the area, always keeping in mind the abovementioned actions to ensure safety and dignity. ⚠️
- Make sure to **consult** all layers of society when identifying and responding to Health needs

**Notes:**

- Different criteria may affect the power dynamics. For example, in some places it will be important to consult different socio-economic groups (e.g. ethnic or economic minorities). In all situations, one should include women, men, boys, girls, the elderly, and persons with disabilities to understand their needs and preferences for location, design, and methodology of Health assistance. 🗺️
- It is not enough to just consider the protection needs of all layers of society. They have to be involved in identifying the solutions. In addition to making the response more relevant and potentially durable, this will build the confidence and self-esteem of the beneficiaries concerned. 🗺️
- Ensure that **Health committees** are **representative** of all layers of society and that all members are trained in "protection mainstreaming principles".
- **Notes:**
  - They can play a key role in identifying issues related to exclusion, discrimination.

- Find out what the **coping strategies** are. Where do people go when they get sick? What kind of treatments can they expect? Are they placing their safety and dignity at risk? Does one group have access over others? Are women allowed to access formal health care? Do they need to be accompanied by male members of their families? Risks must be recognised as soon as possible and interventions undertaken to help people avoid resorting to negative coping strategies.

**Notes:**

- *What distances will people travel for services other than primary health care? (e.g. emergency obstetrics care) Is there a risk involved in the travel? Do people seek alternative forms of treatment? (e.g. traditional healers) Consider establishing systems for emergency transport (e.g. pooled funds for taxi services) *
  - *Consider learning from local practice. Local plants and remedies may provide effective medical remedies while being cheaper, more accessible, and generally more sustainable. *
  - *Work with traditional healers to improve access to services.*
- Set up accessible, well understood mechanisms for suggestions and complaints

**Notes:**

- *Do not assume an “open door” policy is enough. Make sure that there are other possibilities for submitting complaints that do not require the beneficiary exposing themselves to project staff.*
- *RESPOND to complaints, regardless of whether corrective measures can/need to be put in place.*
- *Staff the mechanism with both men and women and ensure it is accessible for children.*
- *Organise awareness raising sessions so that people know how it works.*
- *Complaints mechanisms should be in line with Protection from Sexual Exploitation and Abusive systems.*
- *Consider a joint complaints mechanism with other sectors (e.g. Protection) to minimise confusion.*

# Education Programs

## Tips for Protection Mainstreaming

Edition 1 (May 2014)

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This note is divided into three sections, representing the four key elements of Protection Mainstreaming. The content is not meant to be exhaustive, but presents examples of key actions that should be taken to ensure the integration of protection principles in the delivery of humanitarian assistance.

Although each action described should be considered throughout implementation, there are some key actions which are especially important to consider during emergencies and during the assessment/project design stage of the project cycle. These are highlighted with the following symbol-codes:

- Emergencies 
- Assessment & Project Design Stage 

Some actions can be sensitive by their nature. In these cases, it is suggested to reach out to a Protection specialist. These are highlighted with the following symbol: 

### Prioritise safety and dignity, and avoid doing harm

- **Talk** to children about the threats they face. Talk to girls and boys separately, and hold discussions with groups of children that could face added difficulties (e.g. with disabilities, from ethnic minorities)
- Ensure that the **location** of Education facilities and routes to them are away from actual or potential threats such as violence; especially the risk or threat of gender-based violence (GBV), and attacks from armed groups.  

#### Notes:

- *Keep in mind the distances children have to travel and the mode of transport. Do not place facilities near possible perpetrators. N.B. The police and armed forces are often seen as perpetrators of violations. Whether they provide a reassuring feeling or instill fear depends on the location. It is important to consult the children, community, and potential beneficiaries about their thoughts.*
  - *Ask children directly (and especially adolescent girls) about the safety of their travel to school.*
  - *Consider ways to reduce/manage/cope with these threats, including changing the location, accompaniment (e.g. children walking in groups, crossing guards, etc.)*
  - *In case of displacement, locate facilities near or within camps or settlements.*
  - *Ensure that child-friendly spaces, teacher learning centers, schools, classrooms, playgrounds and surrounding areas are in good condition, and pose no safety risks to children and teachers. For example, that there are no exposed wires, no dangerous materials on the ground, not in areas known to have landmines, and that they are not close to busy roads*
  - *Arrange appropriate policing if required (e.g. police, community patrols)*
  - *See if there is a possibility to offer psycho-social support to children in the schools, teachers who have been displaced may also need these services.*
- Communities should advocate for **ending practices of using schools for political purposes**, including political rallies, recruiting students and teachers to attend political events, and using schools as polling stations during elections where this could cause tensions or problems. The use of schools and teachers during elections, for instance as polling officials or vote counters, has triggered election and post-election violence against them in some countries.

- Make **infrastructure** adaptations such as ramps and railings to Education facilities and latrines so that all individuals and groups can access and use them in safety and dignity. Use direct observation and discussion groups with persons with disabilities in the community to identify the type of adaptations that are needed.
- Ensure that girls and teachers are not put at risk of increased harm in the establishment and running of education services for **women and girls**.

**Notes:**

- *Using local knowledge, carry out a risk assessment before establishing any new facilities. Based on the assessment, put in place measures to reduce the risk, such as low profile, culturally sensitive uniform or dress codes etc. Girls have an equal right to education, and their safety should be ensured.*
  - *Advocate for enrolling female teachers in the higher levels. If there are not enough qualified female teachers have female teacher's aids who accompany classes and club activities.*
  - *Ensure codes of conducts are clearly communicated with teachers, students and parents.*
- Ensure there are separate, secure, hygienic and private **washroom** facilities for boys and girls.

**Notes:**

- *Talk to the boys and girls about the design and location of latrines. In one Education program, the staff knew that children would need latrines. They did not talk to the children, who it was later found out were afraid of the size of the hole. Children continued to defecate outside the latrines, which created a hygiene problem. Similar anecdotes have shown children not using latrines because of fear of "sliding locks" or simply the lack of a wall to separate boys and girls.*
  - *Consider establishing student environmental committees. These can be responsible for monitoring the hygiene of facilities, encouraging hand-washing amongst students, and can also be involved in general environmental activities (e.g. taking care of plants).*
- If setting up education facilities for displaced communities, consult them as well as host communities about education needs so as to avoid **community tensions**. Make sure that there is no tension or inequality that could lead to violence and harassment of one group on another.

**Notes:**

- *Assess whether inequitable access to education is causing tension or conflict within the community AND with other surrounding/local communities.*
  - *In camp settings, consider providing services to the local community as well.*
- Ensure that the Education services are respectful and inclusive of **cultural and religious practice**.

**Notes:**

- *Employ female staff members with skills and experience working with children.*
- Ensure a **secure** environment in schools.

**Notes:**

- *Ensure that the children are supervised during breaks and where possible to and from school.*
  - *Ensure teachers are trained in first aid and that first aid kits are available/equipped.*
  - *Ensure that Education Sector Members all have in place a system for carrying out background checks for new staff working with children.*
- Put in place guidelines and mechanisms to **monitor and report instances of abuse and exploitation**.

**Notes:**

- *Ensure all staff sign and adhere to a code of conduct that includes a "whistleblower" policy. Child Protection Policies must be signed by all staff and support the members to access training for staff on child protection.*
- *The Code of Conduct should include a prohibition on corporal punishment.*
- *Children should be aware of the Code of Conduct and how to report any cases of exploitation and abuse, including sexual abuse.*
- *Establish an accessible and well understood mechanism for complaints.*

## Meaningful Access

- **Talk to children** about the barriers they face accessing Education services.

### Notes:

- *Talk to girls and boys separately, and hold discussions with groups of children that could face added difficulties (e.g. with disabilities, from ethnic minorities).*
- *Work with children, teachers, community leaders and parents to support equal and safe access to education and training opportunities without discrimination of any kind. Pay particular attention to the exclusion of girls, children with disabilities, children with HIV/AIDS, minority ethnic or religious communities, and other children belonging to disadvantaged or marginalised groups.*

- Ensure that the **locations** of schools are accessible to all. 

### Notes:

- *Discuss with all representative samples of society (e.g. men, women, girls, boys, elderly, ethnic groups, children with disabilities) that should have access to the services we provide. If necessary, adapt the location to reduce the distance and to ensure that the most vulnerable/marginalised have access.*

- Ensure that education **infrastructure** and services can be accessed by persons with reduced mobility (e.g. persons with physical disabilities, bed-ridden children) as well as persons with non-mobility-related disabilities (e.g. the blind, hard of hearing, intellectually disabled). 

### Notes:

- *Make access paths smooth and fit ramps for wheelchair access. Consider different physical disabilities. Different wheelchairs may require different amounts of space. Artificial limbs may make even relatively short distances difficult. Talk to children with physical disabilities about what solutions would best fit their needs.*
- *Provide assistive devices for children with disabilities (e.g. crutches, wheelchairs, hearing aides, Braille books).*
- *Train teachers on how to teach children with disabilities. Teachers should at the very least be aware of any special needs of children with disabilities to facilitate learning and are mindful of discrimination by other children.*
- *Install seats in latrines for children with disabilities.*
- *If some children cannot access the services, consider what alternatives are possible (e.g. distance learning, audio-visual materials, radio or television broadcasts, books, etc.).*
- *Provide information about services in both verbal and written form.*
- *Ensure that staff are trained to work with individuals with intellectual disabilities, including on how to ensure proper confidentiality and informed consent. Local NGOs often already have the technical knowledge.*

- Ensure there are no **financial barriers** to accessing education.

### Notes:

- *See if there is a possibility to waive school fees for children affected by the conflict or a natural disaster.*
- *Consider the costs of school materials (e.g. uniforms, books) and whether this prevents access.*

- Mitigate the impact of **administrative barriers**, such as lack of documentation, which can be excluding children from accessing education and training opportunities.

### Notes:

- *If documents (such as birth records, school certificates) are prerequisite for education, work with the authorities to waive the requirement for disaster-affected children or establish alternative procedure for ensuring all children have access to education.*
- *In camp settings, accept children with missing documents. If this is not possible because of overlap with local communities, consider a grace period during which parents can be assisted to obtain the documents. Work with local authorities to identify schools and never exclude a child from a school without a viable alternative.*
- *Consider that lack of documentation for other services can affect attendance. E.g. in Pakistan, parents without documentation had no access to food distributions, and sent their children to work instead of school.*

- Examine the **context-specific or cultural barriers** to attending school and see if it is possible to identify solutions.

**Notes:**

- *Flexible hours of schooling to accommodate different needs. Children may have unavoidable commitments during the day. Adult learners may need to go to work. Nomadic groups may be involved in agricultural activities at certain times of the year.*
  - *Non-formal education / after school classes for those students who need to catch-up (e.g. adults that missed some aspects of formal education, girls who may not have access to education because of traditional practice in the area).*
- Ensure that beneficiaries **know** their right to Education, and where/how to obtain it.

**Notes:**

- *Rights awareness should be provided in sufficient quantity in languages understandable to all beneficiaries, especially to new arrivals in displacement settings.*
- *Printed materials should consider literacy levels (e.g. use of pictograms instead of text). Lack of awareness about rights and services is regularly a gap identified in assessments.*

- Ensure that **women and girls** have access to education 

**Notes:**

- *Sensitise the community about the value and benefits of girls' education. Build this into the program activities.*
  - *Include proactive activities to encourage equal registration of boys and girls and maintain retention rates that are specific to adolescent girls and boys because they have different reasons/pressures for quitting early.*
  - *Support non-formal education / after school classes where formal schooling for girls is not available.*
- **Age limits** should not be enforced for disaster or conflict affected children and youth. However, there are potential safety issues of combining much older children with young children in education facilities. These can be addressed by proper supervision and where appropriate separate classrooms and/or play areas. 

- **Monitor access and discrimination**

**Notes:**

- *Ensure project indicators (e.g. number of individuals accessing education services) are disaggregated by age, gender, and location or specific group (e.g. persons with disabilities, poverty, language ethnic minorities).*
- *Compare enrollment figures to existing demographic data. Discrepancies can tell you which groups do not have access (e.g. if 10% of children are from an ethnic minority, are 10% of students also from this group?)*
- *Where possible train the parent committees to do this. Committees can also work with contractors to make sure designs are disability friendly.*
- *Involve men, women, boys, and girls, parent, students and teachers in the assessment, monitoring and reporting on education matters.*

## Accountability, Participation and Empowerment

- **Consult** with education authorities, local government, teachers, men, women, boys, and girls in the community to take into account their ideas and opinions about education needs in the community. 

**Notes:**

- *Ensure that local authorities are involved in education, including curriculum development and school certifications.*
- *Curricula and instructional materials developed or supported should be gender-sensitive, recognise diversity and different learning needs, and promote respect for learners. Policies, curricula, textbooks and methods of learning need to be adjusted to promote tolerance, understanding and conflict resolution skills, as well as understanding of human rights, child rights, and non-discrimination.*

- Identify **local authorities and civil society** specialised in working with **persons with low mobility or disabilities**. Strengthen and support their role, and learn from their experience how to improve service delivery.

**Notes:**

- *Coordinate with specialised agencies to identify low-mobility individuals and include them in the program assistance. Most countries already have national or local NGOs offering services to vulnerable groups. These may not operate in the same areas, but could become a valuable resource for the training of staff and the referral of cases.*
- *Actors operating in the same locality could help mobilizing low-mobility individuals for key activities.*
- *Key international NGOs working on these issues include Handicap International and HelpAge.*
- **Report and share protection concerns** with the Protection cluster, including the GBV and Child Protection sub-clusters. Other actors may be able to provide assistance. 

**Notes:**

- *Cases of violations should be referred promptly and in accordance with standard operating procedures established in the area.*
- *Establish reporting mechanisms to report security incidents to enable proper monitoring and prevention of threats. Monitoring and reporting is vital to enable government and other actors to respond to threats to education; as well as to assist legal accountability and advocacy. Education clusters can take a lead by co-coordinating the development of such partnerships and ensuring use is made of existing human rights monitoring capacity.*
- Make sure to **consult** all layers of society and children when identifying and responding to Education needs. 

**Notes:**

- *Different criteria may affect the power dynamics. In some places it will be important to consult different socio-economic groups (e.g. ethnic or economic minorities). In all situations, one should include women, men, boys, girls, adolescents, children with disabilities, and parents to understand their needs and preferences for location, design, and methodology of Education services.*
- *It is not enough to just consider the needs of all layers of society. They have to be involved in identifying the solutions. In addition to making the response more relevant and potentially durable, this will build the confidence and self-esteem of the beneficiaries concerned. Example: In one Education program, the staff knew that children would need latrines. They did not talk to the children, who it was later found out were afraid of the size of the hole. Children continued to defecate outside the latrines, which created a hygiene problem.*
- *Consult displaced communities to design appropriate vocational training in their language that will be recognised when they return or if they choose to locally integrate.*
- Engage children (both boys and girls) in **student associations** and parents (both men and women) in **parent-teacher associations**.

**Notes:**

- *Empowering the persons whose protection is concerned can help make response more relevant and sustainable, while boosting the self-esteem and capacities of the working individuals concerned. Example: In Pakistan, Student Committees hold several responsibilities, including monitoring school hygiene and promoting attendance for out of school children. This activity has the double benefit of benefiting others while strengthening one's own self-protection capacities.*
- *Ensure children (both boys and girls) have participatory committees (student advisory boards) to regularly ensure engagement between educators and the children themselves (child participation).*
- Include children and communities in **school design and construction** to promote a sense of ownership. Children should not be involved in the construction.
- Ensure **school management committees** are democratic and inclusive. Involve religious or community leaders in school governance. This can remove ideological or religious motives to oppose or attack schools.

- Set up accessible, well understood mechanisms for **suggestions and complaints**

**Notes:**

- *Do not assume an “open door” policy is enough. Make sure that there are other possibilities for submitting complaints that do not require the beneficiary exposing themselves to Education/project staff.*
- *RESPOND to complaints, regardless of whether corrective measures can/need to be put in place.*
- *Staff the mechanism with both men and women and ensure it is accessible for children.*
- *Organise awareness raising sessions so that all those concerned know how it works (i.e. children, students, parent committees, teachers).*
- *Consider a joint complaints mechanism with other sectors (e.g. Protection) to minimise confusion.*
- *Complaints mechanisms should be in line with Protection from Sexual Exploitation and Abusive systems.*

# Shelter Programs

## Tips for Protection Mainstreaming

Edition 1 (May 2014)

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This note is divided into three sections, representing the four key elements of Protection Mainstreaming. The content is not meant to be exhaustive, but presents examples of key actions that should be taken to ensure the integration of protection principles in the delivery of humanitarian assistance.

### **Prioritise safety and dignity, and avoid doing harm**

- Ensure that the proposed locations for shelter are considered in terms of the threat of physical attacks, threats to safety such as mined areas, or environmentally unsuitable areas such as steep hills, subsiding land areas and areas prone to flooding, volcanic activities and other potential natural disasters.
- It is essential to understand land tenure arrangements, including statutory/legislative and customary access rights to land, water and other natural resources as well as inheritance rights. This precaution will reduce the risk of eviction or conflict erupting due lack of clarity of these issues. When unsure consult Protection Cluster (Housing, Land and Property Group where possible).
- Ensure that shelter has been designed and built with adequate escape routes in the case of emergency evacuation, and disaster-affected populations have received information and training on fire safety and evacuation procedures.
- Take specific precautions in shelter in terms of surveillance and implement community surveillance if possible.
- Provide efficient lighting throughout site/settlement, with special attention to public and communal areas such as sanitation facilities.
- Respect minimum space standard in shelters to minimise risks of exploitation and abuse.
- Establish communal areas and collection points at a safe distance from shelter sites and temporary settlements. Ensure that they are accessible to persons with disabilities and older persons.
- Plan separate bathrooms and toilets for men and women, avoid dark and isolated areas.
- Include partitions and door locks (when culturally relevant) to better protect women and girls, particularly single women and female-headed households.
- Provide shelter materials and distance between dwellings that offer greater privacy and dignity, especially in cultures where men's and women's are markedly separate or the privacy of the family is very important.
- Establish safe location and time for Core Relief Items distribution to ensure the safe return of individuals to their shelters.
- Assess whether access to shelter is causing tension or conflict.
- Ensure settlements have good visibility and lighting and adequate security at night.
- Ensure that essential services (e.g. health facilities, food distribution and water points, schools, etc.) and materials can be easily and safely accessed from the shelter and settlement locations.

- If required for safety, ensure that there are separate living areas available to groups such as single women, people with disabilities and unaccompanied children, and these areas are protected from targeting of abuse or violence.
- Avoid any shelter or settlement activities that involve forced relocation or return.
- Monitor safety of affected populations on an ongoing basis and make changes to the design of the shelter program or advocate with local authorities for improved safety.
- Take into account local material, existing capacities and the environment. Whenever possible, locally acceptable and available materials and labor should be used to benefit the local economy, while not depleting local resources

### **Meaningful Access**

- Treat displaced persons equitably, whether they are living in host-family arrangements, collective centers, are self-settled in urban or rural locations, are self-settled in camps, or are living in planned camps.
- Ensure that agencies consider the needs of different ethnic, racial, national or social groups in shelter allocation, ensuring that the quality of shelter is equitable across all groups.
- Prioritise people and groups on the basis of need – do not prioritise certain groups because their solutions are easier to achieve.
- Ensure that shelters are accessible and appropriate to all groups and individuals, note in particular concerns of persons with physical or mental disabilities and older persons– where necessary, make individual changes to household shelters, or build all shelters to be universally accessible.
- People with disabilities and older persons may not be able to come to distribution/facility sites (e.g. food, water). Plan additional measures to reach persons with disabilities and older persons.
- Ensure that bathrooms are accessible to persons with disabilities and older persons, and safe for small children.
- Ensure particularly vulnerable groups such as female headed households, older persons and persons with disability have equal access to Core Relief Items and ability to transport them.
- Treat owners, tenants, the landless, informal dwellers and secondary occupants equitably even if return, resettlement and reintegration options are different for different groups.
- Recognise the joint ownership rights of both male and female heads of household and prevent discrimination.
- Provide both women and men with the same benefits for their input and their work in construction: e.g. if work is paid, ensure that both women's and men's work is paid and is equal.
- Ensure adequate safe recreational spaces for children to play and for community groups to meet where family members can watch them from shelter to avoid children playing in remote areas.
- Support and assist displaced persons until such time as they are no longer disadvantaged as a result of their displacement.
- All efforts should be undertaken to secure safe housing for unaccompanied children and establish monitoring procedures by specialised agencies and the community itself.
- Ensure that unaccompanied older persons are assisted in constructing their own shelters.
- Develop appropriate response to help vulnerable groups to access aid, transport shelter material and construct shelters. Pay particular attention to assistance needed by persons with disabilities and older persons to ensure construction of accessible shelters.

## **Accountability, Participation and Empowerment**

- Observe and ask about local construction practices and use appropriate method when possible.
- Identify local authorities responsible for shelter provision and strengthen and support their role where possible.
- Ensure that local authorities are involved in site planning and selection so as to avoid problems and ensuring consent and participation from local leaders. Provide technical and construction assistance.
- Involve women and men in the planning and in the implementation of Core Relief Items distribution.
- Provide support to diverse groups that are not traditionally involved in construction activities but may be interested in participating in shelter programs.
- Ask disaster-affected populations, including diverse groups, to help identify safe locations for shelters and settlements as well as shelter design.
- Train and practise fire procedures and emergency evacuations with affected populations.
- Ensure that disaster-affected populations are fully involved in the planning and management of their return, resettlement and reintegration.
- Promote modalities of shelter that enable IDPs to upgrade their own shelters from transitional to more permanent structures, as their situation evolves.
- Reinforce the community's self-help capacity: encourage traditional construction methods, particularly in areas where transportation of shelter material is restricted for logistical or security reasons; give women the opportunity to equally participate in the process; equip beneficiaries with knowledge of safe construction practices.
- Cash-for-work and food-for-work schemes as well as childcare arrangements can be useful to support households with specific needs in building their own shelters. Monitor the implementation of such schemes to avoid exploitative and fraudulent practices.
- Work with the community to identify skilled women and men and adolescent girls and boys who can support shelter construction, from both the IDP and the other affected communities.
- Ensure that protection or community services staff work alongside shelter specialists and site planners in all multi-sectorial assessments and specialised shelter assessments to ensure that the protection implications of shelter interventions are taken into account at the onset.
- Ensure consultation with host communities, government authorities, as well as beneficiaries, men, women, boys and girls. Involve persons with disabilities and older persons in your needs assessments in order to have accurate information about their specific needs.
- Obtain permission (temporary or permanent) before using or building on any land or property, in writing where possible.
- Consider assistance to host families and host communities, such as support in expanding or adapting the host family shelter.
- Set up mechanism for complaints and appeals, and ensuring that men and women are both comfortable to access these complaints mechanism.
- Provide information about people's entitlements and where and how they can access remedies, resolve disputes or apply for compensation – by referring to relevant authorities, legal services, or another agencies specialising in housing, land and property rights.
- Avoid and monitor any exploitative labor especially child labor on construction sites.
- Disseminate the Guiding Principles on Internal Displacement and implement programs that support displaced people's rights.

- Promote respect for social customs for dealing with the remains of the dead while ensuring that existing facilities such as graveyards or crematoria are adequate.
- Conduct regular structured dialogues and discussions with individuals and groups of different ages, gender and backgrounds, particularly those with specific needs on shelter issues, to ensure that any protection concerns highlighted are discussed and resolved.
- Work with the community to set up monitoring or similar mechanisms to assess the living conditions of persons with specific needs in the community, such as older persons living without adult family members or child-headed households.

# Food Security and Livelihoods Programs

## Tips for Protection Mainstreaming

Edition 1 (June 2014)

The content for this note is taken mainly from the following sources:

- Minimum Inter-Agency Standards for Protection Mainstreaming (WVI)
- Disabilities among Refugees and Conflict-Affected Populations - Resource Kit for Fieldworkers (WRC)
- Minimum Standards for Child Protection in Humanitarian Action (CPWG)
- GBV Guidelines (IASC)
- Humanitarian Charter & Minimum Standards in Humanitarian Response (Sphere)

This note is divided into three sections, representing the four key elements of Protection Mainstreaming. The content is not meant to be exhaustive, but presents examples of key actions that should be taken to ensure the integration of protection principles in the delivery of humanitarian assistance.

Although each action described should be considered throughout implementation, there are some key actions which are especially important to consider during emergencies and during the assessment/project design stage of the project cycle. These are highlighted with the following symbol-codes:

- Emergencies 
- Assessment & Project Design Stage 

Some actions can be sensitive by their nature. In these cases, it is suggested to reach out to a Protection specialist. These are highlighted with the following symbol: 

### Prioritise safety & dignity, and avoid doing harm

- Food, cash, vouchers or livestock interventions may make people more vulnerable to certain protection problems, such as attacks. The ownership or management of these types of assets, which may be particularly valuable in an emergency, may place people at greater risk of violence, abduction or abuse. Analysis of the local security environment, including in relation to ownership patterns, recent history of looting or raiding, husbandry practices and the need to access livestock services or markets, is necessary to identify high risk practices and activities.
- Beneficiaries may face problems at distribution sites, particularly with theft, intimidation and extortion. The environment in which assistance is provided must be safe for all the people concerned.
- Beneficiaries may face problems, particularly with sexual assault and robbery, including at official or unofficial checkpoints, while travelling to and from a distribution point. The environment through which beneficiaries must travel must be safe for all the people concerned. If safety is a problem FSC members will need to make a special effort to move the point of delivery close to a beneficiary's home, or provide transport to ensure safety.
- Food security and related responses should aim to reduce the threats against the affected population. Responses must not inadvertently empower or strengthen the position of armed groups or other undesirable actors. The vulnerability of beneficiaries beyond food insecurity and their available coping mechanisms and other capacities all need to be taken into consideration.
- Consideration must be given to whether items like cash or vouchers can be used for anti-social purposes, for example, the purchase of small arms or alcohol, tobacco or drugs that can be abused that may result in an increase in domestic violence. Cash may increase risks of corrupt diversion or seizure by armed groups and may expose beneficiaries to security risks.
- A food assistance system that enables displaced beneficiaries to live among host families or in a dispersed manner should be prioritised, in spite of the greater logistical constraints it may entail. Avoid turning food aid into a pull factor for encampment.

- Coping strategies contributing to food security and dignity should be supported, while bearing in mind that some of them may carry costs or incur risks that increase vulnerability, so these should be avoided.
- Food, cash, vouchers or livestock responses may undermine people's efforts to protect themselves and increase their vulnerabilities, so need to be carefully considered.
- Comprehensive context-specific analysis including of cost efficiency, secondary market impacts, the flexibility of the transfer, targeting and risks of insecurity and corruption, should inform the choice of program.

### **Meaningful Access**

- Assess and monitor access to food security programs by collecting disaggregated data by age, gender, and location or specific community.
- If some individuals, for example older persons or persons with disabilities, cannot access the services, ensure that special arrangements are made to bring food or cash to them. It should not be assumed that friends and family will do it. Coordinate with specialised organisations, for example Handicap International and HelpAge International, to identify individuals with limited mobility and include them in the program assistance.
- Activities must not discriminate against any group and must be performed in such a way that they cannot be perceived as doing so. Consider whether women and men may have different capacities to access cash compared with in kind resources.
- Activities should promote and help protect the rights of people who have historically been marginalised or discriminated against, such as certain castes, tribes or women and girls in some societies.
- Interventions with displaced beneficiaries should not be at the expense of the local host population; assistance should be provided to both groups where possible.

### **Accountability, Participation & Empowerment**

- Make sure beneficiaries know they have a right to equitable and safe assistance, and where and how to obtain it.
- Consult men, women, boys, girls, the elderly, and persons with disabilities to understand their needs and preferences for location, design, and methodology of assistance. Direct observation and discussion groups with representatives of the community to identify the adaptations that are needed for the most vulnerable.
- Partners, communities and beneficiaries need to be involved in the planning, implementing, monitoring and evaluating of programs so they can make informed decisions. FSC members need to be transparent in their objectives with beneficiaries and non-beneficiary communities, as well as with its government and NGO partners.
- A complaints feedback mechanism should be established with a view to improving programming, assisting in understanding beneficiary and community perceptions, promoting beneficiary empowerment and assisting in the early detection of problems such as targeting, misconduct including sexual exploitation and abuse, food diversion and fraud.
- Ensure that food or livelihood committees are representative of all groups within the community (e.g. gender, age, ethnicity, socio-economic group, etc.). Include targeted measures to ensure the effective and meaningful participation of representatives of all groups in the community.
- Protecting and promoting food security of marginalised groups and the impact on the relationships within and beyond communities needs to be understood, as activities may exacerbate tension or build cohesion amongst groups within and between communities. Food assistance or other interventions should not have a negative impact on local labour market.

- Certain delivery mechanisms like mobile banking and mobile phones can be less accessible to vulnerable people. The choice of delivery mechanisms must be based on assessment of options and consultation with beneficiaries.
- Assess and monitor access to food security programs by collecting disaggregated data by age, gender, and location or specific community. This data may help identify whether there is discrimination or if any food is being diverted. Ensure monitors check and follow up that assistance reached the most vulnerable.
- Identify, support the role, and strengthen the capacity of local authorities and civil society with responsibilities in the Food Security Sector. Where possible, train local Food Security committees consisting of beneficiaries to identify problems for themselves. Make sure beneficiaries and staff know where to refer or report incidents of rights violations.
- Provide communities with accessible, effective and confidential complaint mechanisms that are well understood. Respond to complaints, regardless of whether corrective measures can immediately be put in place. Staff the mechanism with both men and women and ensure it is accessible for children.
- The natural resource base for production and livelihoods of the disaster-affected population and host population should be preserved.