4.7 Protection

Protection involves efforts to ensure that people caught up in disasters, conflict or violence, or who have been forcibly displaced, are safe and are offered the full protection of human rights.

This section defines protection. It discusses protection in naturally-triggered disasters and protection and forced displacement. It presents protection and urban warfare and protection and urban violence. The section identifies protection and particular groups, including children, women, lesbian, gay, bisexual, transgender and queer (LGBTQ+) people and people living with disabilities. It also discusses mental health and psychosocial support (MHPSS).

Protection is an enormous subject, cutting across all sectors. As such, this section relates closely to a number of others in this Good Practice Review, including violence, conflict, vulnerability, education, health and HLP rights.
4.7.1 Defining protection

Protection can be defined as ‘all activities aimed at ensuring full respect for the rights of the individual in accordance with the letter and the spirit of the relevant bodies of law, i.e. human rights law, international humanitarian law and refugee law’. 99 This definition, adopted by the ICRC, the IASC and a number of other agencies, explicitly ties protection into human rights and other bodies of law – protection is about securing human rights. A further, broader understanding, relating to protection in urban warfare, encompasses ‘immediate emergency activities pre- and post-bombing, as well as legal and human rights legislation and compliance’. 100

All humanitarian interventions should undertake a protection risk analysis, including the following questions:

- What are the existing/potential protection risks?
- Who is vulnerable to those risks?
- What capacities exist to deal with those risks, including local strategies, institutions or mechanisms that could be used and/or strengthened by international humanitarian actors (to avoid duplication of existing activities/structures)?
- How do/could potential risks interact with the planned project (could the project increase risks? Could risks impact on the project?)
- What mitigation measures can be put in place (to be regularly reassessed)?


For protection measures to work in urban areas – and as with almost certainly every other sectoral response – activities need to be cross-sectoral and multidisciplinary, with local

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Box 4.18 Protecting internally displaced communities in Somalia: experience from the Benadir region

‘Given the multi-dimensional nature of protection, multi-stakeholder engagement must be assured. The study findings indicate that IDP protection strategies should be integrated into various government sector plans and that community stakeholder engagement should be included in planning processes. It is imperative that protection activists adapt to the challenging conditions in the communities and promote advocacy and protection efforts to strengthen the resilience of IDPs at individual, household, and community levels.

‘The study proposes a systems-based framework to address protection challenges across the various resilience dimensions, including human capital, health, security, governance and social capital. An integrated institutional framework for the identification, inclusion and support for physical and rights-based protection would offer a galvanised approach to enhancing resilience.

‘The study recommends improvements to the government of Somalia’s existing IDP protection policy, which would help to ensure better identification, inclusion and support for the socioeconomic, physical, and rights-based protection of IDPs. Integrating legal assistance programmes in the current protection and resilience programmes would play a crucial role to support IDPs to access public justice services. Ensuring documentation of IDPs through a central registry and the creation of a special agency for IDPs is also proposed.’


actors as much as possible in the lead. The case study in Box 4.18, summarising findings from research on an IDP protection response in Somalia, illustrates and reinforces this basic principle.


4.7.2 Protection in naturally-triggered disasters

Naturally-triggered disasters usually expose existing vulnerabilities, including: 102

- Lack of safety and security, for example living in temporary, insecure shelter and crime.
- Family separation, particularly affecting more vulnerable groups, such as children, older people and people with disabilities.
- Loss of documentation.
- Weak law enforcement.
- Gender-based violence (discussed below).
- Forced relocation.
- Unequal access to assistance and discrimination in aid provision.
- Abuse, neglect and exploitation of children (see below) and vulnerable adults.
- Loss of communication means/channels and poor complaints mechanisms.
- Lack of access to livelihood opportunities and service providers.

The IASC’s operational guidelines for protection in naturally-triggered disaster situations is organised into four groups as follows:

1. Protection of life; security and physical integrity of the person; and family ties, for example life-saving measures, in particular evacuation and protection against family separation.

2. Protection of rights related to the provision of food, health, shelter and education.

3. Protection of rights relating to HLP (see Section 4.1), livelihoods (see Section 4.5) and education (see Section 4.6).

4. Protection of rights relating to documentation, freedom of movement, re-establishing family ties and assembly and electoral rights.

Box 4.19 Protection after the 2010 Haiti earthquake

‘In response to reports of gender-based violence in bathrooms at night, young women were consulted on the design and placement of toilets. Narrow and steep passageways made of loose gravel were paved and widened or made into staircases with handrails. Retaining walls were important risk reduction infrastructure installed to prevent landslides and create more livable space. However, the walls also created significant drop offs, potentially dangerous to children. To protect children, guardrails were erected at child height at every drop off. Guardrails were also located along the length of the ravine and on the footbridges installed by the program. The process, as much as the physical improvements, reduced the vulnerability of the community.

‘In addition to the physical improvements, [the NGO] KATYE aimed to establish the social structures necessary for a safe community. A team of community members worked with the protection team to identify and address potential protection violations such as mitigating the risk of corruption and exploitation related to CFW [cash for work]. They participated in trainings on potential abuses of the CFW system provided to each CFW participant. Supervisors were thoroughly versed in the zero tolerance policy and systems for reporting violations and the protection team followed up every reported case. Relative to committees focused on water management, sustaining these teams proved more challenging. At minimum, these activities prevented people’s exposure to further harm as a result of project activities. At best, they are a sustained system for identifying and addressing protection issues in a vulnerable community.’


As well as pre-existing vulnerabilities, the Global Protection Cluster notes that:

Disasters often give rise to new protection concerns. Population displacement, weak law enforcement and the breakdown of social safety mechanisms can heighten the risks of looting, gender-based violence and child trafficking. When such issues are not addressed in the initial stages of a humanitarian response, violations are both more likely to occur and more likely to continue after the emergency is over. Responses include simple measures such as floodlighting and lockable shelter kits, and more technical programmes such as family tracing, training of border guards, and monitoring of vulnerable groups.\(^{103}\)

4.7.3 Protection and forced displacement

Forcibly displaced people face a number of challenges, including difficulties accessing employment and livelihood opportunities (which may be a particular problem for refugees, who may not legally be allowed to work), violence, finding somewhere to live, accessing education and discrimination.

Concerning refugees, UNHCR emphasises the need for registration as an essential tool for protection against *refoulement*, accessing basic rights, identifying specific needs, family reunification and the pursuit of durable solutions. Registration is also essential for needs assessment, programme planning and management of operations, and in engaging with official authorities, the police and other public bodies.

There are also many reasons why refugees and IDPs avoid being registered, including protection concerns. These populations can be targeted for assistance in cities without the need for registration through area-based approaches that identify neighbourhoods hosting the highest numbers of IDPs and refugees, although this leaves IDPs and refugees living outside of these areas unassisted. Profiling exercises are also useful to identify areas where these people are living and in understanding their protection needs.

The US State Department’s Bureau of Population, Refugees, and Migration (PRM)’s guidance on refugee protection in urban areas emphasises the need to identify and support the most vulnerable and prioritise access to services and legal protection, while also undertaking efforts that provide wider benefits to community members.\(^{104}\) Community-based protection is emphasised by the ICRC, which states that its approach is ‘to ensure that [ICRC’s] activities on behalf of IDPs and those at risk of displacement support, rather than undermine, communities’ and individuals’ self-protection mechanisms and coping strategies’.\(^{105}\)


4.7.4 Protection and urban warfare

A 2017 research report concerning civilian protection in urban conflict found that a wide range of actors engage in what can broadly be termed as protection: ‘organisations and individuals engage in what can be loosely termed civilian protection of some type, without necessarily being aware of how this links to international norms and practices or even perceiving themselves as doing protection work’. The report makes the following recommendations to improve civilian protection:

- ‘Develop more inclusive ways to relate international protection norms and frameworks and build a closer engagement with local actors and their understandings, activities and capabilities.
- Extend guidance and information within international humanitarian law and other binding frameworks to operationalise first response activities with a focus on ground-level governance, coordination and capacities.
- Widen the narrative on what constitutes “humanitarian” response, focusing firstly on local capabilities and how international actors can support these, not the other way round.
- Adopt more inclusive mechanisms that integrate a larger set of first response actors and other stakeholders involved in civilian protection.’


4.7.5 Protection and urban violence

IRC’s 2017 report *Violence in the City* identifies a number of drivers of urban violence, organised according to four levels: structural, community, familial and individual. These are shown in Figure 4.3.

A 2016 working paper on humanitarian protection in violent urban contexts observes that ‘protection work in violent urban settings is characterized by having blurred lines throughout the elements and approaches that interact between each other. For example, this interaction includes blurred lines between emergency and development; rights based approach and needs based approach, and assistance and protection’. The research concludes that, as a result: ‘[this] implies that in urban violence humanitarian actors rarely
tackle the urban problematic with a single approach, but combine different approaches and integrate various forms of response.\textsuperscript{106}

Urban violence is discussed further in Section 1.2.2.

4.7.6 Protection and particular groups

This section reviews protection in relation to particular groups.

Child protection

A 2015 study of child friendly spaces (CFS) in humanitarian emergencies notes that the use of CFS is ‘profoundly different’ in urban areas than in camps, and points to the need to ‘evolve strategies that are more effective in urban settings, where there are so many other activities that children are able to engage in. Increasingly, emergency response requires adjustments to programming to reflect the prevailing and unique challenges of an urban environment. Thus, it is critically important to examine if CFS is the best strategic approach in urban setting[s] for highly mobile population[s]’.\(^{107}\)

A study of community-based child protection mechanisms among urban refugees in Kampala\(^{108}\) found that going to school was ‘the most effective way to protect refugee children from harm … The protective factor mentioned most commonly was that while a child is in school, he or she is safe, supervised and, most of all, busy’. Conversely, not having access to formal education was considered the greatest threat to protection: ‘Young girls were said to be at risk of rape, more so than boys, especially if they were out of school’.

The Child Protection Minimum Standards (CPMS) comprise guidance and information concerning child protection in emergencies, though there is no distinction between rural and urban settings. See https://alliancecpha.org/cpms/.


Further information relating to child protection can also be found at:


**Mental health and psychosocial support**

One global review of MPHSS concludes that ‘There is a lack of guidance on how to support MHPSS programs in non-emergency and/or urban settings’.\(^{109}\) UNHCR’s *Operational Guidance: Mental Health and Psychosocial Support Programming for Refugee Operations* observes that organising MPHSS interventions in urban settings presents problems in terms of access, identifying who is particularly vulnerable and developing appropriate levels and types of support.\(^{110}\) Examples of what has worked include:

• Psychosocial case managers who can connect vulnerable refugees to support services.

• Work to strengthen existing health services to enable refugee access (see Section 4.8 on health).

• Community centres that include psychosocial support within other activities, such as livelihoods development/support.

• Using volunteers to set up support groups and make home visits.

• Identifying and ensuring access to existing mental health services.

• Opening phone hotlines for general information and emergency response.

Generic guidance sources containing information relevant to urban practice include:


Psychosocial support is also discussed in Section 4.6 on education in emergencies.

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Box 4.20  MHPSS provision for refugees in Costa Rica

‘Casa de Derechos [House of Rights] is a community center that is a joint effort between UNHCR, the Municipality of Desamparados and other implementing partners, in San Jose, Costa Rica. Of the 20,000 or so refugees in Costa Rica, the majority are Colombian, and have resided in urban areas for more than 8 years. UNHCR’s operation is focused on local integration of refugees, and as such, supports a number of activities, such as Casa de Derechos, that provides services and activities to achieve this durable solution.

‘The center provides a range of services and activities, including microfinance, public health outreach, legal services and support groups to refugees and the local community. “Diverse groups” of members of the refugee population have been established to support youth, men and women to discuss common problems and interests. The center hosts a number of programs provided by other agencies and partners, including a legal aid clinic, a program focusing on youth and vocational training, and a labour rights program.

‘The focus on multiple, integrated activities came from recognition from UNHCR and other actors that Colombian refugees often had a range of mental health and psychosocial issues such that “it’s going to be quite difficult for them to integrate because maybe they have so many other issues that they need to resolve somehow before getting to the point where they can actually apply for a job and go to the job interview and actually get the job or use micro credit effectively.” The center also responds specifically to the needs of urban refugees in this context, given in San Jose, “[r]efugees don’t have any places where they would naturally get together. So we needed to establish those bases for them. They might not know any other refugees. So, it’s about trying to facilitate those basic processes.”

‘There is a specific focus within the center on survivors of SGBV, who are able to access counselling and support groups. An evaluation of UNHCR’s AGDM activities described this program as “a model for dealing with SGBV cases,” given staff are well-trained in provision of legal and psychosocial support, and partner organisations refer SGBV survivors to the center for support. As such, the center provides both Level 2 and Level 3 activities from the Intervention Pyramid, providing focused and specialised support to SGBV survivors, and activating social support networks amongst refugees through provision of a place to meet and interact, as well as provision of other services to facilitate local integration’.

Gender-based violence

The IASC defines gender-based violence (GBV) as ‘an umbrella term for any harmful act that is perpetrated against a person’s will, and that is based on socially ascribed [gender] differences between males and females’.\(^\text{111}\)

The Women’s Refugee Commission (WRC)’s Urban Gender-Based Violence Risk Assessment Guidance notes that ‘Refugees living in cities face high risks of gender-based violence (GBV), often on a daily basis. Some of these risks affect members of the host community as well. Where refugee women, for instance, experience sexual harassment or unwanted touching when taking public transportation, it may be the case that all women in that city encounter similar threats whenever they board a bus or take the metro’. The guidance assessment asks questions concerning transport, urban isolation, employment and livelihoods and housing.


Sources of guidance on tackling GBV include:


Lesbian, gay, bisexual, transgender and queer (LGBTQ+) people

A 2013 study of sexually and gender non-conforming (SGN) urban refugees in Mexico, South Africa and Uganda documented protection concerns including ‘commonplace’ assaults by the authorities, common assaults by local populations and other refugees and widespread discrimination, leading to reduced access to healthcare, information and social networks.

The study provided a number of recommendations for improving protection, covering awareness training, building SGN networks and advocacy. The full report is Organisation for Refugees, Asylum and Migration (ORAM), *Blind Alleys: The Unseen Struggles of Lesbian, Gay, Bisexual, Transgender and Intersex Urban Refugees in Mexico, Uganda and South Africa*, 2013 (www.alnap.org/system/files/content/resource/files/main/oram-ba-synthesiseng-lr.pdf).

See also the chapter on LGBT refugees in WRC, *Mean Streets*, cited above.

Concerning naturally-triggered disasters, a 2018 research report from Oxfam states that:

> criminalisation, discrimination and marginalisation creates vulnerabilities before disasters, leading to specific and disproportionate disaster impact on gender and sexual minorities. Systemic institutional and societal discrimination in accessing justice, health, education, employment, housing, and other services does not go away after a disaster, neither does marginalisation due to exclusion from families, communities, religious and other organisations.112

The report also found that ‘humanitarian programs are often blind to the vulnerabilities, needs and strengths of sexual and gender minorities’, and that ‘Assumptions underlying mainstream programs may inadvertently exclude some sexual and gender minorities, or may exacerbate pre-disaster marginalisation’.

People with disabilities

A 2008 *Resource Kit for Fieldworkers* concerning disabilities among refugees and conflict-affected populations observes that ‘Problems of physical accessibility were often worse for refugees living in urban areas [compared to camps], where the opportunities to adapt or modify physical infrastructure were much more limited’. Unable to leave their homes or move around easily, ‘many refugees with disabilities faced greater levels of isolation than before their displacement’. Refugees with disabilities also typically have little contact with local displaced people’s organisations’.113 Other research on disabled people forcibly

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Box 4.21 Making disaster risk reduction and relief programmes LGBTI-inclusive: lessons from Nepal

Research on post-disaster and crisis situations demonstrates that emergencies often exacerbate prejudices and make marginalised people more vulnerable. Although disaster risk reduction (DRR) and relief protocols are increasingly sensitive to the needs of at-risk and vulnerable populations, the specific vulnerabilities of LGBTI people are often overlooked. Nepal offers some compelling examples for implementing LGBTI-inclusive DRR and relief policies and protocols. With full legal protections for LGBTI people (including legal recognition for a third gender category marked “third gender” or “other” on documents and registers, including the federal census), the local political landscape is conducive.

Nepal is also highly disaster-prone. While implementation of LGBTI-friendly DRR and relief programmes has only just begun, Nepal’s experience is indicative of how improvements to existing programmes and policies can be put into practice around the world. LGBTI people may live in non-traditional arrangements. For example, in societies where having children in the household substantiates the claim of having established a “family”, LGBTI people living without children in their homes can suffer.

The scope of inclusion

In relief policies and protocols, there are several important considerations for ensuring inclusion of the LGBTI population. These include, but are not limited to:

- ‘How the definition of “family” or “household” may affect same-sex couples and their households, groups of people who do not live in traditional family units and homeless people or people who migrate. Red Cross-Nepal’s definition of “family unit” includes non-traditional and non-heterosexual groups of people living together.

- ‘How transgender (or, more broadly, non-male, non-female) people can safely access facilities such as health clinics, bathrooms and shelters which are male/female gender-segregated. The construction of Nepal’s first gender-inclusive public toilet in Nepalgunj demonstrates the government’s commitment to inclusive facilities.

- ‘How government-issued identification documents are used to validate citizens or grant access to assistance, and how this might affect people whose current appearance does not match the gender listed and the photo presented on the documents. The government of Nepal recently implemented a 2007 Supreme Court decision to issue citizenship certificates and other documents with the gender designation ‘other’ based on self-identification.
Box 4.21  (continued)

- ‘How people living with HIV/AIDS can access appropriate Anti-Retroviral Therapy (ART) in a safe and timely manner. Nepal currently stocks eight months-worth of ART supplies in the central Kathmandu warehouse.

- ‘How all data collection and intake surveys, interfaces and databases can be adjusted to capture meaningful data on LGBTI populations in emergency situations.

‘As aid organisations become more LGBTI-inclusive, it will be crucial to consider local legal systems and consult regularly with local NGOs and experts. Not only will this improve the nuance of programming, but it will also empower LGBTI people and organisations to act in the wake of disasters. As Nepal’s experience demonstrates, having a friendly legal environment and political landscape can expedite inclusive policies. Nonetheless, small changes to DRR and relief policies across legal and political contexts can prevent significant injury and loss of life, and ensure the continuation of important LGBTI protection and human rights activities despite disasters.’


displaced from Syria likewise found that ‘Persons with disabilities in these communities are not very visible. This was illustrated by the fact that leaders sometimes denied the existence of such people in communities’. The research notes a range of challenges facing disabled people, including buying and preparing food, limited employment opportunities and unsuitable accommodation.


Box 4.22 Protecting urban refugee women and girls with disabilities from abuse and discrimination in Kenya

In 2016 the Kenyan network Women Challenged to Challenge (WCC) ‘identified refugee women and girls with disabilities as a priority group in all of their programs. The organization started assessing the situations of urban refugee women with disabilities through home visits, in order to better understand the challenges they face. WCC facilitated 20 urban refugee women with disabilities’ participation in the 2016 Humanitarian Action Training for Women Leaders of Disabled Persons’ Organizations (DPOs) organized by WRC. This training presented an opportunity for the women refugees to interact, and share their experiences, with key actors such as UN Women, HIAS, the International Rescue Committee (IRC) and DPOs. As a result of this training, refugee women with disabilities were able to strengthen their advocacy messages and learned from the experiences of those involved in Gender-Based Violence (GBV) programs.

‘Following these activities, WCC developed a new training program for urban refugees with disabilities in Nairobi. This program was described as a “lifechanging event” by all of the women attending. The women learned about economic empowerment, sexual and reproductive health, and legal rights. They also developed their self-esteem and discovered that they were not alone in their situation’.


See also:


