

EXAMPLES OF GOOD PRACTICE ON INTEGRATING PROTECTION IN HNOs AND HRP:
PRACTICAL TIPS AND SUGGESTIONS FOR OCHA COUNTRY OFFICES
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OCHA, as part of the IASC, has committed to placing the protection of affected people - including women, girls, boys and men - at the front and centre of humanitarian decision-making and response. This has been reflected in the IASC's policy on Protection in humanitarian action (2016), which emphasises an IASC commitment to prioritise protection and contribute to collective protection outcomes.² It underlines the need to implement this commitment across the humanitarian programme cycle, including in assessments, planning, programming, implementation and monitoring. Complementing existing guidance, this note – produced jointly by PSB, PDSB and CRD – provides concrete and practical field examples, drawn from 2017 HNOs and HRPs, on ways to incorporate protection in both HNOs and HRPs.³ It aims to provide OCHA staff with useful tips and suggestions to facilitate and support their work; it is not a prescriptive guidance and OCHA offices can integrate its content in different ways to suit their context.

For further support, please contact: PSB (Maria Masullo, masullo@un.org and David Murphy, murphyd@un.org); PDSB (Marlies Bull, bull1@un.org and Dina Abou Samra, abousamrad@un.org); or CRD (Lia Copeland, copeland@un.org).

Protection analysis and strategic objectives should inform and be reflected in all aspects of the HNO and HRP. Together with the HCT and the Protection Cluster, OCHA plays an important role in this regard. When developing the HNO and HRP, OCHA should be guided by advice from the Protection Cluster and protection-mandated agencies (e.g. UNHCR, UNICEF or OHCHR), as well as analysis and reporting by peace operations where relevant and human rights organizations. Specialized protection advice can also be sought on specific topics, e.g. from UN Women on gender; UNFPA on GBV; UNMAS on mine action; UNDP on rule of law; UNICEF on children, ICRC on IHL, etc.

HUMANITARIAN NEEDS OVERVIEWS

➤ **Identify the main protection risks, impact and resulting needs**, in consultation with protection actors. The HNO should capture all of these – risk, impact and need - to provide a full picture of the situation. Highlight specific protection issues where relevant, such as sexual and gender-based violence (SGBV), and reflect inter-linkages between rights and needs (e.g. reduced food intake due to inability to cultivate land because of the presence of armed actors or mines). Keep in mind that the presence of a threat (e.g. active conflict) does not mean that it poses the greatest risk to people. For example, women residing in camps may be at greater risk of rape by other IDPs in the camp than by armed actors. If possible, reflect how these factors have changed over time, e.g. by comparison with pre-crisis data.

- ✓ [Syria 2017 HNO](#): The HNO frames the crisis as “largest protection crisis of our time”. The ‘impact of the crisis’ section highlights a range of key protection risks, impact and needs for civilians arising from intense hostilities across Syria, with a dedicated section on violations of international humanitarian and human rights law by parties to the conflict. The HNO provides a useful analysis of protection challenges specific to the Syrian context, including people trapped in besieged areas, and the wider impact of the crisis across generations and regions (p.8-15).
- ✓ [DRC 2017 HNO](#): The HNO identifies violations of fundamental rights “right to life, human dignity, physical and psychological integrity” as a key concern (p.3), noting that, “from April to September 2016, more than 54,000 cases of different abuses (murders, injuries, rape, etc.) have been registered by the protection monitoring system.” (p.12, 28)
- ✓ [CAR 2017 HNO](#): “Protection of the population exposed to intercommunity tensions and/or abuses perpetrated by armed elements” is identified as an overarching priority. Insecurity is identified as the key factor of the crisis in CAR. The HNO also stresses the increasing prevalence of GBV, stating that: “In 2016, 3,077 GBV incidents have been reported.” Adding to massive violations of human rights and international humanitarian law, the HNO notes that “The judicial system is not effective and therefore impunity reigns in most prefectures”. (p.4-6)
- ✓ [Nigeria 2017 HNO](#): The section on impact of the crisis covers a broad range of protection risks, their impact on the population and resulting needs. It includes reference to negative coping mechanisms such as survival sex. It also points to inter-communal tensions over access to scarce resources and impact of delays or limited humanitarian assistance. (p.5-9)
- ✓ [Myanmar 2017 HNO](#): The HNO takes note of broader interventions needed to address drivers of need and thereby contextualizes the HNO. A section on “drivers and underlying factors” gives attention to systemic discrimination and resultant vulnerabilities, which is further articulated across the different sectors (p.5). Regionally focused sections enable different dynamics and their repercussions to be explained, with good linkages between vulnerabilities and risks.

- ✓ [Palestine 2017 HNO](#): There are dedicated sections on protection and displacement under Impact of the Crisis chapter for both the Gaza Strip and West Bank that highlight some key issues, as well as interesting text boxes focused on refugee camp concerns specifically (p.5 and onward). Key protection issues and their impact are identified beyond these sections as well, such as the impact of movement restrictions, use of force, etc. The Protection Sector of the HNO is quite detailed, with a section focused on protection mainstreaming. It does a good job of tailoring the analysis to the local context; in addition to specific GBV and child protection concerns, specific attention is given on issues unique to the oPt context, such as protective presence and targeted advocacy on settlement related concerns, and demolitions.

➤ **Use statistics, including sex and age disaggregated data (SADD), where possible.** Numbers can tell a powerful story, but they can also mislead or mask differences if used carelessly. Data should be disaggregated by sex and age and, where feasible, other factors. It should also be interpreted, analysed and presented in context; for example, data on GBV should be accompanied by some gender analysis. At the same time, do not let lack of figures prevent the use of good qualitative data.

- ✓ [Iraq 2017 HNO](#): The HNO highlights that children and adolescents are often targets of killing and maiming, abduction, recruitment into armed forces or armed groups, detention, and sexual and physical violence, using statistics to illustrate this, such as *“During 2016, a reported 361 grave child rights violations affected 1,685 children, though the actual number is believed to be much higher. 475 children were reportedly killed and another 355 injured as a result of conflict.”* (p.15)
- ✓ [Syria 2017 HNO](#): The HNO contains a range of useful statistics disaggregated by sex and age, as well relating to protection and the situation of specific groups presented in a user-friendly manner (e.g. p, 7, 16-18)
- ✓ [Yemen 2017 HNO](#): The HNO uses statistics to highlight violations of international law, noting that *“The conduct of hostilities has been brutal. As of 25 October 2016, health facilities had reported almost 44,000 casualties (including nearly 7,100 deaths) – an average of 75 people killed or injured every day. These figures significantly undercount the true extent of casualties given diminished reporting capacity of health facilities after 19 months of war and many people’s inability to access healthcare at all.”* It also includes various text boxes including on numbers of conflict incidents by governorate, displacement levels over time by location, health worker casualties. (p.5-9)
- ✓ [CAR 2017 HNO](#): There is a specific section which provides the disaggregation of people in need, by sex, age and status (migrant, refugee, host communities, etc.) per each cluster, and also by geographical location/province (p.12). The breakdown of key data, which are then analyzed in the HRP, is crucial to identify the specific needs of each specific group, and to respond accordingly in the response plan.
- ✓ [Chad 2017 HNO](#): The HNO includes two specific sections providing a comprehensive overview of disaggregated data of people in need by age, gender, sex and geographical location (p. 6 and 14). In addition, there are a number of powerful visuals employed beyond these sections, including a map (p. 4) which clearly show the different categories and numbers of people in need per region, their food insecurity Phase (IPC) and malnutrition level (SAM), and in which setting they are living (camps, host communities, etc.).
- ✓ [Myanmar 2017 HNO](#): The HNO contains good use of SADD within displacement profiling/data. (p.13-15)
- ✓ [Palestine 2017 HNO](#): Protection of civilians and forced displacement are identified as key areas of need, with good use of SADD to highlight key needs in the statistics section. (p.13-15)

➤ **Reflect the situation of different groups.** People experience crisis differently based on gender, age and other factors, including characteristics (e.g. ethnic origin or religion), health (e.g. illness, injury or disability), and status (e.g. IDP, refugee, migrant, returnee). For example, women and girls may be at greater risk of rape and other forms of sexual violence, while men and boys may be at greater risk of execution, arrest, detention or forced recruitment. This can be mainstreamed in the document and/or highlighted in a special section. Avoid general statements, e.g. about “women’s vulnerability”, use specific language and do not limit the analysis only to women and children.

- ✓ [Yemen 2017 HNO](#): The HNO has a specific section on “most vulnerable groups”, which highlights the vulnerabilities of some groups including those affected by displacement, women, children, minorities, refugees and migrants. (p.15-18)
- ✓ [Syria 2017 HNO](#): The protection sector section provides a clear articulation of the different threats girls, boys, women and men as well as elderly, IDPs, and refugees face (p.32)
- ✓ [Somalia HNO 2017](#): The HNO illustrates impact of the crisis on different groups, and in particular, youth. The impact of underdevelopment and the resulting effects on the youth with limited livelihoods and education opportunities are outlined: *“Lack of access to basic services for youth, especially education and livelihoods opportunities, means they can easily tip into the vulnerable category, as well as encouraging outward migration in search of employment and increasing susceptibility of recruitment to non-state armed groups. With almost half of the population under 15 years old and nearly three quarters of the population under 30, employment, the provision of basic services, notably education, is vital to ensure a better future for young Somalis.”* (p.5)
- ✓ [DRC HNO 2017](#): The HNO gives examples of how different segments of the affected population face different risks and vulnerabilities. It notes *“Age, gender, disability and ethnicity strongly exacerbates the impact of these issues and thus, a multisectoral assistance is required to address this”*. In a section on Gender Based Violence, it highlights that *“Women and girls are the most exposed, representing the 96% of all sexual assaults in the country”*, though it also notes that *“Sexual assaults cases against boys and men remain poorly reported”* and that boys and men are more vulnerable to forced recruitment by armed forces and groups (p.12). The HNO underlines that children constitute one of the most affected groups *“representing more than 60 per cent of displaced persons, refugees or returned in need of protection.”*

- √ [CAR HNO 2017](#): The Protection Cluster chapter has identified different categories of vulnerable groups, which then require different tailored approaches to respond to their specific needs: IDPs, returnees, host communities, victims of the conflict, etc. In the same chapter, there is also a comprehensive analysis of specific protection challenges for these affected persons including relating to land housing and property, child protection and GBV. (p.22)
- **Draw on multiple sources of information when conducting assessments and analysis.** Protection and gender concerns should be integrated in standardized assessment tools to the extent possible; however, such tools are not always able to capture sensitive protection information. Encourage the use of both qualitative and quantitative methodologies during general assessments, use varied sources of information, request additional advice and analysis from protection and gender experts, and engage and consult affected people and communities.
 - √ [Yemen 2017 HNO](#): Perceptions assessments carried out in 2016 have substantially improved understanding of affected people's priorities and how they view the response. The results provide a wealth of information on sector-specific needs and priorities of affected persons and substantially improve the evidence base for an integrated response. (p.20-21)
 - √ [Chad 2017 HNO](#): The HNO is structured along 4 crises – food insecurity and malnutrition, population movements, health crises, and natural disasters (p.8). The HNO highlights the root causes of each of these crises, citing different sources of information, including National Surveys, Cluster Assessments, and protection-related studies.
 - √ [South Sudan 2017 HNO](#): The HNO provides a good example of using multiple sources with facts and figures to outline the psychological impact of the conflict on the affected population and the resulting needs: *“Three years of war have taken a major psychological toll on the population. An estimated 1 million children are believed to be in psychosocial distress, and a 2016 report by Amnesty International found that IDPs described experiencing a range of symptoms commonly associated with mental health disorders such as post-traumatic stress disorder (PTSD) and depression. This aligns with a study completed in July 2015 which found that 41 per cent of respondents showed symptoms of PTSD. The World Health Organization (WHO) estimates that in situations of armed conflict and other emergencies, the proportion of the population suffering from mild or moderate mental disorders rises from approximately 10 per cent to 15-20 per cent. In a live discussion on Kapoeta Sangaita FM to feed into the HNO, several community members highlighted the need for counselling and mental health care for the full recovery of the local population and meaningful peace-building to take place. There are only two psychiatrists, one psychiatric nurse, 30 psychologists and 20 community mental health workers in all of South Sudan, meaning that the country has only one mental health professional for every 220,000 people, less than half of the recommended minimum (one per 100,000 people).”* (p.5)
 - √ [Myanmar 2017 HNO](#): Good use of hyperlinks to allow easy access to more in-depth analysis (e.g. protection sector assessments). (p.22)
 - √ [Palestine 2017 HNO](#): A Key Issues section outlines priority problems/issues from the perspective of affected people themselves based on key informant interviews in 370 localities. (p.15)
- **Reflect underlying root causes and contributing factors.** This can include contextual factors (e.g. conflict or recent disaster); systemic factors (e.g. poverty, inequality and discrimination); or specific constraints (e.g. on freedom of movement). For example, women and girls, as well as minority or identity groups, may suffer disproportionately due to underlying structural inequalities and discrimination.
 - √ [Yemen 2017 HNO](#): The HNO notes that *“Even before March 25, 2015, when the conflict in Yemen escalated, the country faced enormous levels of humanitarian need, with 15.9 million people requiring some kind of humanitarian or protection assistance in late 2014. These needs stemmed from years of poverty, under-development, environmental decline, intermittent conflict, and weak rule of law – including widespread violations of human rights.”* (p.5)
 - √ [Colombia 2017 HNO](#): The HNO identifies restrictions on free movement and access to basic goods and services as among the key protection concerns that are deliberately employed as a mechanism of social control with serious consequences for people, in particular for minorities such as Afro-Colombian and indigenous groups. It also points to other underlying factors including the limited presence of the State in remote rural areas and limited socio-economic opportunities and notes, that *“The impact of the crisis facing the country continues to disproportionately impact women and girls, particularly afrocolombian and indigenous women and girls, who face difficult socio-economic conditions and face greater protection risks with regards to violence and sexual exploitation.”* (p.8)
 - √ [DRC 2017 HNO](#): In the chapter dedicated to the key Humanitarian Needs, the HNO identifies as one of three priorities vulnerabilities caused by limited access to basic goods and services as a result of protracted conflict and recurrent natural disasters. It states that *“The acute vulnerability is caused by loss of access to property, basic services and means of subsistence.”* (p.3)
- **Note if the crisis exacerbates pre-existing vulnerabilities or gives rise to new vulnerabilities.** For example, crises often increase entrenched patterns of inequality and discrimination, and may result in new ones. In this context it may be useful to consider the experience of previous crises in the country. For example, how did previous crisis impact people, including different age, gender or ethnic groups, or persons with disabilities.
 - √ [Colombia 2017 HNO](#): The HNO reflects the role of pre-existing inequality and discrimination based on gender and ethnicity, which combined with armed conflict and natural disasters has had adverse impact on women and girls. It specifically includes UNFPA findings on the rise in maternal mortality, pregnancy rates among young girls and reports of sexual abuse, and compares this to the situation to areas not affected by conflict and displacement (p.11).

➤ **Identify people’s capacities, coping-strategies and preferences.** People are active agents in their own protection and their capacities to protect themselves, coping mechanisms and preferences should inform assessments and planning. In some cases, this may also include negative or risky coping mechanisms that may need to be mitigated, such as early marriage, survival sex, livestock grazing in mined areas or firewood collection in risky areas.

- ✓ [Syria 2017 HNO](#): The HNO points to the increasing adoption of negative coping strategies: “...early marriage, begging, borrowing, child labour and child recruitment/use in the conflict are among some of the negative coping strategies households resort to in order to meet food requirements, disproportionately impacting the safety of women and girls.” (p.40)
- ✓ [Iraq 2017 HNO](#): The HNO identifies an increase in negative coping mechanisms particularly among IDPs, such as child marriage and child labour to cover basic needs: “A report covering the whole of Iraq shows 48 per cent of IDP families are living in locations where child labour is highlighted as the top child protection concern, followed by violence at home, child marriage, psychosocial distress and lack of services for children.” (p.15)
- ✓ [South Sudan 2017 HNO](#): In a paragraph outlining the scale of the degradation of the economic situation – the link is made to the impact in terms of negative coping mechanisms of families and increase in domestic violence: “Reports indicate that people are increasingly resorting to negative coping mechanisms, including child labour and child marriage. In Eastern Equatoria, child marriages are reported to have increased in late 2016 as families receive a bride price in exchange for their daughter. Intimate partner violence, which often rises during conflict and economic decline, accounts for 48 per cent of the incidents of gender-based violence reported to humanitarian partners.” (p.7)

➤ **Highlight any protection information gaps or needs for future assessments.** Significant data gaps on protection may exist; these should be identified and addressed in the course of the year, to the extent possible.

- ✓ [Colombia 2017 HNO](#): The HNO identifies and encourages partners to fill important data gaps, including overall lack of disaggregated data by sex, age and ethnic group and data on specific protection issues, such as GBV, child recruitment and school attendance. (p. 20)
- ✓ [Yemen 2017 HNO](#): Each sector includes a section on “Methodology for Needs Analysis” which gives a very useful overview of methodologies used and information gaps, and is complemented by a more thorough Annex on Assessments and information gaps as well as methodology. The HNO notes the general need for “more focused and statistically robust methods grounded in gender and protection analyses.” (p.44-49)
- ✓ [Iraq 2017 HNO](#): The HNO gives a useful overview of all existing and planned needs assessments, organized by title, location, lead organization, cluster and population type. (p.33-35). Information gaps are highlighted by specific sectors, e.g. CCCM underlines that “Stronger identification of displaced communities’ aspirations, complaints, gaps and return intentions or concerns is needed to inform policies and assistance to be provided to these communities” (p.25)
- ✓ [Chad 2017 HNO](#): In the last chapter dedicated to information gaps, data gaps are classified by crisis. For the population movement crisis, significant data gaps on protection requiring a better understanding and research include: a) numbers of people with specific needs among refugees, returnees, IDPs, and other vulnerable groups; b) A better protection monitoring system, particularly in areas where the most vulnerable groups are (camps, settlements, etc.).

➤ **Encourage clusters/sectors to integrate protection, gender and age analysis and priorities in their chapters.** As a cross-cutting issue, protection – as well as gender and age – should be reflected in all sector-specific needs overviews and not only in the Protection Cluster chapter.

- ✓ [Chad 2017 HNO](#): The HNO is structured by crisis (4 in total) rather than Clusters. Each of the crises sections, including the one on population movement, has a solid analysis of the root causes, reflects on the different categories of groups affected (refugees, IDPs, host communities, etc.) and their specific needs by region. Protection is identified as a key challenge in the conflict-affected areas, including in particular GBV related issues.
- ✓ [South Sudan 2017 HNO](#): The individual sector sections succinctly summarize specific vulnerable groups to be targeted in their sectors and why. CCCM, Health, WASH and Education sections reference the vulnerability of women and girls to gender based violence. Education references vulnerability of boys and young men to recruitment, and also outlines percentage of schools occupied by armed groups.
- ✓ [Palestine 2017 HNO](#): All sector sections outline how the current conflict and the blockade in particular impact needs and response. A dedicated section looks at priority gender needs across all sectors, including protection (p.11-12).

HUMANITARIAN RESPONSE PLANS

➤ **Include protection as a strategic objective and/or include in other objectives.** Violations of people’s rights may lie at the heart of their vulnerability, as either a cause or a consequence of conflict or disasters. Protection should be reflected prominently in the HRP, including in the Strategic Objectives. Make the objectives as clear and concrete as possible, ensure they reflect priorities identified in the HNO, and draw a clear link between them and concrete activities and indicators in the plan.

- ✓ [Palestine 2017 HRP](#): There is a dedicated strategic objective to “Protect the rights of Palestinians under occupation in accordance with IHL and IHRL” (p.3). The introduction clearly identifies the systematic denial of Palestinian rights as a driver of vulnerability and notes a “pervasive crisis of accountability continues, with no effective remedy for the vast

majority of alleged violations of international law." The Protection Strategic objective is multi-faceted, addressing the promotion of IHL and IHRL and accountability; the provision of specialized assistance/services to specific vulnerable groups, as well as protection mainstreaming. Strategic objective 2 (on ensuring access to essential services for the acutely vulnerable) also highlights promotion of the responsibility of the occupying power to provide for the wellbeing of the population under IHL.

- ✓ [Ukraine 2017 HRP](#): Strategic Objective 1 makes protection one of three overall priorities, notably, "*Advocate for and respond to the protection needs of conflict-affected people with due regard to international norms and standards.*" (p.8)
- ✓ [Yemen 2017 HRP](#): Strategic Objectives 2 commits the HCT to "*ensure that all assistance promotes the protection, safety and dignity of affected people, and is provided equitably to men, women, boys and girls.*" (p.9)
- ✓ [Syria 2017 HRP](#): Strategic Objective 2 focuses on protection, aiming to "[e]nhance the prevention and mitigation of protection risks, and respond to protection needs through supporting the protective environment in Syria, by promoting international law, IHL, HRL and through quality, principled assistance." (p. 9)
- ✓ [Colombia 2017 HRP](#): Strategic Objectives 1 and 2 both have a strong protection emphasis; the former focuses on saving lives and the latter specifically on preventing and mitigating protection risks. (p.12)
- ✓ [Iraq 2017 HRP](#): Two out of four strategic objectives have a strong protection emphasis. For example, strategic objective 3 reads "*Help people brutalized by violence cope and recover from trauma by providing specialized and targeted protection assistance.*" (p.11)
- ✓ [Myanmar 2017 HRP](#): Of four strategic objectives, two are strongly protection focused ("Ensuring the protection of civilians"; and "[m]eeting needs of displaced people and supporting efforts to achieve durable solutions"). (p.15)
- ✓ [DRC 2017 HRP](#): Strategic Objective 2 captures one of the key issues to be addressed in the response plan: "Protection of people affected by the humanitarian crisis, as well as ensuring respect of their human rights" (p.11).
- ✓ [CAR 2017 HRP](#): Strategic Objective 2 is protection focused, calling for strengthening the protection of affected populations, and a conflict-sensitive, *do no harm* approach by humanitarian actors (p.8)
- ✓ [South Sudan 2017 HRP](#): The HRP has a dedicated Strategic Objective (2): *Protect the rights and uphold the dignity of the most vulnerable*. This objective highlights the role of humanitarians in advocating to prevent further violence, calling on all parties to uphold their responsibilities under international humanitarian law, establishing effective and dignified services for survivors, and promoting programming that reduces the protection risks faced by different population groups, particularly women, girls and boys. (p.7)

➤ **Integrate protection throughout the HRP, including in the response strategy.** This can be done in different ways depending on the situation in country and priorities agreed by the HCT and the protection sector/cluster. The response strategy should, at a minimum, highlight key protection risks and concerns identified in the HNO and explain how the HCT intends to address these. Sectors/clusters must also work with protection actors to ensure that referral pathways are in place to respond to specific protection violations and risks. Avoid using terms such as protection or vulnerability in a vague, general manner: be as clear and specific as possible and highlight any particularly serious or prevalent issues. For example, if sexual and gender-based violence is an important concern, say it is.

- ✓ [Yemen 2017 HRP](#): The HRP highlights rights violations as a key concern and identifies protection and gender as two priority themes that will guide all response activities. This commitment is further elaborated in two dedicated sections on ensuring the centrality of protection and strengthening gender considerations (p. 15-18). The HRP also gives special attention to internal displacement (p.16).
- ✓ [Iraq 2017 HRP](#): The HRP highlights specific protection issues in the analysis and objectives, including housing, land and property issues and problems associated with explosive remnants of war and other explosive hazards. (p. 11 and onwards)
- ✓ [Syria 2017 HRP](#): The HRP identifies specific protection priorities, notably child labour and recruitment, early marriage and lack of documentation as well as Housing Land and Property issues. (p.10)
- ✓ [DRC 2017 HRP](#): The response strategy includes a specific section on the Centrality of Protection (p.14). Referring to the IASC Policy on Protection in Humanitarian Action, it clearly states that all partners involved in the HRP commit to placing protection at the centre of humanitarian action. This includes adopting a multisector approach to respond to specific protection needs and identifying accountability to affected populations as a key priority. The HRP also spells out how the HCT intends to strengthen its protection actions and assistance in 2017, for example by adopting a protection strategy. DRC is the first country to adopt the Core Humanitarian Standards as a key reference in its humanitarian plan; as reflected in strategic objective four of the plan (p.11).
- ✓ [Chad 2017 HRP](#): In the response strategy, there is a specific section on Protection Mainstreaming (p. 13). This outlines key aspects to take into account in order to integrate protection principles in the humanitarian response and the steps that the Protection Cluster and the HCT intend to put in place in 2017 including: training on protection mainstreaming, specific protection related assessments, analysis and tools.
- ✓ [Somalia 2017 HRP](#): The response strategy section identifies priorities for the HCT which respond to key protection risks identified in the HNO: "*Protect the rights of children and victims of sexual and gender-based violence, as well as civilian victims of violations in the conduct of armed conflict. Enhance protection information monitoring and analysis systems. Promote respect of humanitarian principles by military actors;*" and "*Protect freedom of movement, prevent forced evictions and promote and support the return and reintegration of the internally displaced persons and returnees.*" (p. 13)
- ✓ [Myanmar 2017 HRP](#) : The key protection concerns in different regions are summarized in the Overview of the Situation section. For example: "The top five protection threats faced by people in Rakhine are: limited freedom of movement, physical insecurity, gender-based violence, a lack of documentation, and people smuggling and human trafficking." (p.7)

- √ [Palestine 2017 HRP](#): Issues such as the blockade and pervasive restriction of freedom of movement as well as armed conflict and their implications are well reflected throughout.

➤ **Make sure protection is incorporated into the HPC monitoring phase.** Protection outcomes prioritised in the HRP should be reflected in the monitoring framework, including through dedicated indicators at the strategic and/or cluster/sector level, as relevant and feasible. Indicators should be disaggregated by sex and age. Humanitarian actors and coordination platforms (ICCG, all Clusters/sectors) should collect and share data and information, which is relevant to those indicators, as well as identified protection concerns more generally. Sectors/clusters must also contribute to ongoing protection analysis that informs timely and informed decision-making and advocacy by the HC and HCT. For monitoring protection mainstreaming in the response, the ICCG should identify and agree on key indicators which will inform on programme quality in general. It is recommended to use or develop indicators which can be tracked through existing tools such as multi-sectoral assessments undertaken on a regular basis or tools such as community perception surveys. The forthcoming GPC protection mainstreaming toolkit provides some examples of indicators.⁴

- √ [South Sudan 2017 HRP](#): Key protection outcomes and outcome indicators are identified as part of the monitoring framework attached to the strategic objective on protection: *Protect the rights and uphold the dignity of the most vulnerable*. Three key outcomes identified: “Civilian facilities – including schools, hospitals and humanitarian compounds – are not attacked, Vulnerable civilians are protected from significant threats, particularly gender based violence and forced recruitment, Vulnerable civilians can safely access humanitarian support.” Additionally, five key indicators are proposed: “# attacks against schools, # attacks against health facilities, # looting incidents affecting humanitarian operations, # children recruited by armed actors, # humanitarian access incidents.” (p.13)
- √ [Palestine 2017 HRP](#): The HRP sets out five indicators for the strategic objective on protection (p.34) while the different sectors clarify where they contribute to this strategic objective (namely Protection, Education, Health & Nutrition, and WASH). The Protection Sector indicators are quite elaborate (16 in total, p.41). While this might be an ambitious number for many HRPs/contexts to report against they provide good examples.
- √ [Libya 2017 HRP](#): In the monitoring framework, all indicators, baselines and targets are broken down by sex and age (p. 29).

➤ **Ensure protection is mainstreamed in the cluster/sector plans in the HRP.** The cluster/sector plans should explain how protection will be mainstreamed in sector-specific programming and activities. Encourage sectors/clusters to adopt a common approach by addressing jointly identified protection risks that affect all sectors/clusters, such as barriers to access to goods and services, by operationalizing the do no harm principle and/or by explaining how accountability and participation will be part of sector programming.

- √ [Syria 2017 HRP](#): Protection risk analysis was made an integral and mandatory part of the development and vetting process of each sectors’ strategy and projects in the HRP in order to promote and support a do no harm approach across the response and increase opportunities for a multi-sectoral approach to addressing protection threats and risks. Each sectoral plan includes a dedicated section on protection risks analysis and mitigating measures. (p.11)
- √ [Yemen 2017 HRP](#): The HCT commits to strengthen integrated approaches to key issues that cut across the response, including protection and gender equality. It identifies protection (gender and age) as key themes to guide all response activities. The cluster plans – except logistics and telecommunications - include a section on mainstreaming protection and gender and age outlining, for example, how they will improve access to services for vulnerable groups in their respective sectors or how they will ensure community participation in programming. (p. 30 onwards)
- √ [DRC 2017 HRP](#): DRC is the first country to adopt a multisector approach with the 2017-2019 HRP. Two of the four multisector strategies focus on the protection of people affected by the humanitarian crisis, and also give priority to the most vulnerable groups (p. 23).
- √ [Chad 2017 HRP](#): Each cluster plan includes two specific paragraphs on protection mainstreaming and AAP, which explain how the cluster plans to factor those aspects in their sectoral strategies and response plans. (p.22)
- √ [South Sudan 2017 HRP](#): The food security and livelihoods plan includes a good example of protection mainstreaming in a cluster plan with specific commitments: “*Targeting and site selection by FSL partners is informed by a context- and protection risk analysis so that food assistance supports the protection of the conflict-affected populations. This includes...: (i) an increased emphasis on providing assistance outside of the PoC sites; ii) ensuring that risks such as forced recruitment of children and gender-based violence are prevented when large populations gather to receive food assistance; (iii) enabling the most marginalized and vulnerable groups to access assistance; and (iv) ensuring that food assistance does not exacerbate tensions between different social groups. The FSL Cluster is also working to mainstream accountability to affected people and aims to support national NGOs in building capacity on cross-cutting issues.*” (p.19) The CCCM cluster plan sets out a renewed commitment to joint advocacy with the Protection Cluster on fundamental protection issues: to ensure IDPs are protected from physical harm and enjoy freedom of movement, and with the GBV sub-cluster on improving prevention and response. (p.16)
- √ [Palestine 2017 HRP](#): The HRP has a section on making protection central to the response, which notes that “*Cluster responses are guided by the need to ensure there is full respect for the rights of Palestinians in accordance with international law. Protection is mainstreamed throughout interventions in the HRP through protection-focused or protection-sensitive programming and advocacy efforts that call for respect for IHL and IHRL and accountability for violations.*” The SO on Protection provides good examples of indicators (5 in total, p.34) while the different Sectors clarify

where they contribute to this SO (namely Protection, Education, Health & Nutrition, and WASH). The Protection Sector indicators are quite elaborate (16 in total, p.41). While this might be an ambitious figure for many HRP/contexts to report against they provide good examples.

- ✓ [Myanmar 2017 HRP](#): The HRP contains a general commitment to protection, and several of the sectors reflect this commitment in their chapters. For example, the Education Sector makes clear linkages between education responses and how these address protection concerns (p.28). The Shelter/NFI Sector looks specifically at protecting dignity, security and privacy through provision of shelter/NFIs (p.33).

➤ **Reflect and address the situation of different groups.** People experience crisis differently based on gender, age and other factors, including characteristics (e.g. ethnic origin or religion), health (e.g. illness, injury or disability), status (e.g. IDP, refugee or migrant) and identity (e.g. LGBTI). This should be reflected throughout the response strategy and can also be highlighted in text boxes or dedicated sections.

- ✓ [Syria 2017 HRP](#): The HRP contains a specific section on cross-cutting issues, including protection, gender and accountability to affected people. Text boxes are used to highlight the situation of different groups, for example to reflect the multifaceted and differing needs of internally displaced persons, Palestinian refugees, children, adolescents and youth (p.15,16,19).
- ✓ [Ukraine 2017 HRP](#): The HRP puts primary emphasis on meeting the needs of vulnerable people, including the elderly, people with disabilities and with special needs, people affected by non-communicable diseases and children. It also contains a strong commitment to "vigorously apply" gender considerations, "considering the different needs of women, men, boys and girls". (p.14)
- ✓ [DRC 2017 HRP](#): The strategy includes a specific section on the prioritization of "the most vulnerable amongst the vulnerable" (p.13). In addition to adopting a multisectoral approach both at strategic and cluster-level, which aims at adjusting assistance to the needs of the different people targeted, the strategy spells out the different categories of vulnerable people to be assisted as a priority: "IDPs, returnees, refugees, hosting communities; victims of grave human rights violations and Gender Based Violence, non-accompanied/separated children, children recruited by armed forces/groups or whom recently left those; Acute malnourished people, people affected by epidemics, food insecure people in 'crisis phase'" (p.24).

➤ **Display statistics, ideally sex and age disaggregated (SADD), in a clear and user-friendly manner.** All HRP should include data tables that disaggregate key figures, such as people in need, by sex and age, as well as other relevant factors. Some HRP have taken a step further to display such data in a user-friendly manner on maps or in info-graphs. Such data should be consistent with figures included in the HNO.

- ✓ [Ukraine 2017 HRP](#): The HRP provides a useful info-graph containing an overview of people in need, broken down by sex and different age groups - including children, adults and the elderly – as well as other factors, including e.g. displacement in government controlled and non-government controlled areas. (p.14)
- ✓ [DRC 2017 HRP](#): In line with the HNO, which displays statistics disaggregated by sex, age and gender, the HRP provides a comprehensive range of disaggregated key figures that are analyzed and represented visually. These include gender based violence cases and grave violations of children's rights during armed conflict. (p.9)
- ✓ [CAR 2017 HRP](#): A comprehensive breakdown of key planning figures (people in need and people targeted) is included in annex to the plan (p.56). The table includes disaggregated data of people in need and people targeted by age, sex, gender and status per province.
- ✓ [Chad 2017 HRP](#): In addition to several tables showing key disaggregated data throughout the HRP, there is also a section in the annex that explains how each cluster has calculated figures of people in need and people targeted. (p.51)

➤ **Make linkages with existing protection strategies and other relevant planning frameworks.** The HRP should reflect the protection priorities in the HNO and existing protection strategies, especially the Protection Cluster Strategy and HCT protection strategy if it exists. Similarly, the HRP should make linkages with protection strategies and action plans of other key actors – such as human rights, development (e.g. the UNDAF), peacekeeping (e.g. the Mission POC strategy), and, if possible, national and local government (e.g. relevant National Action Plans). Where possible, this should include joint analysis and discussion about objectives, roles and responsibilities to ensure complementarity and minimize gaps and duplication.

- ✓ [Yemen 2017 HRP](#): The HRP hyperlinks and reflects priorities set out in the HCT's Protection strategy. (p.15)
- ✓ [Myanmar 2017 HRP](#): The strategy begins with an HCT commitment which references protection and helps outline a vision. It includes commitments to implementing the *Agenda for Humanity* in line with the outcomes of 2016 World Humanitarian Summit (WHS). In particular, it outlines out specific HCT commitments in line with WHS commitments on "Preventing and Ending Conflict", "Promoting respect for International and Human Rights law and for Humanitarian Principles" and "Leaving no one behind". It also commits to strengthening linkages between relief, recovery and development. (p.16-19)
- ✓ [CAR 2017 HNO](#): There is a specific section spelling out the approach adopted by the HCT to respond to the crisis, which clearly states that the centrality of protection and accountability to the affected communities are the foundations of the humanitarian action in CAR (p.9-10). The HRP refers to and reflects the key protection priorities identified in the HCT's Protection Cluster Strategy.

- √ [Chad 2017 HRP](#): The Protection Cluster plan includes a specific section where it underlines the importance of strengthening linkages with other actors, particularly the Government and development actors (p.31). It also spells out how the cluster plans to collaborate with these stakeholders to make sure that protection principles are the foundations of each other planning frameworks. In the annexes, there is a visual, which clearly shows how the HRP is aligned with the other planning frameworks (UNDAF, National Plan, etc.) to address the key needs identified, including the protection-related ones (p.49).
- √ [Sudan HRP 2017](#): The Recovery, Returns & Reintegration sector strategy makes linkages to the UNDAF and notes “close synergies with also be created with ...line Ministries, UNAMID, the World Bank and the private sector.” (p.38).

➤ **Explain how the HCT intends to engage and consult with affected people.**⁵ The HRP should reflect the HCT’s plans for engaging, communicating and consulting with affected people, including what mechanisms exists for feed-back or complaints. In some cases, individual sectors/clusters may also wish to reflect the mechanisms they have set up for this purpose.

- √ [Yemen 2017 HRP](#): The HRP has a dedicated section on accountability to affected people and community engagement, identified as a key priority. It outlines steps to improve accountability, in particular through the use of a Common Accountability Framework. Almost all cluster plans include a section on AAP, also outlining individual measures partners are implementing such as bilateral feedback mechanisms, pre-project assessments, etc. (p. 17 and onwards)
- √ [Iraq 2017 HRP](#): The HRP, in a dedicated section on accountability to affected people, reflects on past activities and outlines specific commitments and concrete steps planned to strengthen accountability to affected people in 2017 including by increasing awareness of and training in accountability to affected populations, promoting adherence to codes of conduct and humanitarian principles, rolling out the Real-Time Accountability Partnership to help prevent sexual exploitation and abuse amongst humanitarian partners and field staff, and strengthening the feedback channel from the call centre to operational partners, cluster members and national and local government counterparts. (p.16)
- √ [CAR 2017 HRP](#): A specific section spells out how the HCT intend to engage and consult with affected communities throughout the country (p.11). Different mechanisms designed to reflect AAP into the plan are referred to, including: putting in place a system to share the key humanitarian information with the affected people; setting up a feedback mechanism to get the populations’ perspective on the humanitarian action and factor it into the Plan; a Task Force – named “Communication with the Communities” – has been created to oversee and lead all the AAP related activities.
- √ [Chad 2017 HRP](#): The HRP includes a specific section on AAP, which sets out the strategies and mechanisms that the HCT has put in place to factor AAP in the response design and implementation; including the creation of an AAP Steering Committee to operationalize AAP, with the support of the Protection Cluster (p.14).

➤ **Make explicit reference to the applicable normative framework.** This should include both international law, which depending on the situation can include humanitarian, human rights and/or refugee law, as well as national law and frameworks. If possible, reflect that the State, as well as non-state armed actors in case of conflict, have a primary responsibility to ensure affected people receive protection and assistance.

- √ [Palestine 2017 HRP](#): The HRP notes that “*violations of IHL and IHRL are at the heart of ... the crisis, and are the main driver of humanitarian concerns in Palestine, providing the entry point for the response across all clusters*”. Accordingly, Strategic Objective 1 aims to “[p]rotect the rights of Palestinians under occupation in accordance with International Humanitarian Law (IHL) and International Human Rights Law (IHRL).” (p.8)

¹ This internal note is an update of the Examples of good practice on integrating protection in HNOs and HRPs: Practical tips and suggestions for OCHA Country Offices produced by PSB, PDSB and CRD in 2016.

² See the [IASC Protection Policy](#), endorsed in 2016. See also the [IASC Statement of the Centrality of Protection in Humanitarian Action](#), endorsed by IASC Principals in 2013. This commitment is also reflected in OCHA’s Strategic Framework and Management Plan, which applies to both OCHA HQ and country/regional offices worldwide.

³ For general guidance, please refer to the HNO Guidance Note and Templates and the HRP Guidance Note and Templates, produced by OCHA. See also the GPC’s [Quick Guide for Humanitarian Response Planning](#), GPC [Guidance on the Humanitarian Programming Cycle for Protection Clusters](#), and the GPC Review of the [Centrality of Protection in Humanitarian Action \(2016\)](#). For Syria’s guidance on protection risk assessment and analysis for HRP 2018, please contact: abousamrad@un.org.

⁴ Toolkit will be finalised and disseminated end of September. In the meantime, contact David Murphy, murphyd@un.org for the latest version.

⁵ For guidance on community engagement and consultation, see e.g. the OCHA Guidance Note on [Putting People at the Centre of Humanitarian Responses: Suggested actions for increased accountability throughout the humanitarian programme cycle](#) (2015); the IASC-EDG [Preliminary Guidance Note on Protection and Accountability to Affected Populations in the Humanitarian Programme Cycle](#) (2015); and the related fiche for [Suggested Actions for Inter-Cluster Coordination Groups](#) and [Suggested Actions for Cluster Groups](#), developed by the and fiches developed the IASC AAP/PSEA Task Team, Global Clusters and OCHA. For a specific example of a country-based AAP framework, see the [Yemen Common Accountability Framework](#) (2017).