



High-Level Humanitarian Donor Briefing Note October 2026

This briefing note informs the Global Protection Cluster (GPC) Annual Donor Meeting on 26 October 2026, offering a timely opportunity to reflect on current protection trends and actions needed to address them. It provides a shared analysis of the most severe protection risks and response capacities across Protection Cluster operations to date in 2026 with the aim of supporting donors and Member States to align political, diplomatic, financial and operational support for protection with realities on the ground.

1. Global Protection Trends

This year's operating environment is defined by **two major trends**. First, the protection landscape continues to deteriorate, driven by increasingly complex and protracted conflicts, rising violations of international humanitarian and human rights law, weak accountability, and political pushback on gender equality and rights. Second, the humanitarian system faces severe constraints, including sharp reductions in funding for programming and operational capacities, which has forced a hyper- prioritisation of the response.

According to the Global Protection Update of October 2026, **an estimated 418 million people in 22 countries are exposed to protection risks**¹. This number reflects individuals and communities facing direct, often life-threatening threats from violence, coercion and deliberate deprivation. It draws on evidence base generated through Protection Cluster assessments which despite resource constraints, have increased sub-national coverage and strengthened engagement with partners closest to affected populations².

The most **severe and recurrent protection risks** often emerge through interconnected patterns of violence, coercion and exclusion that require different but complementary forms of action. Risks such as attacks on civilians and unexploded ordnance, unlawful detention, forced recruitment, restrictions on freedom of movement and forced displacement occur in the same locations and affect the same populations, creating multiple and simultaneous threats to civilians. Gender-based violence, child and forced marriage, discrimination, psychological/emotional abuse or inflicted distress, and impediments to legal identity and justice are also often overlapping, reflecting discriminatory norms, exclusion, economic pressures and weaknesses in institutions and services. Such compounding and severe risks can reinforce conflict-related harm, demanding both robust operational responses that reduce violence and exclusion and provide life-saving protection supports as well as concerted action for increased compliance with and accountability for international human rights and humanitarian law and other human rights obligations.

¹ Global Protection Update: Protection in Times of Constraint: Reducing Harm, Preserving Dignity, October 2026, Available [here](#)

² GPC pursued this expanded sub-national assessment coverage despite funding constraints given the importance of ensuring local knowledge and people's perspective remain central to understanding how protection risks are experienced.

These risks are also not experienced equally: **gender, age, disability and other factors shape both exposure to harm and access to safety and assistance.** Women face heightened risks of conflict-related sexual violence, intimate partner violence, trafficking, exploitation, forced marriage, and restrictions on freedom of movement; while men are disproportionately exposed in many contexts to killing, forced recruitment, detention, torture and other forms of violence. Children face grave risks of family separation, use and recruitment, sexual violence, and exploitation, while older people and persons with disabilities face heightened isolation, abandonment, violence (including sexual) and barriers to accessing assistance. LGBTQI+ people face heightened risks of conflict-related sexual violence, trafficking, exploitation, and discrimination. These patterns overlap and demand tailored response efforts that directly address the particular threats and barriers affecting each group.

This year has also seen a succession of new or sharply deteriorating emergencies, increasing pressure to respond effectively and deliver protection to affected populations. In the **Democratic Republic of the Congo (DRC)**, the Ebola outbreak has become the country's largest on record, with insecurity, displacement, stigma and misinformation, attacks on aid workers hindering access to essential services including for survivors of GBV. In **Venezuela** and **Colombia**, two major earthquakes have added further risks and vulnerabilities to already complex protection environments. Safety audits have identified increased protection risks in makeshift and overcrowded shelters. In **Afghanistan**, renewed escalation along the border with Pakistan has increased risks for civilians and displaced populations, while severe restrictions on women's rights and movement and the ability of female humanitarian personnel to work undermines access to assistance. The protection situation in the **occupied Palestinian territory (oPt)** remains critical, with ongoing attacks escalating settler violence, and the destructions of essential facilities further restricting access to services, particularly for women and girls. In **Mali**, the conflict has sharply deteriorated in April with a succession of major attacks, while in **Sudan** recent fighting has increasingly concentrated on El Obeid and the wider Kordofan region, where civilians face severe protection risks, including in light of pronounced movement restrictions, drone strikes and attacks affecting essential infrastructure. The GPC is closely monitoring the recent escalation of conflict in **Ethiopia, South Sudan and Yemen**, which is heightening protection risks, including trauma and distress, and triggering further displacement in both contexts.

Across conflicts, evolving patterns of violence are compounding existing threats to civilians. Key drivers include the continued and, in many contexts, growing use of **methods of warfare** including siege tactics that disregard IHL obligations vis-à-vis the civilian population, the use of explosive weapons in populated areas disregarding the limitations imposed by IHL, child recruitment and sexual violence, increasingly combined with **armed drones and AI-enabled targeting systems.** Humanitarian workers are also facing increased attacks, further undermining their ability to deliver life-saving assistance and reach people in need. Children are particularly affected with the proliferation of armed drones causing death and injury, psychological trauma, disruption of education and essential services. These new technologies are reshaping the scale, speed and reach of attacks, while creating new risks and long-term harm for civilians. This points to a continued weakening of IHL compliance and an urgent need for stronger accountability, renewed humanitarian diplomacy, and protection-centred responses that prevent harm as well as respond to its consequences³.

³ See GPC PoC Advocacy Note: Civilian Protection in 2026: The Deadly Convergence of Advanced Technology and Ancient Warfare Practices. Available [here](#)

Across the 3,857 subnational areas assessed, **1,630 (42%) are multi-risk hotspots⁴, where people face at least 4 of the assessed protection risks at severe or extreme levels.** More than half of the assessed areas in Afghanistan, Cameroon, Ethiopia, Mozambique, Myanmar, Niger, oPt, South Sudan and Sudan are multi-risk hotspots. In Haiti and the DRC, a third of communities assessed face an average of ten protection risks at severe or extreme levels. Yet almost half of these hotspots (776) are classified as below severe when all 15 protection risks are combined into an overall severity classification. National or regional summaries can therefore hide critical protection situations in specific location, while overall classifications can understate the severity of individual risks. These findings reinforce the need, under the Humanitarian Reset, to prioritise areas based not only on overall severity of needs, but also on the specific protection risks people face and the groups most exposed. Subnational protection analysis should inform prioritisation, resources allocation and protection action, and be strongly considered in the upcoming Humanitarian Needs and Response Plans hyper prioritization.

In countries which are expected to transition towards nationally led or development-oriented coordination under the IASC Humanitarian Reset, protection risks persist and, in some areas, intensify. In **Cameroon**, areas facing eight or more severe or extreme risks increased from 3 to 10 between 2025 and 2026. In **Colombia**, 271 assessed areas face at least four severe or extreme risks. In **Nigeria**, seven assessed areas face an average of eight severe or extreme risks each. At the same time, reduced humanitarian capacity and uneven national systems can lead to gaps in the identification of protection risks and in the support available to survivors and victims, including access to specialized services and safe referral pathways. This makes it critical that transition processes are grounded in protection with clear attention to who may be left behind, how protection risks will be monitored and addressed, and how responsibilities and capacities are sustainably transferred.

2. Protection Response and Impact on People

Protection partners continue to deliver essential support despite significant constraints, but major gaps remain in the services people need. Across 15 reporting operations, partners reached **11.7 million people against a target of 39.7 million**, providing assistance alongside information, community-based protection and safer environments. **The key concern is whether people facing severe threats can access the support they need to reach safety and recover.** Progress remains uneven: services and assistance reached **22% of targets**, while community-based protection **14%**. Gaps in psychosocial support, case management, family reunification, safe spaces for women and girls⁵, explosive ordnance clearance and victim assistance highlight the consequences for people affected. The priority is to ensure that funding and prioritisation sustain a connected range of protection services; combining information and prevention with accessible care, assistance and continued follow-up.

Protection actors have increased their efforts to adapt and work together to sustain critical services. They make continued efforts to reach people despite insecurity, access restrictions and reduced capacity. These efforts help people access safety and assistance, but rely on continuity, trust and proximity to affected communities. Progress must therefore be measured not only by the number of people reached, but also by improvements in people's safety and access to support. Concrete examples include Ukraine,

⁴ See Global Protection Update, page 8, for more details.

⁵ According to the GPC global GBV WG more than 500 Women and Girl Safe Spaces having closed since 1 January 2026 in 14 countries with humanitarian emergencies, impacting the lives of an estimated 3 million women and girls.

where protection and evacuation teams help civilians, including older people and persons with disabilities, leave areas under attack and reach safety. In eastern **DRC**, women and girls' safe spaces provide confidential entry points to medical care, psychosocial support and other protection services in a context of escalating sexual violence. In **Haiti**, child protection interventions are critical to preventing the recruitment and use of children by armed groups, including in supporting their safe, family- and community-based reintegration. In **Burkina Faso**, local associations, including women-led organisations, continue to deliver psychosocial support, emergency assistance and safe spaces in 29 communes facing severe access constraints. In **north-east Nigeria**, victim assistance programmes have helped explosive ordnance survivors access emergency treatment and referrals, reducing the financial burden on families. These examples demonstrate the value of sustained presence, specialised expertise and trusted local relationships for people facing immediate threats and recovering from harm.

Sustaining protection also means adapting assistance to people who would otherwise remain excluded. In **South Sudan**, persons with disabilities and their representative organisations have helped map services and identify accessibility barriers. In **Ukraine**, consultations with older people and persons with disabilities have informed humanitarian planning, including attention to people dependent on medical devices during power outages. However, initial contact or a referral is insufficient if the care people need remains inaccessible. The protection capacities mapping conducted by the GPC this year documents reduced follow-up, fewer specialised referral options and diminished contact with affected communities⁶.

3. Protection Funding Overview

By October 2026, the **Protection Cluster had received 42% of its US\$2.8 billion requirements**. This global figure also masks disparities across operations: only 6 of the 22 Protection Clusters had received more than 50% of the funding requirements. Of the US\$ 1.2 billion generously contributed by donors, more than half was allocated to just five crises: Ukraine, occupied Palestinian territory, Yemen, Syria and Sudan. While we can only acknowledge this tremendous support, this also means that financial resources for protection are not necessarily evenly distributed across crises. For instance, emergencies in Mali and Colombia have particularly large protection funding gaps (less than 25% funded), while the Sahel and the Horn of Africa remain chronically underfunded. The **7 most underfunded protection crises** this year are Mali, Colombia, Niger, Cameroon, Somalia, Burkina Faso, and Ethiopia⁷.

The **hyper-prioritised HNRPs** provides a stark illustration of this growing gap between needs and available resources. Across all operations, 139 million people were identified as in need of protection and only 31 million people – 22% of the total – could be targeted under the hyper-prioritised plans. This left 108 million people outside the prioritised response, despite high levels of exposure to harm. It reflects as well potential gaps in ensuring that hyper-prioritized responses cover areas with highly severe protection risks.

Humanitarian financing is undergoing broader structural shifts, with immediate consequences for protection. Funding envelopes are shrinking, prioritisation is becoming sharper, and assistance is increasingly planned and delivered with a strong emphasis on life-saving interventions, rapid and visible results, and reaching the largest possible number of people. In practice, this has often favoured material assistance (food and non-food items) and cash-based interventions. This trend is reflected in the **declining**

⁶ See GPC Protection Capacities Under Pressure – Evidence from Consultations with Protection Partners across 22 Operations, available [here](#), and specific analysis on [Child Protection](#), [Gender-Based Violence](#), [Mine Action](#), [Inclusion](#)

⁷ See Annex 2 – Funding Analysis per Protection Cluster Operations

share of allocations directed to protection in country based pooled funds. In US allocations, protection accounts for an average of 9% of Tranche I and 16% of Tranche II. While this suggests an improvement between the two tranches, likely reflecting strong advocacy by partners and donors, it is still too early to draw firm conclusions. More broadly, protection's share of CERF allocations fell from 16% in 2025 to 7% in 2026, while its share of CBPF allocations declined from 16% to 10%. Given the substantial volume of humanitarian funding channelled through pooled funds, these trends risk setting precedents that could reshape the overall protection response over the longer term. The principle of complementarity should incorporate adequate safeguards to ensure that the identification of the "best-placed actor" is based on demonstrated expertise and capacity, particularly for specialized protection responses, and that such decisions are made in consultation with the relevant Clusters, including the Protection Cluster. It should also be reviewed vis-à-vis possible implications on advancing localisation within humanitarian action.

4. Priorities for donors and Member States

- **Protection of civilians, accountability and respect for IHL and human rights law.** Use political influence to advocate for an end to violations, protection of civilians and humanitarian workers, and unimpeded access to essential services and humanitarian assistance. Support independent monitoring and accountability mechanisms, including those addressing conflict-related sexual violence, child recruitment, maiming and killings, and discriminatory restrictions on rights.
- **Continuity of prevention interventions and protection response services.** Maintain predictable and multi-year financing to support prevention, risks mitigation and the continuity of critical protection services, including specialized protection responses for children and GBV survivors, which are essential to save lives, reduce humanitarian needs and longer-term exposure to protection risks.
- **Support to local and national protection actors and mechanisms.** Ensure community-based structures, women-led organisations, human rights actors, organisations of persons with disabilities and frontline actors are provided with the technical support and flexible funding to operate safely, maintain services and participate in decision-making and coordination, without shifting excessive risks or burdens onto local actors and communities.
- **Centrality of Protection, humanitarian diplomacy and action on the drivers of protection risks.** Ensure protection is at the centre of humanitarian policies, high-level negotiations, and operational planning.

Annex 1 – Reference Documents

GPC PoC Advocacy Note: Civilian Protection in 2026: The Deadly Convergence of Advanced Technology and Ancient Warfare Practices. Available [here](#)

GPC Protection Capacities Under Pressure – Evidence from Consultations with Protection Partners across 22 Operations. Available [here](#), and specific analysis on [Child Protection](#), [Gender-Based Violence](#), [Mine Action](#), [Inclusion](#)

Global Protection Update: Protection in Times of Constraint: Reducing Harm, Preserving Dignity, October 2026. Available [here](#)

Annex 2 – Funding Analysis per Protection Cluster Operations (OCHA FTS, 06 October 2026)

Country	CLUSTER REQUIREMENTS (US\$)	CLUSTER FUNDING RECEIVED (US\$)	PERCENTAGE COVERAGE
Afghanistan	136,487,975	72,213,842	53%
Burkina Faso	102,951,468	33,189,389	32%
Cameroon	39,600,528	11,514,197	29%
Central African Republic	33,106,060	12,052,335	36%
Chad	20,725,260	14,136,298	68%
Colombia	192,741,718	43,968,544	23%
Democratic Republic of the Congo	114,571,455	54,284,517	47%
Ethiopia	101,338,004	34,947,375	34%
Haiti	70,625,000	37,327,333	53%
Mali	102,434,677	23,999,731	23%
Mozambique	67,416,479	23,549,952	35%
Myanmar	115,991,868	41,006,419	35%
Niger	67,867,393	18,594,080	27%
Nigeria	38,096,650	26,573,585	70%
Occupied Palestinian Territory	332,748,667	138,954,553	42%
Somalia	93,000,000	28,732,186	31%
South Sudan	79,426,435	61,282,233	77%
Sudan	239,732,523	97,043,082	40%
Syria	252,650,523	112,264,667	44%
Ukraine	368,736,889	202,600,882	55%
Venezuela, Bolivarian Republic of	143,207,524	51,315,922	36%
Yemen	158,573,692	73,318,626	46%
Total	2,872,030,788	1,210,411,974	42%

Annex 3 – Funding Analysis per Protection Response Types (OCHA FTS, 06 October 2026)

Response Type	Coverage (%)
Child Protection	31%
GBV	22%
Mine Action	35%
HLP	23%
Protection (inc. Others*)	50%
CLUSTER	45%

(*): Protection funding also includes funding allocated to CP, GBV, MA and HLP partners. While reported under protection, this funding supports specialized responses within these areas. Disaggregated data is not fully available on FTS at the moment.