

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: 

Prioritize safety & 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 minimize 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 first hand 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, the disabled can carry them.
- Develop strategies to distribute to population with special needs such pregnant women, children, single parents with young children, elderly, sick, disabled and marginal populations.

- 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. *Example: Working through focal points or providing services at night/on weekends.* For example, if a service or registration only takes place 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 in consideration the protection issues that comes 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.
- Ifor individuals who cannot access the services, ensure that special arrangements are made to make them available (e.g. mobile counseling centers, home visits).
- Recognize that protection issues can be exasperated 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 mobilize 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 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.
- Recognize that protection issues can be exasperated for persons with disabilities. Women with disabilities and girls are at higher risk of GBV
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- 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 prioritize 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 marginalized 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 organization 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. # 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 do monitor access
- Make sure services reach the most vulnerable.

Accountability, Participation & Empowerment

- Identify the **POWER DYNAMICS** within the intervention area. What are the minority groups and who is vulnerable or marginalized? 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** specialized in working with persons with disabilities. Strengthen and support their role, and learn from them.

Notes:


- Coordinate with specialized 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 as the, 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 recognized 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 marginalization.

- 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.
- Organize awareness raising sessions so that people know the mechanisms works.